SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

Audit Checklist w/ Refs
Audit Name: Crisis

Chart Review

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 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 SC/CM	There is evidence of coordination with SC/CM on open cases.	Medicaid Manual, Mental Health and Substance Abuse, Section 2.1; SCCMHA Provider Manual: Performance Guidelines for Enhanced Health Care Providers #4
Notification of Admission to PHCP	The Primary Health Care Physician was notified of the consumer's admission.	SCCMHA Provider Manual Policy 03.02.01; DCH/CMH Contract Sections 6.8.3 and 6.4.4
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
Severity of Illness Criteria	The severity of Illness criteria matches the level of care need and the intensity of service.	DCH/CMH sections 3.2 and 3.3
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

Consumers

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

Documentation

Consumer Satisfaction	Consumer satisfaction is sought and action is taken to promote consumer satisfaction.	SCCMHA Provider Manual, Policy 05.06.01 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.
Emergency Procedures	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.)	SCCMHA Provider Manual, BHRMC Policy, Page 3, Licensing Rules R400.14318 Licensing sm. Group; R400.15318 Licensing lg. Group; R4001438 Licensing Family Home

Audit Checklist w/ Refs
Audit Name: Crisis

Job Descriptions on site	Job descriptions are available and are on file at provider location.	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
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. 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.	SCCMHA Provider Manual Policy on Competency Requirements
Physical Management	Physical management of volatile persons occurs as necessary, incident reports are filed appropriately, and there is proof of training. When physical management is used are the staff filling out the BTC IR Attachment form for each incident and are they filled out correctly?	SCCMHA Provider Manual, SCCMHA Guidelines for Behavioral Emergencies
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.	SCCMHA Auditing Procedure.
Program Areas	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.	MDCH App for Participation page 33; 2.3.4; SCCMHA Provider Manual Policy on Inclusion 02.03.02
Proof of Evidence Based Practices	Provider delivers evidence based practices and provider has proof of staff training in evidence based practices.	SCCMHA Evidence Based Practices Policy
Provision for 24/7	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.	RFP; SCCMHA Provider Manual; Licensing Rule 400.14206
Quality Improvement	Provider has specific initiated or given goals/measures.	SCCMHA Provider Manual, Quality Assessment & Performance Improvement, 04.01.01, Page 1; DCH/CMH Contract Section 6.7.1
Repeat Citations	Provider has evidence that previous citations have been corrected from the last annual audit.	SCCMHA Auditing Procedure.

Audit Checklist w/ Refs
Audit Name: Crisis

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 Rules1979 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

General

Authorization and Screening	Initial authorization and inpatient screening and non-business hours authorization (+special for under 21)	Medicaid Ch. III, Section 8
Availability 24/7	Staff is available 24 hours, 7 days a week.	DCH/CMH Contract Section 3.1 Access Standards
Choice of Hospital	Choice of hospital and hospital diversions are offered to consumer and documented appropriately.	CMH/MDCH Contract Section 6.8.2.3, SCCMHA Provider Manual Consumerism Best Practice Guideline
Court Petitions	Probate Court Petitions are managed for involuntary inpatient placement.	MHC (P.A.258) MCL 330.1434
Crisis Response and Intervention	Crisis management response and intervention is provided to presenting individuals.	DCH/CMH Contract Section 3.1 Access Standards

Audit Checklist w/ Refs
Audit Name: Crisis

Hospital Coordination	Coordination occurs with hospital in tracking hospital responsiveness, admissions, and denials.	SCCMHA Hospital Provider Participation Agreement
Jail Diversion	Jail diversion activities pre and post-booking are provided as necessary.	DCH/CMH Contract Sections 6.8.4 and 6.8.4.1, Jail Diversion and Jail Diversion Practice Guideline; SCCMHA Provider Manual, 3.01.04
Length of Stay	Inpatient length of stay (LOS) management occurs for inpatient consumers of 1-3 days. Consumer is referred to care management for episode of care/continuation of LOS approvals.	Medicaid Ch. III, Section 8.5.0
Out of County Coordination	Out of county coordination and prior authorization for pre-admission screening occurs.	Medicaid Ch. III, Section 8
Provider Response	There is a prompt response to hospitals and other providers.	DCH/CMH Contract Section 3.1 Access Standards
Second Opinion	A Second Opinion is available for Crisis consumers denied hospitalization 24/7.	MHC (P.A. 258) MCL 330.1705; Medicaid Ch. III, Section 8.2; PHIP Review Protocols B.10.1.5.
Services Availability	24/7 face-to-face services are available.	DCH/CMH Contract Section 3.1 Access Standards
Timeliness Standards	Timeliness Standards are in place (3 hours for admission and screening decision).	DCH/CMH Contract Section 3.1 Access Standards
Timely Customer Response	Crisis services are provided to consumer in a timely manner.	DCH/CMH Contract Section 3.1 Access Standards
Transportation to Crisis	Transportation is arranged to crisis unit.	Medicaid Manual Section 3.23

