

# Audit Checklist

## General

### Accommodations

ORR-Accessibility	The building/program site is accessible to all consumers who receive services. There are not items that impede the consumers from moving freely in common areas of the facility.
Policies and Procedures for Accommodations	The provider has proof of related policies/procedures for accommodations. These Policies should include how provider routinely identifies and addresses individual and systemic needs. Will assure access and accommodation of persons with Limited-English proficiency (LEP), assure system sensitivity and accommodation of diverse ethnic and cultural backgrounds, accommodation of individuals with communication impairments (including persons who do not use verbal language to communicate or who use alternative forms of communication, assure persons with visual, hearing or other physical impairments and mobility challenges are accommodated.
Provider Responsiveness	Provider demonstrates responsiveness to individual client needs (language, physical access accommodations, cultural needs, etc.)
Training for Accommodations	Provider has proof of training relating to accommodations (cultural diversity, disability sensitivity, LEP, etc.) Accommodations training needs to include any special trainings needed for consumer accommodations such as lifts, sign language, diabetes, etc.

### Competencies

Code of Conduct	Provider has a code of conduct for staff.
Competency Policy: Orientation Training	Provider has human resource procedures that address SCCMHA competencies for Orientation/training.
Competency Policy: Performance Monitoring	Provider has human resource procedures that address SCCMHA competencies for Performance Monitoring (evaluations). Provider will conduct routine performance evaluations on an annual basis at minimum.
Competency Policy: Staff Pre-hire screening	Provider has human resource procedures that address SCCMHA competencies for staff pre-hire screening. This should include Criminal Background checks and Recipient Rights checks, as well as licensing/credential checks, where applicable.
Human Resources Policy	Staff are credentialed, licensed, and policy is followed for appropriate program type. All roles providing services to consumers will be described in job descriptions, candidates for positions will be qualified against requirements and duties contained in job descriptions.
Job Descriptions on site	Job descriptions are available and are on file at provider location.
Services Documented	Services are provided appropriately and documented.
Staff Knowledge, Skills, Experience	Staff has the knowledge and skills to meet the needs and desired outcomes of the clients, including experience in working with persons with mental health needs.
Training Minimum Standards	Minimum training standard for service type is met based upon SCCMHA Training Grid and is documented in staff file. Looking for 80% compliance overall with training for persons that have been employed over 60 days. (Refer to Pre-Audit review)



# Audit Checklist

Site Maintained The property/fiscal plant/program site is maintained (if applicable). The environment of care is clean, organized, and free of hazards. Proof documents available such as preventative maintenance logs.

Supervision The program offers supervision of consumers in a safe and secure environment.

## **PCP**

ORR-PCP Current The PCP is current, on file, modified when indicated, and used by staff (PCP should be renewed at minimum of 1 time a year--done as needed which means addendums are completed when significant changes occur in consumer life, consumer needs more or less supports, consumer has attained goals).

PCP Consumer Input Choice/preferences of individuals are sought, noted, and responded to (snacks, kitchen menu, work ordered day activities, etc.)

PCP Scope Amount, duration, scope of services are supported by PCP (What services, how often, and how long).

## **Pre-Audit Review**

Consumer Participation in Audit A consumer must be involved in at least one audit per category of audits.

Entrance conference with provider on date of audit. Sit down with provider to go over how the audit process will take place and what the expectation is of the provider during the visit.

Exit Conference with provider on date of audit. Talk to provider about what your findings were, highlight good points as well as areas where they can expect citations, and an anticipated date of written report. Also remember to give a copy of the audit questionnaire.

## **Quality Improvement**

Plan of Correction from Last Audit Provider submitted an acceptable plan of correction from last SCCMHA audit. Site specific provider has a copy of the plan of correction as submitted by corporate provider.

Quality Improvement Provider has specific initiated or given goals/measures.

Repeat Citations Provider has evidence that previous citations have been corrected from the last annual audit.

## **Recipient Rights**

ORR-Access to Incident Report Forms Staff have unrestricted access to Incident Report Forms and staff know when and how to fill them out.

