

# Annual Audit Cycle of SCCMHA Auditing Department

## Network Services and Public Policy Audit scores from November 1, 2014 to October 31, 2015

| Provider Type/Name                                  | Audit Score |
|---|-------------|
| <b>Access</b>                                       |             |
| SCCMHA – Access Center                              | <u>92%</u>  |
| <b>Number of Audits:</b>                            | <b>1</b>    |
| <b>Average Score</b>                                | <b>92%</b>  |
| <b>ACT</b>  |             |
| TTI-ACT   | <u>88%</u>  |
| <b>Number of Audits:</b>                            | <b>1</b>    |
| <b>Average Score</b>                                | <b>88%</b>  |
| <b>Autism</b>                                       |             |
| SCCMHA - Autism                                     | <u>84%</u>  |
| <b>Number of Audits:</b>                            | <b>1</b>    |
| <b>Average Score</b>                                | <b>84%</b>  |
| <b>Children’s Case Management/Outpatient</b>        |             |
| SCCMHA Family Services Unit Team 1, Robert White    | 96%         |
| SCCMHA Family Services Unit Team 2, Joseph Dula     | 92%         |
| Westlund Guidance Clinic                            | <u>85%</u>  |
| <b>Number of Audits:</b>                            | <b>3</b>    |
| <b>Average Score</b>                                | <b>91%</b>  |
| <b>Clubhouse-PSR</b>                                |             |
| Bayside Lodge, TTI                                  | <u>96%</u>  |
| <b>Number of Audits:</b>                            | <b>1</b>    |
| <b>Average Score</b>                                | <b>96%</b>  |
| <b>Community Living Supports Individual/Respite</b> |             |
| Coats, Marina                                       | 91%         |
| Kingsbury, Rex                                      | 98%         |
| Miller, Matthew                                     | 100%        |
| Modrall, Mackenzie                                  | 95%         |
| Redmond, Kayla                                      | 95%         |
| Stalsberg, Jodi                                     | 97%         |
| Turner, Samantha                                    | <u>100%</u> |
| <b>Number of Audits:</b>                            | <b>7</b>    |
| <b>Average Score:</b>                               | <b>97%</b>  |
| <b>Community Living Supports-Corporate and SIP</b>  |             |
| 2002 Essex Street                                   | 83%         |
| APS Employment Services Inc.                        | 87%         |
| Beacon Harbor of Saginaw SIP #1                     | 91%         |
| Bright Vision SIP                                   | 96%         |
| Independent Living Solutions, LLC-SIP               | 91%         |
| Jayden 2030 Owen St.                                | 96%         |
| Jayden Bond Townhouse #1                            | 95%         |
| JSP-Reynick CLS                                     | 76%         |
| JSP 522 S. 28 <sup>th</sup> St. –CLS                | 79%         |
| JSP 806 S. 26 <sup>th</sup> St.                     | 84%         |
| JSP 808 S. 26 <sup>th</sup> St. –CLS                | 90%         |

|                                      |            |
|--------------------------------------|------------|
| JubeJu SIP #2                        | 94%        |
| JubeJu SIP #3                        | 93%        |
| JubeJu SIP #5                        | 95%        |
| Lutheran Social Services of Michigan | 93%        |
| Phillips CLS                         | <u>96%</u> |
| <b>Number of Audits:</b>             | <b>16</b>  |
| <b>Average Score</b>                 | <b>90%</b> |

### Crisis Residential Services

|                          |            |
|--------------------------|------------|
| Saginaw Meadows CRU      | <u>98%</u> |
| <b>Number of Audits:</b> | <b>1</b>   |
| <b>Average Score</b>     | <b>98%</b> |

### Drop In

|   |            |
|---|------------|
| TTI-Friends for Recovery Drop in Center | <u>96%</u> |
| <b>Number of Audits:</b>                | <b>1</b>   |
| <b>Average Score</b>                    | <b>96%</b> |

### Enhanced Health Services

|                                   |            |
|-----------------------------------|------------|
| ABA Pathways, LLC                 | 74%        |
| ABC Resources, PC                 | 64%        |
| Autism Center of Central Michigan | 72%        |
| Centria Healthcare, LLC           | 74%        |
| Paramount Rehabilitation Services | 73%        |
| SCCMHA- EHS (OT,RN,Psych,Therapy) | <u>94%</u> |
| <b>Number of Audits:</b>          | <b>6</b>   |
| <b>Average Score:</b>             | <b>77%</b> |

### Family Support Subsidy

|                                 |             |
|---------------------------------|-------------|
| SCCMHA - Family Support Subsidy | <u>100%</u> |
| <b>Number of Audits:</b>        | <b>1</b>    |
| <b>Average Score</b>            | <b>100%</b> |

