

Glossary

Page posted: 3/6/24

[C](#) | [D](#) | [E](#) | [F](#) | [G](#) | [H](#) | [I](#) | [J](#) | [K](#) | [L](#) | [M](#) | [N](#) | [O](#) | [P](#) | [Q](#) | [R](#) | [S](#) | [T](#) | [U](#) | [V](#) | [W](#) | [X](#) | [Y](#) | [Z](#)

Chemical restraint: The administration of a drug or medication to control a person's behavior or restrict a person's freedom of movement. Chemical restraint is not a standard treatment or dosage for a person's medical or psychological condition ([Minn. Stat. §245D.02, subd. 3b](#)).

Cognitive behavioral therapy (CBT): A short-term, goal-oriented therapeutic intervention that blends cognitive and behavioral therapy. A therapist may use CBT to help a person:

- Identify distorted or unhelpful thinking patterns.
- Recognize and change inaccurate or irrational beliefs.
- Relate positively to others.
- Change behaviors.

Comprehensive mental health assessment: A diagnostic assessment combined with a review of a person's:

- Physical health.
- History of the present illness.
- Previous mental health, physical and medication history.
- Relevant personal and family history.
- Personal strengths and assets.

D

Diagnostic assessment (DA): A report that documents the clinical and functional face-to-face evaluation of a person's mental health (refer to [MHCP Provider Manual – Mental Health Services: DA](#)).

Dialectical behavior therapy (DBT): A therapeutic intervention that aims to teach a person the skills to regulate emotions, improve relationships, handle stress and be mindful. DBT emphasizes validation or acceptance of uncomfortable thoughts, feelings and behaviors instead of struggling with them. The therapist uses DBT to:

- Assure the person that their behavior and feelings are valid and understandable.
- Help the person find a balance between acceptance and change.
- Help the person develop new skills (e.g., coping skills, distress tolerance and mindfulness practices).
- Coach the person to understand their responsibility to change their disruptive behavior.

E

Expanded support team: The members of a support team defined in [Minn. Stat. §245D.02, subd. 34](#) and a licensed health or mental health professional or other licensed, certified or qualified professionals or consultants working with the person and included in the team at the request of the person or the person's legal representative ([Minn. Stat. §245D.02, subd. 8b](#)).

F

4+1 questions tool: A person-centered tool that can help 245D service providers learn from their efforts and develop next steps to support a person taking medication. The 4+1 questions tool begins with a question the person's expanded support team wants to answer. For more information, refer to [Psychotropic Medication Manual – Tool: 4+1 questions](#).

Functional behavior assessment (FBA): An assessment that operationally defines the target behaviors, identifies the situations in which the target behaviors are likely to occur and not occur and generates a hypothesis of why the behaviors occur. A functional behavior assessment must be conducted by a qualified professional, consist of direct observation and assess one or more of the following elements:

- Biological factors.
- Psychological factors.
- Environmental factors.

- Quality of life indicators based on the person's goals and needs within the domains of a meaningful life ([Minn. Rule 9544.0020, subp. 21](#)).

I

Important to/important for tool: A person-centered tool that supports the person's expanded support team in learning more about the person — what is important for the person and what is important to the person as part of their quality of life. For more information, refer to [Psychotropic Medication Manual – Tool: Important to/important for tool](#).

L

Legal representative: The parent of a person younger than age 18, a court-appointed guardian or other representative with legal authority to make decisions about services for a person. Other representatives with legal authority to make decisions include but are not limited to a health care agent or an attorney-in-fact authorized through a health care directive or power of attorney ([Minn. Stat. §245D.02, subd. 12](#)).

M

Mental health professional: A person who is qualified according to the mental health professional qualifications in [Minn. Stat. §245I.04, subd. 2](#).

N

Neurofeedback: A form of therapy that measures biological responses and provides a feedback signal. A therapist uses neurofeedback to teach a person self-control of brain functions.

P

Person-centered planning (PCP): A process to create a positive and meaningful life for a person by building on their interests and strengths. It focuses on a person and what they want for the future. There are many different approaches to person-centered planning.

