Department of Human Services
Office of Mental Health and Substance Abuse Services
Attention: Laurie Madera, Bureau of Policy, Planning and Program Development Commonwealth Towers
303 Walnut Street $11^{\text {th }}$ floor
Harrisburg, PA 17105
August 3, 2022
55 Pa.Code Chapter 5230
Regulation No. 14-548
COMHAR is a non-profit Community Organization in Philadelphia providing Psychiatric Rehabilitative Services to individuals who have a Serious Mental Illness, and we are writing in response to the purposed regulation changes No. 14-548.

55 Pa.Code Chapter 5230 has been published as an "as proposed" amendment at htto://www.pacodeandbulle:m.gov/Display/pabull?file=/secure/pabulletin/data/vol52/52-28/1008.html Public comment is due by August 8, 2021.

COMHAR AGREES WITH THE SUPPORT OF THE FOLLOWING REGULATIONS

## Support:

- Inclusion of services for Youth and Young Adults (YYA)
- Increasing the number of eligible diagnoses
- Requiring CFRP certification for PRS programs that serve YYA
- Elimination of signature requirement on daily entries
- Elimination of requirement for face-to-face supervision
- Expanding the definition of the Licensed Practitioner of the Healing Arts (LPHA)

Revision of Nondiscrimination language to be more diverse

## COMHAR'S AREAS OF CONCERN ARE LISTED BELOW BY CODE, WITH JUSTIFICATION

## Regulatory areas of concern:

Preamble and $\S 5230.3$ Definitions - COMHAR supports PAPRS concern with $\S 5230.3$ Definitions as stated below:

Use of the term telehealth is vague; it is used in Preamble but not in Annex. How will it be added to regulations? Implies use in groups, what does this mean? Can it also be used in individual? Is it defined as phone and video or something different?

- A functional assessment will be completed within 20 sessions not to exceed 60 calendar days.
- The functional assessment will show the impairment or not and then the person would be set up goals in an IRP or be referred out to other services.
$\S 5230.31$ Admission requirements (c)(3)
COMHAR agrees with PAPRS comments below:
Asking the LPHA to detail the expected benefit of PRS is unnecessary and adds burden onto PRS providers through recreating forms and overseeing proper completion by LPHA. LPHA must include documentation - of what?

The role of LPHA should be to identify the condition leading to the Functional Impairment; the expected benefit of PRS is always improved functioning. Suggest elimination of requirement for documenting anticipated benefit. Use the Peer Support Bulletin for language to modify Functional Impairment definition.
§5230.32 Continued stay requirements (b)(2)(i)
COMHAR agrees with PAPRS comments below:
Suggest keeping the term skill deficit.

## $\S 5230.51$ Staff qualifications

COMHAR agrees with PAPRS comments below:
Is the CFRP only required for programs servicing YYA population? What is the standard for staff working in YYA programs regarding PRS Specialist vs PRS worker? Clarification is needed.

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§5230.54 Group Services (a)(3), (b), (f.1)
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(3) When an individual receives a group service in a home, all other individuals receiving the group service must be in another location.

COMHAR disagrees with this regulation because it prevents peer support or inclusion of a peer working on the same goal together. Also, individuals who live in the same residence (i.e. congregate setting) may have a similar goal and one individual should not be required to be in a different location. This is counter indicative. (b) states group services delivered in the community shall be limited to individuals who have IRP goals that specify the need for services in the community.

COMHAR suggests that the assessment is updated when the individuals need changes, but not when the diagnosis changes because other support services (such as Clubhouse) may not be made aware of a diagnosis change, especially if separate from clinical treatments.
§5230.62 Individual rehabilitation plan (d)(5) -
COMHAR agrees with allowing for consent to be documented without individual's signature.
§5230.63 Daily entry (4)
COMHAR agrees with PAPRS comments below:
Agree with eliminating requirement for individual's signature on the Daily Entry.
§5230.81 - (iv), (iv.1)
COMHAR suggests further explanation about the reason for capturing this information, which focuses on individuals without a history of an SMI diagnosis as defined in 5230.31(Admission Requirements) (a)(2) and (iv.i) length of stay without a SMI diagnosis related to admission criteria. Without clear explanation this requirement appears to be unnecessary and excessive reporting.

In closing, we hope that you will consider our support, concerns, recommendations and suggestions when making the changes to the PRS regulations No. 14-548.

Thank you for your time and consideration. If you have any questions, I can be reached at 215-4356548.

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