

Audit Checklist w/ Refs

Audit Name: Prevention Direct Services

Chart Review

Ability to Pay Assessment	There is evidence of Ability to Pay Assessment determination. The ATP is current (within 12 months)	MHC 330.1802-330.1812; SCCMHA Provider Manual Procedure 11.03.01 (Ability to Pay)
Adequate Action Notice	There is a copy of Adequate Action Notice to appeal the Person/Family Centered Plan in the consumer record.	Mental Health Code 7121(2); 42 CFR 400
Advance Notice of Adverse Action	There is evidence of Advance Notice when consumer services are going to be reduced or discontinued. Services are continued for at least 10 days to allow consumer right to appeal and are continued if consumer chooses to appeal.	Medicaid Manual, Mental Health and Substance Abuse; PIHP Review Protocols D.3.7. / MDCH Site Review Report & Plan of Correction 2003
Assessments Annual	Annual Assessments/Update Assessments are completed. The assessment includes a complete Bio psychosocial and the reason for continuing stay meets the eligibility criteria.	Medicaid Manual, Recordkeeping; MDCH/ CMH PIHP Site Review Protocols, C.2.14
Authorization Requests	Authorizations for consumer needed services are requested in a timely manner.	MDCH/CMH contract, section 3.0; SCCMHA Provider Manual, Policy 05.04.01
Communications to Providers	There is evidence of ongoing or as needed communication with other key providers, including residential or other supports, schools, clubhouse, day program, and/or other community resources as appropriate.	MDCH PIHP Review Protocols Section E; Medicaid Manual, Mental Health and Substance Abuse, 2.1
Consent to Treatment	There is a copy of the Informed Consent to Treatment in consumer records. (this will be located on the signature page if staff have marked on the form as notifying consumer)	SCCMHA Provider Manual Policy Recipient Rights Consent to Treatment 02.02.08
Consumer Entitlements	Entitlements are obtained, and primary insurance reimbursements sought. (Medicaid, SSI, Bridgecard) For consumers living independently or in a Supported Living Situation the provider has assisted the consumer in obtaining a bridgecard for assistance with groceries.	Medicaid Manual, Mental Health and Substance Abuse, Section 1.3
Consumer Health	The promotion of consumer health is evident. Provider ensures that any medical concerns or issues are addressed or monitored.	SCCMHA Provider Manual, Policy, 03.02.01; PIHP Review Protocols E.3. and E.3.1.
Coordination of Benefits	Program ensures coordination of benefits for all persons served. Primary providers are expected to assist individuals served in obtaining and maintaining benefit eligibility, including facilitation of capitated fund applications, associated renewals and spend down/deductible management and ability to pay renewals.	SCCMHA Provider Manual Policy 11.02.01 (COB); SCCMHA Policy 05.06.01 Network Management and Development.
Coordination with other Agencies	There is coordination with substance abuse coordinating agency and providers as needed.	CMH/MDCH Contract Section 6.4.4, Medicaid Manual, Mental Health and Substance Abuse, Sections 8 and 2.1
Coordination with Other Team Members	There is appropriate coordination with other team members (PT, OT, Nursing, etc.)	SCCMHA Policy and Procedures
Crisis Service Coordination	There is evidence of crisis service coordination where appropriate.	SCCMHA Provider Participation Agreement Attachment A, section (2), (a) and (b)
Disclosure Documentation	There is documentation of disclosures made from the record as required.	HIPAA

