SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

Audit Checklist w/ Refs
Audit Name: Access

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)
Access Center Provides Information	The access system provides information about, and help people connect as needed with, the SCCMHA's Customer Services Unit, peer supports specialists and family advocates; and local community resources, such as: transportation services, prevention programs, local community advocacy groups, self-help groups, service recipient groups, and other avenues of support, as appropriate.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs Access System Standards dated July 2008.
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 Face Sheet	The consumer face sheet or demographics contains current information. Auditor will be looking for current information in the consumer demographic area of the medical record and that items match what is found in other parts of the chart. Such as consumer residential living arrangement, primary care physician, employment status, medical conditions, DD proxy measures, etc.	Medicaid Manual, Mental Health and Substance Abuse, Recordkeeping
Documents Complete	Documents are complete and are signed by the appropriate parties (assessments, progress notes, discharge documents).	SCCMHA Provider Participation Agreement, section 5.0

Documentation

Access Available 24/7	The Access System is available 24 hours a day, seven days per week. This should include the availability of access for an interpreter for persons who are hearing impaired and those individuals with Limited English Proficiency.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs Access System Standards dated July 2008.
Access Reports	Access timeliness reports are completed (State reporting). Information for this item will be gathered from any sanction letters sent to the provider for issues with Access Timeliness reporting to the state.	SCCMHA Provider Manual, Tab 7
Access Screening	The clinical screening for eligibility results in a written screening decision which addresses each of the following items: Identifying presenting problem and need for services and supports; Identification of the population group (DD, MI, SED, or SUD) that qualifies person for public mental health and substance use disorders and supports; Legal eligibility and priority criteria; Documentation of any emergent or urgent needs and how they were immediately linked for crisis service; Identification of screening disposition; Rationale for system admission or denial.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.

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Access System Accommodations Needs	The Access System has the ability to accommodate individuals who have special needs such as Limited English Proficiency, Diverse Cultural Backgrounds, Visual Impairments, Alternative Communication Needs, and Mobility Challenges.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Access System Crisis Calls	The Access System crisis or emergency telephone calls are immediately transferred to a qualified practitioner without requiring an individual to call back.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Access System Walk Ins	Individuals who walk in to the Access System are provided a timely and effective response to their requests for assistance. With in 30 minutes.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
CAFAS	The CAFAS is completed on all eligible children (between the ages of 7 and 17) at the time of assessment, quarterly, and at the time of closing.	SCCMHA Provider Manual, Policy 03.01.01 and Policy 05..04.01
CAFAS/PECFAS	The CAFAS is completed on all eligible children (between the ages of 7 and 17) and PECAFAS (age prior to 7) at the time of assessment, quarterly, and at the time of closing.	SCCMHA Provider Manual, Policy 03.01.01 and Policy 05..04.01
Medical Director Oversight	The Medical Director is involved in the review and oversight of Access System policies and clinical practices. Documentation which demonstrates that the medical director has reviewed the access system policies and procedures. Also documentation of the medical director has reviewed and provided oversight to Access System clinical practices.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Medical or Psychiatric Advanced Directives	The Access System inquires as to the existence of any established medical or psychiatric advanced directives relevant to the provision of services.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Notification of Rights	All individuals have been given a summary of recipient rights including their rights to a person centered planning process and timely access to the pre planning process.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Outreach Services	There is regular and consistent outreach effort to commonly unserved and underserved populations such as Children and Families, Older Adults, Homeless Persons, Members of Ethnic, Racial, Linguistic, and Culturally Diverse Groups, Persons with Dementia, Pregnant Women.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Quality Improvement	There is monitoring of Access Center performance and implemented quality improvement measures in response to performance issues. There is evidence of quality improvement activities to improve Access System performance for any areas where Access System performance is below required levels. Evidence of monitoring telephone answering rates, call abandonment rates, and timeliness of appointments and referrals.	Medicaid Prepaid Inpatient Health Plans and Community Mental Health Services Programs; Access System Standards dated July 2008.
Repeat Citations	Provider has evidence that previous citations have been corrected from the last annual audit.	SCCMHA Auditing Procedure.

Saginaw County Community Mental Health Authority

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PCP Review

Consents and Privacy Notices	Proper consents and privacy notices are given.	HIPAA

Policies and Procedures

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: 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
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

Data Integrity	Reports pulled from Sentri for Consumer Demographics, Notes missing, Progress notes requiring your signature, unsigned progress notes, notes incomplete, Expired Ability to pay assessments, etc. are 95% compliant.	NO REFERENCE IN SYSTEM

Staff File Review

ANSA Training	All primary workers, working with adults with Mental Illnesses will have Adult Strengths and Needs Assessment training (ANSA).	SCCMHA policy on standardized assessment tool.
CAFAS or PECFAS Training	All staff have training in CAFAS if dealing with children age 7-17 or PECFAS if dealing with children younger. Training to be renewed every 2 years.	SCCMHA Provider Manual, Policy 03.01.01 and Policy 05..04.01
Children's Diagnostic and Treatment Services Certification	Each staff person has the minimum of 24 hours of training in Childrens Services to meet the Childrens Diagnostic criteria.	MDCH Childrens Diagnostic and Treatment Services Certification Interpretive Guidelines; SCCMHA Provider Manual Tab 3
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)