ORR-Access to Recipient Rights Booklets Consumers or visitors have unrestricted access to the "Your Rights" Booklets with the correct contact information on the back of the booklet.

# *Audit Checklist*

ORR-Access to Recipient Rights Complaint Forms	Consumers or visitors have unrestricted access to Recipient "Rights Complaint Forms"
ORR-Other Counties Postings	There are other County or agency Recipient Rights postings other than Saginaw. Please list these for future reference by SCCMHA Office of Recipient Rights
ORR-Policies and Procedures	Provider has a copy of SCCMHA Recipient Rights Policies and Procedures and knows were to locate.
ORR-Recipient Rights Annual Training	Staff have had approved Recipient Rights Training within the last year.
ORR-Recipient Rights Posted	Recipient Rights Poster is posted with contact names and brochures/forms are available. Your Rights Summary Poster, Summary of Abuse and Neglect Reporting Requirements, Whistle Blowers Protection Act, Bullard Plawecki Act.
ORR-Recipient Rights Training	Staff have been trained in Recipient Rights within 30 days of hire by an approved training curriculum.
Periodic Review of Incident Reports	Provider has a process in place to review periodically all incident reports to look for trends, problem areas, for possible solutions or process improvements.

# *Audit Checklist*

## **Crisis Residential Services**

### **Authorizations**

Eligibility for Crisis Residential

Consumer meets psychiatric inpatient criteria or is at risk of admission and who can be served appropriately outside the hospital.

### **Chart Review**

Discharge Plan

Discharge plan identifies after care / follow up services with the identification and role of case manager documented for follow up / after care services.

ORR-Consumer Fund Sheets

Consumer Fund sheets are kept up to date and available in the home. Consumers have immediate access to their personal money if they choose. How do consumers have access to money after hours? Access to funds is given to consumers as written and addressed in PCP (Provider adheres to their role as specified in the PCP) Personal funds are documented and provider takes necessary steps to prevent mishandling.

### **Competencies**

Staff Supervision

There is proper supervision of staff by trained personnel. No un-trained staff provides care to consumers without supervision. (check Staff schedules against progress notes etc.)

### **Confidentiality/Rights**

Grievance and Appeals Process

Provider is aware of where to direct Medicaid consumer with grievance and appeals process as appropriate.

### **Documentation & Records**

ORR-Guardianship Papers

Guardianship papers are in the file and match stated consumer status.

Staff Ratios

Staffing ratios shall be sufficient to implement individual plans of service. - Provider has staff ratios per provider application and follows the agreed upon level in application/ Provider contract and per the Specialized Residential funds request given to Adm. Assist. Clinical Director. Check staff schedules for at least 6 months or start of Specialized Residential contract. Provider to show proof that what they are providing is consistent with Specialized Residential funds request.

Staff Work Schedules

Provider has proof documentation of staff work schedules.

Supervision Documented

There is documented evidence that non professionals were appropriately supervised. The evidence can be in performance evaluations, staff communication logs, staff meeting minutes. Evidence of supervision of support staff directly providing services.

### **Health & Safety**

ORR-Facility site

The facility is safe, clean, odor free, habitable and provides a humane environment for consumers. The interior is maintained, including furnishings being safe, clean, and usable and in good repair. For CLS providers should be monitoring for possible health and safety issues and then contacting case manager/support coordinator.