Person-centered practices: A way of ensuring people who receive supports and services have the same rights and responsibilities as other people. This includes having control over their lives, making their own choices and contributing to the community in a way that makes sense for themselves.

Person-centered practices include:

- Tools everyone can use to learn more about a person.
- Person-centered planning.
- Person-centered changes made in schools and human services settings.

Positive behavior support (PBS) plans: A set of strategies used to increase a person's self-determination and quality of life while eliminating or decreasing the occurrence of interfering behaviors. The primary purposes of a PBS plan are to:

- Teach new skills.
- Maintain skills.
- Enhance environmental settings.
- Develop social networks and activities.
- Ensure person-centered choices.
- Develop communication-based solutions that will help improve overall well-being.

A PBS plan should describe specific strategies in detail, including:

- Proactive strategies.
- Strategies to teach alternative behaviors.
- Reinforcement strategies.
- Positive responses to problems.

Positive Support Transition Plan (PSTP): A plan to implement positive support strategies and phase out prohibited or restricted interventions. Support providers use the content entered into a PSTP as a training guide for direct support professionals who assist a person who receives services.

PRN: An acronym for "pro re nata," which is a Latin phrase meaning "as the circumstance arises." Many people take medications as needed (i.e., as a PRN), instead of on a regular schedule.

Psychoeducation: A therapeutic intervention that provides education and resources in an empathetic and supportive environment. The therapist uses psychoeducation to:

- Teach the person problem-solving and communication skills.
- Help the person and their loved ones better understand and cope with mental health concerns.
- Improve family well-being.
- Lower rates of relapse.
- Improve recovery.

Psychotherapy: A general approach to treat mental health symptoms by talking with a psychiatrist, psychologist or other mental health provider. The therapist uses psychotherapy to:

- Reduce the person's mental health symptoms.
- Increase the person's functioning.

Psychotropic medication: Any medication prescribed to treat the symptoms of mental illness that affect thought processes, mood, sleep or behavior. The major classes of psychotropic medication are antipsychotic (neuroleptic), antidepressant, antianxiety, mood stabilizers, anticonvulsants, and stimulants and nonstimulants for the treatment of attention deficit/hyperactivity disorder. Other miscellaneous medications are considered to be a psychotropic medication when they are specifically prescribed to treat a mental illness or to control or alter behavior ([Minn. Stat. §245D.02, subd. 27](#)).

Q

Qualified professional: A role defined separately for each type of service and license. For more information, refer to qualified professional as defined in [Minn. R. 9544.0020, subp. 47](#).

Quality-of-life assessment: An assessment that tracks improvements or declines in a person's overall quality of life. It measures important areas of life that generally can be categorized into broader domains. For example, quality-of-life domains could include:

- Emotional well-being.
- Interpersonal relationships.
- Material well-being.
- Personal development.
- Physical well-being.
- Self-determination.
- Social inclusion.
- Rights.

R

Relationship charting tool: A person-centered tool that can help identify important people in a person's life, including their roles and how relationships change over time. The information gathered with this tool must be based on what the person feels about the relationships being charted. It is a way for the person to express who they want and do not want to be involved in the support planning process. For more information, refer to [Psychotropic Medication Manual – Tool: Relationship charting](#).

T

Therapeutic drug monitoring (TDM): A laboratory test that measures the amount of certain medications in a person's blood. It can help the licensed practitioner determine if a person is taking the best dose of medication.

Trauma-informed supports: A positive support practice that considers the effects of trauma and builds supports to create a trusting and healing space without retraumatizing a person.

W

What's working/not working tool: A person-centered tool that can help analyze an issue across multiple perspectives to both:

- Find common ground.
- Build a plan of action to address issues.

When using this tool, the provider must ensure all people feel their input is valued and the tool accurately reflects their perspectives. The tool starts with common ground — what is working and makes sense. It is important to remain unconditionally constructive and to work in partnership with others in the person's circle of support. For more information, refer to [Psychotropic Medication Manual – Tool: What's working/not working](#).

