SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

Audit Checklist w/ Refs
Audit Name: Community Living Supports--Corporate

Chart Review

Appointments	Various appointments are kept (medical, dental, psychiatric, etc.). When missed, they are documented appropriately.	SCCMHA Provider Manual Residential Services Policy 03.02.07
Claims/Service Activity Logs	Claims/Service Activity Logs (services provided) match services in the plan. Billings reflect only those services and frequencies of services that are identified in the plan.	Medicaid Manual, Recordkeeping, MDHHS SED Waiver Site Review
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.
Document Accessibility	The provider will have access to items pertinent to providing care such as a copy of individual plan of service, behavior treatment plan, and health and safety sheets for the protection of the consumer receiving care.	SCCMHA Provider Manual Residential Services Policy 03.02.07; Guidelines for Respite; SCCMHA Self Determination Policy
Home Help and Expanded Home Help Through MDHHS	Home Help or Expanded Home Help (assistance in the individual's own, unlicensed home with meal preparation, laundry, routine household care and maintenance, activities of daily living and shopping). If such assistance appears to be needed, the beneficiary must request Home Help and if necessary, Expanded Home Help from the Department of Health and Human Services (DHHS). The PIHP case Manager or supports coordinator must assist him/her in requesting Home Help or in filling out. Consumer plan reflects the amount of Home Help assistance is approved through MDHHS.	Medicaid Provider Manual 17.3.B. Community Living Supports
Management of Consumer Funds	Access to funds is given to consumers as written and addressed in PCP. (Provider adheres to their role as specified in the PCP).	SCCMHA Provider Manual, Policy 02.02.25 Recipient Rights Personal Property and Funds; Provider Participation Agreement, Page 8, Item 4.0, Compensation, Type A Spec. Res. Pg 1; Licensing sm. Group Rules R400.14 315 page 19 & 20; Licensing lg. Group Rules R400.15 315 page 15.

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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. Topical and Oral medications are separated. 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. If there are controlled substances being administered the facility has a method of keeping track of these medications and are using two staff from different shifts to assist with counting. Staff are aware of how to dispose of medications.	Medicaid Ch. III, Covered Svcs; Licensing sm. Group Rules R400.14 316 & 312 page 21 & 18; Licensing lg. Group Rules R400.15 314 page 14 & 15; SCCMHA Policy 03.02.17 Medication Management in Licensed Residential Settings
ORR-Facility Initiates Contact with CM/SC When Appropriate	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, referrals to other team members, or that may need to be followed up at next visit with consumer.	SCCMHA Provider Manual Person Centered Planning Policy; Residential Services Policy 03.02.07
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
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
Training for PCP	Qualified staff are trained regarding all aspects of specific consumer's person centered plan, examples: proper administration of medications, additional physical interventions, transfers, injections, management of feeding tubes, therapeutic positioning, and suctioning, special dietary needs, diabetes, etc.	SCCMHA Provider Manual, SCCMHA Self Determination Policy

Consumers

Emergency Preparation	Consumer can identify location of emergency supplies (EXAMPLE: battery operated radio, flashlights, first aid supplies, etc.).	SCCMHA Provider Manual Residential Services Policy 03.02.07
Meal Preparation Assistance	Assistance to the consumer is provided in shopping, meal preparation, and cooking. If applicable	Medicaid Manual, Mental Health and Substance Abuse
Non-medical care	All necessary non-medical supplies are present, accessible and used as required or needed by the consumer.(examples: Band-aids, medicated shampoo, medicated lotions, eye drops, etc.)	Medicaid Manual, Mental Health and Substance Abuse; SCCMHA Provider Manual Residential Services Policy 03.02.07
ORR-Access to Recipient Rights Booklets	Know Your Rights Booklets were available?	Mental Health Code 706; Mental Health code 755 (b)(5)(c)
ORR-Access to Recipient Rights Complaint Forms	Complaint forms are readily available?	Administrative Rule 7046

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| ORR-Telephone Access | Consumers have access to a telephone to use at reasonable times. Telephone use/restrictions are posted in a conspicuous area. | Mental Health Code 726(3)(6) |