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Documents	All appropriate documents are in the consumer file.	MDCH/CMH Contract, Section 6.8.1
Documents Complete	Documents are complete and are signed by the appropriate parties (assessments, progress notes, discharge documents).	SCCMHA Provider Participation Agreement, section 5.0
Face to Face Contacts	The record notes some frequency of face-to-face contacts with the consumer and follows the plan. For consumers that receive Model Payments from DHS, contacts need to be monthly at the home to assure the provider is following the case manager/ support coordinator order for services. For consumers that have a habilitation supports waiver, those consumers must be seen monthly in order for SCCMHA to receive reimbursement for the waiver.	Medicaid Manual, Mental Health and Substance Abuse, 3.24 and 13.3
Grievance and Appeals Information	Grievance and appeals information has been provided and explained to consumer/guardian.	SCCMHA Provider Manual, Policy 02.01.11
Health and Safety Issues Monitored	The record demonstrates that health and safety issues for the specific consumer are being consistently and continually monitored and addressed.	Medicaid Manual, Mental Health and Substance Abuse 3.24 and 13.3
Intake Paperwork	Intake paperwork is completed based on procedures in place.	Medicaid Manual, Recordkeeping
Laboratory Procedures	There is evidence of appropriate laboratory procedures relative to medication management.	MDCH PIHP Review Protocols, G.3.1, G.3.2, G.3.3; Medicaid Manual, Recordkeeping
Medicaid Denial	There is proof that Medicaid benefits were denied for non-Medicaid consumers.	MHC 330.1814
Medication Consent	There is evidence of psychotropic medication consent in the file. The informed consents are updated yearly.	Mental Health Code 330.1719; SCCMHA Provider Manual Policy 02.02.16 and 02.02.08; PIHP Review Protocols G.3.4.
Medication Monitoring	There is evidence of appropriate medication monitoring by the physician in the file (such as documentation of progress, side effects, lab tests, etc.)	Medicaid Manual, Mental Health and Substance Abuse 3.15
PCP Pre-planning Activities	Pre-planning meeting includes all activities of consumer choice (where, when, who, what and an independent facilitator was offered for planning activities).	Medicaid Manual, Mental Health and Substance Abuse; MDCH PIHP Review Protocols C.1.2.; MDCH/CMH Contract, Attachment 3.4.1.1
PCP Pre-planning Cultural Accommodations	Pre-Planning shows evidence of any appropriate cultural accommodations of the consumer.	Medicaid Manual, Mental Health and Substance Abuse; MDCH PIHP Review Protocols, C.2.8; MDCH/CMH contract, attachment 3.4.1.1
PCP Pre-planning Documentation	Pre-planning meeting activities are properly documented.	Medicaid Manual, Mental Health and Substance Abuse; MDCH PIHP Review Protocols, C.2.1; MDCH/CMH Contract, Attachment 3.4.1.1
PCP Pre-Planning Meetings	PCP Pre-Planning Meetings occur before a PCP meeting is originated.	Medicaid Manual, Mental Health and Substance Abuse; PIHP Review Protocols C.1.6.; SCCMHA Policy 02.02.06
Physical Health Care and Nutritional Screening	Providers are completing a Physical Health Care and Nutritional Screening on each consumer at intake and again yearly if the consumer does not have involvement with psychiatrist or nurse	SCCMHA Policy 03.02.01 Healthcare Integration

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Psychiatric Involvement	There is evidence of psychiatric involvement and consultation where needed. Appropriate follow through noted.	Medicaid Manual, 2.1
Recipient Rights Reporting	There is evidence of rights reporting by staff as appropriate.	SCCMHA Provider Manual Tab 8 - Summary of Abuse and Neglect Reporting Requirements; MHC (P.A 258) MCL 330.1776; SCCMHA Policy 02.02.10 Recipient Rights Reporting Unusual or Unexpected Incidents
Recovery	Each program has proof of the belief in recovery in their work. Provider can demonstrate in consumer charts this belief. (does not apply to persons with developmental disabilities)	SCCMHA Policy 02.03.05 Recovery
Services Documented	Services are provided appropriately and documented.	Dept of Mental Health Admin Rules pg 6 R330.1053; Medicaid Manual, General Information for Providers; SCCMHA Provider Manual Residential Services Policy 03.02.07; Provider Participation Agreement
Signatures	Appropriate signatures and titles are evident on file documents. (Consumer/guardian, SC/CM/Therapist and supervisor signed plan. Supervisor signed assessment.)	Medicaid Manual, General Information for Providers, Recordkeeping
Supervisory Review	There is evidence in the consumer's chart that supervisory review took place.	Medicaid Manual, Ch. I, Recordkeeping
<u>Consumers</u>		
Consumer Eligibility	Consumers served meet eligibility criteria for service area, including primary and secondary diagnoses and co-occurring disorders, symptomology, and level of care/acuity of need criteria (includes residency, hospital history, DX, LOCUS, CAFAS, and PECAFAS as appropriate).	DCH/CMH Contract Sections 3.2 and 3.3; SCCMHA Policy 03.01.01
Medicaid Applications	Program ensures Medicaid applications are completed for all persons. Proof of completion of Medicaid application was found.	SCCMHA Provider Participation Agreement Attachment A, Section D (2).
Review Mechanism	Program has mechanism to review and respond to consumer changes in level of need (review progress notes, updated PCP, referral for additional service).	MDCH PIHP Review Protocols C.2.10.; Medicaid Manual, Mental Health and Substance Abuse, 13.3
Services Match Eligibility	Services being delivered match eligibility criteria.	SCCMHA Provider Manual, Policy 05.04.01
<u>Documentation</u>		
Claims/Service Activity Logs	Claims/Service Activity Logs (services provided) match services in the plan.	Medicaid Manual, Recordkeeping
Consumer Satisfaction	Consumer satisfaction is sought and action is taken to promote consumer satisfaction.	SCCMHA Provider Manual, Policy 09.04.03.01 Network Management & Development
Disposal of consumer PHI	Provider has a provision for disposal of consumer Protected Health Information (PHI) that will render the documents unreadable, indecipherable, and otherwise cannot be reconstructed. Cross Cut shredders are ideal but the shredding should be between 7/16 and 1/32 of an inch.	Health Information Technology for Economic and Clinical Health (HITECH) Act. HIPAA Compliance Policies. SCCMHA Contract.