### Inpatient

|   |            |
|---|------------|
| Bay Regional Medical Center                   | 95%        |
| BCA of Detroit, LLC-StoneCrest Center (IMD)   | 89%        |
| HealthSource Saginaw, Inc.                    | 90%        |
| The Memorial Hospital dba Memorial Healthcare | <u>87%</u> |
| <b>Number of Audits:</b>                      | <b>4</b>   |
| <b>Average Score:</b>                         | <b>90%</b> |

### Licensed Residential

|   |     |
|---|-----|
| Agnes Rambo                                   | 86% |
| Athens AFC                                    | 94% |
| Beacon Harbor of Saginaw Home #5              | 98% |
| Beacon Harbor of Saginaw Home #8-Sandra Court | 96% |
| Caldana Adult Care Services Inc.              | 87% |
| Geddes-CSCS                                   | 89% |
| Gera Road Home VRSI                           | 99% |
| Glenvale-BHS                                  | 86% |
| HomeLife 7519 S. 10 <sup>th</sup> St.         | 91% |
| House of Hope                                 | 95% |
| Jayden Janes AFC                              | 90% |
| Kneaded Angels Adult Living                   | 94% |
| Krasinski AFC Home, Inc.                      | 93% |
| Miller Rd. Group Home II                      | 88% |

|  |            |
|--|------------|
| New Center                                       | 96%        |
| Patton   | 88%        |
| Res Care Premier-Vienna                          | 96%        |
| Riverfront Home                                  | 93%        |
| Roseview   | 97%        |
| Saginaw Valley AFC                               | 86%        |
| Slatestone – CSCS                                | 85%        |
| Southport  | 98%        |
| Sunnyside Home                                   | 98%        |
| The Prosperity House                             | 91%        |
| Wallace Street Partners d/b/a Wallace Street ALC | 95%        |
| Westlake Cottage III                             | 89%        |
| Westlake V                                       | 92%        |
| Woodlawn   | <u>92%</u> |
| <b>Number of Audits:</b>                         | <b>28</b>  |
| <b>Average Score:</b>                            | <b>92%</b> |

| <b>Licensed Residential Modified</b> |            |
|--------------------------------------|------------|
| Beacon Harbor of Saginaw Home #1     | 92%        |
| Beacon Harbor of Saginaw Home #2     | 71%        |
| Beacon Harbor of Saginaw Home #3     | 98%        |
| Beacon Harbor of Saginaw Home #4     | 91%        |
| Cambridge                            | 98%        |
| Cardinal Care AFC                    | 86%        |
| HomeLife-691 W. Bridge St. AFC       | 93%        |
| Jayden AFC                           | 93%        |
| Navaho Trail                         | 89%        |
| ResCare Premier – McCarty            | 94%        |
| Roy’s AFC                            | 94%        |
| Sloan – CSCS                         | 87%        |
| Weiss St. AFC                        | 93%        |
| Westlake IV                          | <u>94%</u> |
| <b>Number of Audits:</b>             | <b>14</b>  |
| <b>Average Score:</b>                | <b>91%</b> |

| <b>OBRA</b>              |            |
|--------------------------|------------|
| SCCMHA - OBRA            | <u>99%</u> |
| <b>Number of Audits:</b> | <b>1</b>   |
| <b>Average Score</b>     | <b>99%</b> |

| <b>Self Determination</b> |            |
|---------------------------|------------|
| Wilson, Stuart, CPA, P.C. | <u>63%</u> |
| <b>Number of Audits:</b>  | <b>1</b>   |
| <b>Average Score</b>      | <b>63%</b> |

| <b>Skill Building/ Supported Employment</b> |            |
|---|------------|
| SCCMHA Community Ties North                 | <u>93%</u> |
| <b>Number of Audits:</b>                    | <b>1</b>   |
| <b>Average Score:</b>                       | <b>93%</b> |

| <b>Supported Employment</b>  |            |
|------------------------------|------------|
| SCCMHA- Supported Employment | <u>73%</u> |
| <b>Number of Audits:</b>     | <b>1</b>   |
| <b>Average Score</b>         | <b>73%</b> |

**Supports Coordination/Case Management**

|  |            |
|--|------------|
| Case Management of Michigan, Inc.                          | 96%        |
| Disability Network –CIL Mid-Michigan Supports Coordination | 98%        |
| SCCMHA Community Supports Services Team 1 Burages          | 88%        |
| SCCMHA Supports Coordination, Team I - Carter              | 94%        |
| SCCMHA Supports Coordination, Team II – Fondren            | 89%        |
| TTI-CSM  | <u>84%</u> |
| <b>Number of Audits:</b>                                   | <b>6</b>   |
| <b>Average Score:</b>                                      | <b>92%</b> |

**Wraparound**

|                          |            |
|--------------------------|------------|
| SCCMHA- Wraparound       | <u>67%</u> |
| <b>Number of Audits:</b> | <b>1</b>   |
| <b>Average Score</b>     | <b>67%</b> |

|   |            |
|---|------------|
| <b>Total Number of Audits Completed:</b>                        | <b>96</b>  |
| <b>Average Audit Score for Total Number of Audits Completed</b> | <b>92%</b> |