Documentation

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.	SCCMHA Provider Manual, Type A, Page 5; Licensing sm. Group Rules R400.14 317 page 22; Licensing Large Group Rules R400.15 317 page 16
All Consumers Are Involved in Meaningful Activities	For those consumers not involved in a skill build program, supported employment or clubhouse, those consumers have a minimum of two to four different activities of their choice outside their home per week.	MDCH Improving Outcomes for Adults in the area of meaningful activities.
Case Manager Contact	There is evidence the Case Manager is overseeing implementation of the individual plan of service including supporting the beneficiary's dreams, goals, and desires for optimizing independence; promoting recovery; assisting in the development and maintenance of natural supports.	Medicaid Provider Manual Section 13; SCCMHA Provider Manual Residential Services Policy 03.02.07
Consumer Satisfaction	Consumer satisfaction is sought and action is taken to promote consumer satisfaction.	SCCMHA Provider Manual, Policy 05.06.01 Network Management & Development.
Consumers Are Involved in Activities Outside the home	Adult consumers are engaged in meaningful activities that are meaningful to the consumer. The consumers are involved at a minimum of one activity of their choice outside their home per week. [activities can be individual-chosen classes, work, volunteering, socializing, recreating or specialty supports (e.g., skill building or clubhouse) outside the home; excludes medical appointments (MD, DO, PA, RN, DDS, OT, PT, or laboratory) and transportation]	MDCH requirement for Improving Outcomes in the area of Meaningful Life activities.
Coordination of Supports	There is evidence of communication between the direct care staff and other staff (if applicable), direct care staff and parent/guardian/SC/CM	Medicaid Manual, General Information
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

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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
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
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.	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.
Signed Rental Agreements	All consumers living in SIP have a signed rental agreement with the SIP provider. The rental agreement should not exceed the rate provider agreed upon in SCCMHA contract. Copy of rental agreement should be filed in consumer chart. Rental agreement should have appropriate signatures by guardian/payee if consumer not own guardian. The provider should have proof of receipt of rental monies that match the amount noted in the rental agreements.	SCCMHA Contract and Medicaid payment of services provided in SIP facilities.
Staff Work Schedules	Provider has proof documentation of staff work schedules.	SCCMHA Provider Participation Agreement Contract, Attachment A Staffing Pattern.
Staffing	The program design and budget is adequate enough to meet program needs which includes staffing. Staffing levels should reflect what provider agreed to in the SCCMHA contract.	SCCMHA Contract

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Facility/Program Observation

Accessibility	Each setting must be physically accessible to the individuals residing/ attending there so the individuals may function as independently as they wish. Individuals must be able to move around in the setting without physical barriers getting in their way. This is especially true for individuals in wheelchairs or who require walking aids. Furniture must be placed in such a way that individuals can easily move around it, with pathways large enough for a wheelchair, scooter or walker to navigate easily if individuals with these types of mobility aides reside in the setting.	Home and Community Based Services Medicaid Manual Requirements.
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.
Dietary needs	The provider monitors the availability of food for the consumer to have nutritious meals daily.	SCCMHA Provider Manual Residential Services Policy 03.02.07
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
Environmental Hazards	The provider monitors and/or address environmental hazards within the consumer's residence. (example: broken windows, leaky roof, chemicals, toxic materials, sharps, etc)	SCCMHA Provider Manual Residential Services Policy 03.02.07
Facility Accommodations	The Provider provides and/or promotes an appropriate environment for the provision of services. (examples: Private sleeping area, own bed, resources necessary to complete personal care).	SCCMHA Provider Manual Residential Services Policy 03.02.07
Personal Care Items Available	Basic supply of personal care items are available to the consumer, such as: bath soap, shampoo, toothpaste, deodorant and other items needed to complete consumer personal care.	SCCMHA Provider Manual Residential Services
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
Site Maintained	The property/fiscal plant/program site is maintained (if applicable). The environment of care is clean, and organized. Auditor did not note any items that were failing, in disrepair, or not maintained properly. The provider has in place a method to assure that someone is monitoring and provider is informed of any repairs necessary. Proof documents available such as preventative maintenance logs and proofs of inspections as necessary.	SCCMHA Provider Manual, Housing Best Practice Guideline, Quality Standards, Page 4; Licensing small Group Rules R400.14 403 Page 24 & R 400. 14 209 Page 10 Licensing large Group Rules R400.15 209 Page 7 & R400.15 403 page 18; SCCMHA Contract Attachment B

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Staff Absence Procedure	There is procedure available for covering staff absences.	SCCMHA Provider Manual Residential Services Policy 03.02.07

Home Manager Questions

Health and Wellness	Provider is supporting the health and wellness of consumers. Menus support the food pyramid with five fruits and vegetables per day. Exercise is discussed and promoted as part of the consumer daily or weekly routine.	SCCMHA Health and Wellness and Michigan Health and Wellness initiative.