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Emergency Procedures	<p>Provider has emergency procedures that are reviewed with new employees and annually and proof that these procedures are followed by staff. The telephone number for poison control center is readily available to staff or consumers. Procedures should include: Bomb Threat, Power Outage, Tornados, Fire, Missing persons, Water Shortage, how to deal with a threat from a consumer, etc. (For residential, there is provision for evacuation and alternate housing if needed for a few hours or if needed for overnight or longer, with a written agreement with hotel/motel.)</p>	<p>SCCMHA Provider Manual, BHRMC Policy, Page 3, Licensing Rules R400.14318 Licensing sm. Group; R400.15318 Licensing lg. Group; R4001438 Licensing Family Home</p>
Job Descriptions on site	<p>Job descriptions are available and are on file at provider location.</p>	<p>Provider Manual Policy 05.06.03 Competency Requirements for the SCCMHA Provider Network, Licensing lg. Group Rules R400.15 207; Licensing sm. Group Rules R400.14 207</p>
Periodic Review of Incident Reports	<p>Provider has a process in place to review periodically all incident reports to look for trends, problem areas, for possible solutions or process improvements. Recommendations/actions taken are implemented in a timely manner. The provider evaluates the actions taken to prevent further incidents. This evaluation is used to determine effectiveness of the actions taken. The provider demonstrates a review of the actions at least 2 times per year.</p>	<p>SCCMHA Provider Manual Policy on Competency Requirements</p>
Plan of Correction from Last Audit	<p>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.</p>	<p>SCCMHA Auditing Procedure.</p>
Program Areas	<p>Consumers are involved in program areas (evaluation, quality, development, operations, and governance). Persons with disabilities are involved in leadership roles that could be regular, ad hoc or even one time role that a consumer or family member plays in the organization such as: 1) serving on the governing or advisory or consumer leadership board or committee, 2) helping to review or assess program quality, 3) facilitating or helping to facilitate program or site meetings of residents/persons served to review policies, obtain their input, etc. such as home/house/site meetings. This could be as little as a few hours per year, or some level of regular hours per month.</p>	<p>MDCH App for Participation page 33; 2.3.4; SCCMHA Provider Manual Policy on Inclusion 02.03.02</p>
Provision for 24/7	<p>Providers have a provision to be able to reach them somehow. This can be through an answering service or via emergency cell phones etc. With reasonable response time of 1 hour. Substance Abuse providers must have 24/7 access.</p>	<p>RFP; SCCMHA Provider Manual; Licensing Rule 400.14206</p>
Quality Improvement	<p>Provider has specific initiated or given goals/measures.</p>	<p>SCCMHA Provider Manual, Quality Assessment & Performance Improvement, 04.01.01, Page 1; DCH/CMH Contract Section 6.7.1</p>
Repeat Citations	<p>Provider has evidence that previous citations have been corrected from the last annual audit.</p>	<p>SCCMHA Auditing Procedure.</p>