# Audit Checklist

Licensure/Accreditations	Gather Proper Licensing and accreditation documentations, ensure they are all current and Provider Specific and provider is in good standing. CARF, specialized residential licensing. (Review Contract File)
Person Centered Plan	PCP received from Case Manager/Supports Coordinator for all consumers on Random Sample Report for further review when onsite. Each consumer can have a different Case Mgr. Find Case Mgr in Harmony. (Contact Case Manager/Supports Coordinator)
Recipient Rights Corrective Action	Any Recipient Rights Corrective Action plans have been implemented. (Contact Recipient Rights/Customer Service Supervisor)
Training for New Employees	Verify that any new employees have been added as a trainee to SCCMHA DB to verify/track required trainings. Review Training Records Report from DB.
Training Records	Minimum training standard for service type is met based upon SCCMHA Training Grid (Review Training Grid Report from DB)
<b><u>Program Specific</u></b>	
Accepts all referrals	Provider accepts all referrals that meet eligibility criteria as it relates to the program of service, as this service need only has one option open to consumers.
Activities and Recreation	Consumers are offered frequent opportunities for home and community activities and recreation. Activities should encourage social interaction, further growth through first hand experiences, social graces, and productive utilization of leisure time. Activities are age appropriate, dignified, and community integrated. There is an activity calendar for planned activities.
Adaptive Equipment	All durable medical equipment or assistive devices as ordered by PCP or physician are readily available and used as prescribed. If incontinence or other healthcare or behavioral concerns are apparent, clean bedding is supplied as needed. All equipment is safe and in good working order.
Advanced Directives	Staff are aware of any advanced directives of consumers living in the facility. Provider has a procedure for determining if consumer has an advanced directive and a method of informing staff what to do because the consumer has an advanced directive.
Consumer Responsibilities	SCCMHA consumers will be encouraged to maintain their own personal living quarters and participate in day to day housekeeping. Tasks/procedures are posted.
Emergency Contact	Residential provider has designated, in writing, the individual who is responsible for administration of the home, is available to SCCMHA staff and to home staff twenty-four hours a day, seven days a week.
Emergency Preparedness	Two days of backup food is maintained onsite for emergencies and is consistent with consumer diet orders. Emergency kit available containing first aid kit, flashlight, battery operated radio/feeding pumps, insulin, bottled water, diapers, etc.
Entitlements LR	Entitlements are obtained, and 3rd party reimbursements sought. (Medicaid cards, SSI, {for Type B only-Bridgecard/foodstamps})
Environmental Modifications	Any needed environmental modifications have been made. Provider has ensured proper follow-through of any necessary modifications (request is made through Case Manager/Supports Coordinator who forwards request on to clinical director).
Healthcare Appraisals	Provider will ensure Consumers have healthcare appraisals completed within 90 days prior to move to a facility and annually after move in. Appraisals include review of current symptoms, eval of bodily systems, vision/hearing screenings, lab wk, etc
Homelike Atmosphere	The residential facility promotes a homelike atmosphere, i.e., pictures, plants, flowers, etc.

# Audit Checklist

Incident Report in-home record	Incident reports are completed as needed and a copy is filed within the site, separate from the consumer's record. Incident reports are to be filed within 24-48 hours of the occurrence.
Leave of Absence	Provider insures that consumer's have all needed medications, treatments and personal items necessary for proper care during any periods of absence from the home. For consumers with guardians, the provider will obtain prior authorization from the guardian before allowing an individual to remove consumer from the residence.
Licensing Report and Survey	Licensing report and most recent survey are on file at the site and any issues are addressed. Check internet michigan.gov website for last survey.
Licensure for Program	Licensure is posted on site and available for public inspection. (Indicates Specialized Certification for Type A and Type B Residential Homes)
Medical/Dental Logs and Documentation	Health/dental status of consumer sis monitored ensuring scheduled medical, dental, and clinical appts are made in a timely manner, that the consumer attends appts and that resulting reports, Rx, Evals, etc. are secured and implemented. Various appointments are kept (medical, dental, psychiatric, etc.). When missed, they are documented appropriately.
Medication Administration	There is evidence that physician-prescribed oral medication, injection, or topical medication treatment is administered to a client. Medications are labeled as to what the medication is and when it should be given, with a label from the pharmacy. There is an appropriate, documented procedure for staff disposal of any and all discontinued or unused out of date medications. This should include documented witness that signs along with person who is disposing of the medications.
Nutrition & Dietary	Providers will follow and utilize SCCMHA's Dietary Guidelines. Menus are written and posted at least one week in advance and kept for one calendar year. Routine cleaning schedule is maintained to ensure cleanliness. Foods are monitored for expiration dates and are disposed of properly. Staff participates in family style meals w/ consumer.
ORR-Individuality/Lifestyle	Personal lifestyles are maintained while respecting others in the home. Consumers are allowed to personalize their living quarters within reason. Independent decision making is allowed and providers promote growth and individuality.
Personal Care	Each recipient's personal care, daily living, and hygiene needs are met including eating/feeding, toileting, bathing, grooming, dressing, ambulation, and assistance with self-administered medications and are documented in appropriate logs. Provider is completing daily personal care logs for each consumer.
Personal Care Items	Basic supply of personal care items are provided by licensee to the consumer, such as: shampoo, toothpaste, and deodorant.
Personal Possessions	Provider shall have a listing of all valuables that are accepted by the licensee for safekeeping. The list of valuables shall include a written description of the items, the date and signed by the licensee and resident.
Shift Notes/ Progress Notes	Daily documentation is kept and completed on each shift which reflects implementation of consumer plan. Provider completes daily documentation on each shift reflecting consumer participation in their plan.
Staff Described Plan	Staff is able to describe each plan for consumer--dietary needs, restrictions, etc.
Staff Identification	Staff can identify each consumer's case manager/Supports Coordinator and there is evidence of communication.
Supervision of Shift Change	There is proper supervision of consumers during shift changes.
Training for PCP	Qualified staff are trained regarding all aspects of specific consumer's PCP, examples: proper administration of medications, additional physical interventions, transfers, injections, management of feeding tubes, therapeutic positioning, and suctioning.