Log Books

Supervision Documented	There is documented evidence that non professionals were appropriately supervised. The evidence can be in staff communication logs, staff meeting minutes, staff performance improvement plans. Evidence of supervision of support staff directly providing services.	MDCH Site Review Report & Plan of correction 2/12/2003. Medicaid Manual, General Info. Pg. 3

PCP Review

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;

Policies and Procedures

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. Provider has a policy/procedure that indicates how records will be stored, how long, and how they will be disposed of after the date of retention has expired.	Health Information Technology for Economic and Clinical Health (HITECH) Act. SCCMHA HIPAA Compliance Policies.
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

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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
Ongoing Background Checks and Sanctions	As required for CMS (Centers for Medicaid and Medicare Services) to reduce fraud and abuse of Medicaid and Medicare funds, sanction checks should be performed against the List of Excluded Individuals/Entities maintained by the Office of Inspector General (OIG/LEIE) and Systems for Award Management (SAM). At minimum, providers are required to complete these checks at least monthly. Ongoing criminal background checks ICHAT (Internet Criminal History Access Tool) should be performed every two years. These checks are required for all staff working in the agency, board members, and anyone with a controlling interest in the agency.	SCCMHA Provider Manual, Competency Requirements for the SCCMHA Provider Network 05.06.03; MDHHS Site Review; MSHN Site Review
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
Policy Awareness	The provider is familiar with the Provider manual and has proof of receiving the Providers manual.	SCCMHA Provider Manual
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
Vehicle Emergencies	Policies will include information about vehicle breakdown and vehicle accident procedure that is reviewed with staff at least annually.	MDCH Audit Review 2012

Pre-Audit Review

Audit Findings Other	There are plans of correction from Contract Compliance. (Review Contract file)	SCCMHA Provider Participation Agreement

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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
Case Managers/Supports Coordinator Communications	Verify through letters, correspondence, meeting minutes, review logs, surveys to supervisors/chairpersons, etc. (Contact Case Manager/Supports Coordinator for issues, comments, etc.)	SCCMHA Provider Manual
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
Consumer Questionnaires	There are items that need follow up or discussion with provider from the Consumer questionnaires. There are items that are positives that the consumers had to say about the provider.	SCCMHA Provider Manual
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
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
Incident Reporting	Incident Reports are completed as needed and a copy is filed at SCCMHA. The incident reports are to be filed within 24-48 hours of the incident. (Contact Recipient Rights/Customer Service Supervisor)	SCCMHA Provider Manual, Type A & B Specialized Residential, Incident Reporting
Liability Provisions	There are provisions in place for insuring against a range of liabilities.	Medicaid Manual, General Information
Recipient Rights Corrective Action	Any Recipient Rights Corrective Action plan was needed and when you go to the site make sure the corrective action plan has been implemented. (Check the current audit file and previous audit file for any ORR site visit information and review for need for plan of correction).	Policy Standard I
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

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Staff File Review

DHS Central Registry Checks	All persons working with children of SCCMHA services will have a background check that includes DHS Central Registry for any substantiated abuse or neglect charges against children.	SCCMHA policy 05.06.03 Competency Requirements for the SCCMHA Provider Network.
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
Provider Vehicles	If transportation is provided or required there must be proof of valid driver's license, appropriate auto insurance coverage(100/300) and a reliable and safe means of transportation	SCCMHA Provider Manual Residential Services Policy 03.02.07
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)

Staff Questions

Direct Care Wage Increase	Was provider given a direct care wage increase during the year. If so is there proof at the site that staff the increase as noted in the SCCMHA contract.	SCCMHA Contract and Direct Care Wage increases as noted from the State of Michigan.
ORR-Access to Incident Report Forms	Incident Report forms are readily available?	SCCMHA Provider Manual Recipient Rights Reporting Unusual or Unexpected Incidents Policy 02.02.10
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
Staff Protocol	There is evidence of a protocol and/or understanding by support staff of who to call or notify if they call in, need work replacements, etc.	SCCMHA Provider Manual Residential Services Policy 03.02.07