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Facility/Program Observation

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.	SCCMHA Provider Manual, Housing Best Practice Policy 02.03.06; Certification of Specialized Programs Rules R.330.1085
Assistance to Consumers	Consumers are offered assistance as requested or indicated.	SCCMHA Provider Manual Policy 02.01.01 Accommodations
Confidentiality of Privacy	Provider demonstrates protection of individual's privacy.	SCCMHA Provider Manual, RR Contract Requirements, RR Policies and Procedures, 06.02.04.00; Licensing Rules 1979 Amendment 400.712 pg 10
Confidentiality of Records	Records or other confidential information are not open for public inspection?	Mental Health Code 330.1748(1); SCCMHA Provider Manual, RR Contract Requirements; RR Policies and Procedures, 06.02.04.00; Licensing Rules 1979 Amendment, 400.712 pg. 10.
Dignity and Respect	Consumers are treated with dignity and respect	Mental Health Code 330.1708(4); SCCMHA Provider Manual, RR Contract Requirements, RR Policies and Procedures, 06.02.06.00; Licensing Sm. Group rules R400.14 303&305; Licensing Lg. Group rules R400.15 303&305
Provider Responsiveness	Provider demonstrates responsiveness to individual client needs (language, physical access accommodations, cultural needs, etc.)	Application for participation MDCH page 50; 3.1.8; Provider Manual Policy on Inclusion 02.03.02
Record Retention	Programs are housing records in a safe, secure location for records that are not currently active or in use. Auditors will be looking at how records are stored at the facility or program. If stored in another location how the provider can assure the documents are safe and secure.	Health Information Technology for Economic and Clinical Health (HITECH) Act. SCCMHA HIPAA Compliance Policies.
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.	SCCMHA Provider Manual, Housing Best Practice Guideline, Quality Standards, Page 4; Licensing sm. Group Rules R400.14 403 Page 24 & R400. 14 209 Page 10 Licensing lg. Group Rules R400.15 209 Page 7 & R400.15 403 page 18; SCCMHA Contract Att. B
Supervision	The program offers supervision of consumers in a safe and secure environment.	SCCMHA Provider Manual Residential Services Policy 03.02.07

PCP Review

Accommodations	The plan of care reflects unique cultural, sensory, communication or handicap accommodation needs of the consumer.	PIHP Review Protocols C.2.7. and C.2.8.; Coordinating Agency Site Visit Protocol R.2.
Assessments	Assessments are completed by qualified mental health professional (QMHP), mental retardation professional (QMRP); or if the case manager has only a bachelor's degree but without the specialized training or experience they must be supervised by a QMHP or QMRP who does possess the training or experience. Services to a child with serious emotional disturbance must be provided by a QMHP who is also a child mental health professional (CMHP). Services to children with developmental disabilities must be provided by a QMRP.	Medicaid Manual, Mental Health and Substance Abuse, 13.4 Staff Qualifications.