# Audit Checklist

Vehicles Maintained

The vehicles are maintained, in good working order, and are safe for consumers. Do vehicles have emergency kit, emergency numbers etc. How does provider assure consumers get to medical appointments, etc.?

## **Provider Audit Preparation**

Staff Job Descriptions on file

Job descriptions are on file.

Staff List/Organizational Chart

There is an Organizational Chart and or Staff listing for current staff. Provider shall make available at the facility or arrange to have on site at the time of audit.

Staff Training Records

Provider has training logs available at time of site visit with current information of completed trainings and certifications.

## **Psychiatrist**

Laboratory Procedures

There is evidence of appropriate laboratory procedures relative to medication management.

Medication Consent

There is evidence of psychotropic medication consent in the file. The informed consents are updated yearly.

Medication Documented

There is notation of client current medications in the file. This list should include both medical and psychotropic medications.

## **Recipient Rights**

ORR-Adequate Action Notice

There is a copy of Adequate Action Notice to appeal the Person/Family Centered Plan in the consumer record.

ORR-Consent to Treatment

There is a copy of the Informed Consent to Treatment in consumer records. (This may be a part of the universal acknowledgement form)

ORR-Facility Initiates Contact with CM/SC When Appropria

There is evidence of provider initiating contact with CM/SC when there are concerns or issues that need to be brought to the attention of CM/SC to make changes in consumer plan or referrals to other team members.

ORR-House/Program Rules

House/Program Rules are posted, given to the consumers, reflect consumer input, and do not include any restrictions that would violate consumer rights. Questions regarding restrictiveness should be directed to recipient rights office.

ORR-Postage Available

There is postage available for residents to use and a way for residents to use mail services on a daily basis. Postage shall be provided in reasonable amounts to residents who are unable to procure such items.

ORR-Recipient Rights Notification

There is evidence in the chart that consumers have been notified of rights. Upon start of service and periodically during the time services are provided to the recipient. SCCMHA has defined periodically to be annually.

ORR-Telephone Access

Consumers have access to a telephone to use at reasonable times. Telephone use/restrictions are posted in a conspicuous area.

ORR-Use of Restraint or seclusion

From interviews with staff, Lead worker and consumers, consumers are not restrained, held down, or placed in seclusion.

# *Audit Checklist*

## **Records/Policies**

Medication Certification

All staff passing consumer medications have been certified by a staff member that has been certified by a SCCMHA Nurse.

Policies and Procedures

Policies and procedures are reviewed at least every 3 years and modified as necessary.

## **Service Related**

Communications

There is communication with case managers, support coordinators, or therapists about any concerns or problems. These communications may prompt plan changes or just awareness of items that may need to be followed up at next visit with consumer.

## **Staff Qualifications**

Psychiatric Supervision

Services provided under supervision of psychiatrist and under immediate supervision of a professional with BA and 2 years experience.