PCP Review

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
Peer Support Specialists Advocate	Peer Support Specialists Services advocate for the full integration of individuals into communities of their choice and promoting the inherent value of those individuals to those communities.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists are Members of the Team	Provider assures Peer Support Specialists participate as full-fledged members of the multidisciplinary team.	SCCMHA Peer Support Services Fidelity Scale

Saginaw County Community Mental Health Authority

Audit Checklist w/ Refs
Audit Name: Crisis

Peer Support Specialists Assist Consumers with Recovery	Peer Support Specialists staff assist consumers in identifying their personal recovery goals, setting objectives for each goal, and determining interventions to be used based on consumers recovery/life goals.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists Function as Liaisons to Community	Peer Support Specialists Services function as liaisons to community resources, and assisting consumers in accessing and using such resources.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists Provide a Range of Services	Peer Support Specialists provide a wide range of peer support services to consumers to assist them in regaining control over their lives, the recovery process, and attain personal goals of community membership, independence, and productivity.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists Supervision	Peer Support Specialists are provided with supervision by appropriately licensed mental health professionals.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists Training	Peer Support Specialists receive standardized, accredited training (and are eligible for certification). Attend relevant seminars, meetings, and in-service training.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists Work in Variety of Settings	Peer Support specialists work with consumers in a range of settings, including treatment offices, consumers' homes, hospitals, community settings, and transport vehicles.	SCCMHA Peer Support Services Fidelity Scale
Peer Support Specialists' Services offered	Peer Support Specialists' services are offered to all consumers.	SCCMHA Peer Support Services Fidelity Scale

Policies and Procedures

Code of Conduct	Provider has a code of conduct for staff. This code of conduct includes standards of work conduct regarding being under the influence of illegal drugs or alcohol.	MDHHS(previously MDCH) App for Participation page 42; 2.10 ; SCCMHA Policy 05.06.03 Competency Requirements for the SCCMHA Provider Network.
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
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

Saginaw County Community Mental Health Authority

Audit Checklist w/ Refs
Audit Name: Crisis

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
Pre Hire Screening	Provider completes a pre hire screening which includes, background check, driving record check, recipient rights check, reference checks, and any health screening that is required prior employment. Provider also includes a pre-employment declaration regarding being under the influence of illegal drugs or alcohol.	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03

Pre-Audit Review

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
Eligibility	Consumers are eligible to receive services from SCCMHA. (Medicaid is in effect or other CMH coverage--MI Child, Subsidy, Children's Waiver--is in place)	CMH/MDCH Contract Section 1.2, SCCMHA Provider Manual 03.01.01
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

**SAGINAW COUNTY
COMMUNITY MENTAL
HEALTH AUTHORITY**

Audit Checklist w/ Refs
Audit Name: Crisis

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. (deleted because new training database does not allow you to add new employees until they have training)	SCCMHA Provider Policy Manual
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

Staff File Review

Children's Diagnostic and Treatment Services Certification	Each staff person has the minimum of 24 hours of training in Children's Services to meet the Children's Diagnostic criteria.	MDCH Children's Diagnostic and Treatment Services Certification Interpretive Guidelines; SCCMHA Provider Manual Tab 3
Credentialing of Professionals	Each employer, including SCCMHA, will verify credentials of position applicants, including proper licensure if required. Checks must include information about any sanctions against Medicaid and Medicare which would exclude billing under these payers. SCCMHA and other provider network organizations must retain current proof of credentials and licensure on file, as well as appropriate historical file information for services billed. Credentialing and re-credentialing are conducted and documented for the following health care professionals: Physicians (MDs or DOs), physician assistants, psychologists (licensed, limited license, or temporary license), social workers (licensed master's, licensed bachelor's, limited license, or registered social service technicians), licenses professional counselors, nurse practitioners, registered nurses, or licensed practical nurses, occupational therapists or occupational therapist assistants, physical therapists or physical therapist assistants, speech pathologists.	HSAG Audit Requirements; SCCMHA Policy 05.06.03 Competency Requirements for the SCCMHA Provider Network; SCCMHA Policy 09.04.03.01 Network Providers Background Verification & Credentialing Procedure & Plan
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
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)

Audit Checklist w/ Refs
Audit Name: Crisis

Staff Questions

| 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 |