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Changes in Consumer Needs	Changes in consumer needs are reflected in the person-centered plan.	Medicaid Manual, Mental Health and Substance Abuse; PIHP Review Protocols C.2.10. and C.5.
Community Involvement	There is evidence in PCP of efforts to promote consumer community inclusion and/or increase community involvement.	PIHP Review Protocols C.2.9./ MDCH Site Review Report & Plan of Correction 2002
Conflict Resolution	There is evidence that the consumer has been provided with conflict resolution resource information. It is evident who should be contacted if dissatisfaction or concerns arise.	PIHP Review Protocols C.2.6.
Consents and Privacy Notices	Proper consents and privacy notices are given.	HIPAA
Consumer Crisis Plan	Consumer crisis plan development opportunity is documented.	Medicaid Manual, Mental Health and Substance Abuse 13.3; MDCH PIHP Site Review Protocols; C.2.13
Consumer Goals and Objectives	The consumer or family goals and objectives reflect dreams and desires of the consumer and/or family and are written in the consumer's and/or family's own words when possible. Consumer and/or family participates on an ongoing basis in discussions of his/her plans, goals, and status.	PIHP Review Protocols C.2.10.; Medicaid Manual, Mental Health and Substance Abuse, 13.3
Consumer Meetings	There is evidence consumer meetings are held according to his/her choice, including where, when, and who.	PHP Review Protocols C.12.; SCCMHA Policy 02.03.03
Coordination of Service	Coordination of services are evident in plan.	Medicaid Ch. III ,13.3
Frequency of Plan Review	The frequency of plan review for the individual consumer is specified. SC/CM determine on an ongoing basis, if the services specified in the plan have been delivered, and if they are adequate to meet the needs/wants of the beneficiary. Frequency and Scope (Face to face and Telephone) of Case management monitoring activities must reflect the intensity of the Beneficiary's Health and Welfare needs identified in the plan.	Mental Health Code 330.1714; Medicaid Manual, Mental Health and Substance Abuse, 3.24
Goals are Measurable	Goals are stated in measurable terms.	Mental Health Code 330.1712(1); MDCH PIHP Site Review Protocols, B.12.4.1
Goals are Monitored	There is evidence of goal monitoring against planned cycle for each consumer.	MDCH PIHP Site Review Protocols, B.14.3.3
Health and Safety Issues	The PCP reflects the identification of and attention to consumer health and safety issues.	Medicaid Manual, Mental Health and Substance Abuse, 13.3; PIHP Review Protocols C.2.4.
Natural Supports	Natural supports at varied levels are assessed in the assessment and plan, and are developed if needed. Plan or preplanning documents include discussion about family, friends or others (community at large, neighbors, church, etc.) who do now, or could be asked in the future, to support the person in achieving desired outcomes.	PIHP Review Protocols C.2.4.
PCP Assessment Based	The PCP is based upon an assessment of the person's strengths and weaknesses.	MDCH/CMH Contract, attachment 3.4.1.1; Medicaid Manual, Mental Health and Substance Abuse, section 7.1

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PCP Consumer Copy	Consumer and/or family have been provided copy of his/her or their plan within 15 business days of the PCP Meeting (went into effect 7/20/2003).	PIHP Review Protocols C.3.; SCCMHA Policy 02.03.03
PCP Consumer Input	Choice/preferences of individuals are sought, noted, and responded to as part of the consumer plan. It is evident the consumer was involved and consumer requests discussed and addressed in the consumer plan.	MDCH App for participation page 174 Individual indicators; DCH/CMH Contract Section 6.8.2.3; SCCMHA Provider Manual Policy on Consumerism 02.03.01 and Policy on Inclusion 02.03.02
PCP Current	The PCP is current, signed, 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).	Department of Mental Health Admin Rules R330.1276; Mental Health Code 330.1712(1); Medicaid Manual, General Information;
PCP Scope	Amount, duration, scope of services are supported by PCP (What services, how often, and how long).	SCCMHA Provider Manual; Consumerism Best Practice Guideline; Medicaid Manual, Mental Health and Substance Abuse 1.6 and 13.3
Periodic Review Evidence	There is evidence of periodic review of effectiveness of the plan, including consumer satisfaction.	Medicaid Manual, Mental Health and Substance Abuse, 3.24
Restrictive Plans	Restrictive plans have evidence of BTC (Behavior Treatment Committee) consultation. Restriction of movement or other restrictions are covered in the consumer plans and reviewed by the BTC for appropriate implementation based on State guidelines.	Medicaid Manual, Mental Health and Substance Abuse 3.3; SCCMHA Policy 03.02.06 Behavior Treatment Committee.
Specific Service Needs Addressed	The plan of care reflects specific consumer needs and involvements in all appropriate community or mental health services.	Medicaid Manual, Mental Health and Substance Abuse 3.24
<u>Policies and Procedures</u>		
Code of Conduct	Provider has a code of conduct for staff.	MDCH App for Participation page 42; 2.10
Competency Policy: Orientation Training	Provider has human resource procedures that address SCCMHA competencies for Orientation/training.	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03; SCCMHA Provider Manual Residential Services Policy 03.02.07
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.	Medicaid Manual, Admin Record Keeping; SCCMHA Provider Manual Competency Requirements for the SCCMHA Provider Network 05.06.03
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.	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03; SCCMHA Provider Manual Residential Services Policy 03.02.07Licensing lg. Group Rules R400.15 208 ; Licensing sm. Group Rules R400.14 208

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Health and Safety Policy	A Health & Safety policy/procedure is available for the facility. The Policy should include Fire, Tornado, Medical Emergencies, Power Outages, Gas Leaks, Bomb Threat, Missing Person, etc. as well as provisions to ensure routine checks of facility for any potential health and safety hazards.	MDCH App for Participation page 38: 2.7; Licensing sm. Group Rules R400.14205 page 8 and R400.14301 page 10-12
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.	SCCMHA Provider Manual, 09.04.03.01 Network Providers Background Certification & Credentialing Procedure & Plan: Licensing sm. Group Rules R400.14 203 & 204 page 7; Licensing lg. Group Rules R400.15 203 & 204 page 5
Infection Control Plan	There is an infection control plan in place to address infection control. Policy and Procedure to address infection control issues. If the home has needles in the home the home must have a needle stick protocol as part of their infection control policy.	SCCMHA Provider Manual Policy 06.01.02 Infection Control Policy and Procedure
Policies and Procedures for Accommodations	The provider has proof of related policies/procedures for accommodations. Policies should include how provider routinely identifies and addresses individual and systemic needs. Will ensure access and accommodation of persons with Limited-English proficiency (LEP), ensure system sensitivity and accommodation of diverse ethnic/cultural backgrounds, accommodation of individuals w/communication impairments (including persons who do not use verbal language to communicate or who use alternative forms of communication, ensure persons with visual, hearing or other physical impairments and mobility challenges are accommodated).	MDCH App for Participation page 36, 2.5; SCCMHA Provider Manual, Accommodations Policy 02.01.01
<u>Pre-Audit Review</u>		
Audit Findings Other	There are plans of correction from Contract Compliance. (Review Contract file)	SCCMHA Provider Participation Agreement
Audit Findings--previous year	Auditor will review audit findings from past year and make sure these areas are reviewed during current audit review.	SCCMHA Provider Manual, Policy 05.06.01
Compliance Notices	Do they exist and if so what responses were. (Review Contract file)	SCCMHA Best Practice
Consumer Participation in Audit	A consumer must be involved in at least one audit per category of audits.	SCCMHA Consumerism Policy 02.03.01 and Inclusion Policy 02.03.02
Contracts	Provider has current contract with SCCMHA, or is in process of renewing contract. (Review Expirations Report from DB)	SCCMHA Provider Manual, Policy 02.02.06
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.	SCCMHA Auditing Procedure
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.	SCCMHA Auditing Procedure

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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. Provider should make sure SCCMHA training database is up to date. A copy of the current trainings in the SCCMHA database is attached to your audit notice.	SCCMHA Provider Policy Manual
	(deleted because new training database does not allow you to add new employees until they have training)	
Training Records	Minimum training standard for service type is met based upon SCCMHA Training Grid (Review Training Grid Report from DB)	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03
<u>Staff File Review</u>		
Provider Completes Reference Checks	Providers are verifying references as a part of their pre hire screening and there is proof in the staff files.	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03
Staff Qualifications for Case Mgr	A mental health case manager/ support coordinator must be a professional who possesses at least a bachelor's degree in a human services field typically associated with mental health, or an R.N.	Medicaid Manual, Mental Health and Substance Abuse, 13.4; MDCH PIHP Site Review Protocols, B.7.4.1
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, any Mental Illness, Developmental Disabilities, and Substance Abuse trainings etc. completed.	MDCH PIHP Site Review Report 2004; SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03;
Training Minimum Standards	Minimum training standard for service type is met based upon SCCMHA Training Grid and is documented in staff file. Looking for 95% compliance overall with training for persons that have been employed over 60 days. (Refer to Pre-Audit review)	Medicaid Manual, General Info. Pg. 3; SCCMHA Provider Manual, Competency Requirements Policy 05.06.03; Specialized Certification Rules for AFC R330.1806(2)(a-b)
<u>Staff Questions</u>		
Grievance and Appeals Process	Provider is aware of where to direct Medicaid consumer with grievance and appeals process as appropriate.	Mental Health Code 330.1754(6)(f); Medicaid Manual, General Info., Page 3; SCCMHA Provider Manual, Policy 02.01.11
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.	Medicaid Manual, General Information; Licensing sm. Group Rules R400.14 201 & 204 page 6&7; Licensing lg. Group Rules R400.15 201 & 204 page 4&5