

Lapeer County Community Mental Health Network Providers Monitoring FY2022 Network Providers End-Of-Year Report

Purpose	To monitor LCCMH network providers' compliance to the FY22 contract. Providers are monitored on six					
	domains: Contract Compliance, Recipient Rights, Corporate Compliance, Clinical Assessment, Finance /					
	Data Compliance, and Training Compliance. Providers who do not meet the standard for each domain					
	are required to complete a Corrective Action Plan (CAP) and additional follow-up may be required.					
Review Schedule	10/1/2021 – 09/30/2022					
Network Provider	Lauren Emmons, ACSW – Chief Executive Officer					
Monitoring Team	Regina MacDonald, MS – Contract Manager					
	Lisa Jolly, BS – Recipient Rights Officer					
	Michelle Gould-Rice, LMSW – Corporate Compliance Officer					
	Roy Ramirez, MS – Clinical Supervisor/Credentialing & Privileging Committee Chair					
	Sandy Koyl, BHSA – Data Department					
	Emma Brandt, MBA – Chief Financial Officer					
	Lisa Ruddy, MPH – Quality Department / Network Monitoring Coordinator					
Standards	Contract Compliance – 95%					
	Recipient Rights – 95%					
	Corporate Compliance – 100%					
	Clinical Assessment – 95%					
	Finance / Data Compliance – 95%					
	Training Compliance – 100%					

Provider	Contract Compliance (Standard 95%)	Recipient Rights (Standard 95%)	Corporate Compliance (Standard 100%)	Clinical Assessment (Standard 95%)	Finance/Data Compliance (Standard 95%)	Training Compliance (Standard 100%)	Overall Score
Alternative Services, Inc. – Lake Nepessing	100%	100%	100%	100%	100%	77%	96%
Alternative Services, Inc. – Lippincott	100%	100%	100%	100%	100%	96%	99%
Alternative Services, Inc. – Stanley Rd.	100%	100%	100%	100%	100%	59%	93%
Alternative Services, Inc. – Woodlawn	100%	100%	100%	100%	100%	87%	98%
Beacon Specialized Living	100%	100%	100%	100%	100%	90%	98%
Caremore of Metamora	100%	80%	50%	88%	100%	0%	69.6%
Caremore of Metamora 3-month Follow-Up	N/A	N/A	N/A	N/A	N/A	50%	50%
Center for the Arts / Gallery 194	100%	100%	100%	100%	N/A	100%	100%
Central State Community Services – Oregon	100%	100%	100%	100%	100%	85%	97.5%
Central State Community Services – Vassar	100%	100%	100%	100%	100%	87.5%	97.9%
Churchill Farms	100%	100%	100%	100%	100%	100%	100%
Contract Management Associates, Inc.	100%	100%	100%	90%	N/A	100%	98%
Cynthia McNeil	100%	100%	100%	100%	N/A	100%	100%
Diane Vaughan	100%	100%	100%	100%	100%	100%	100%
Family Literacy Center	100%	100%	100%	100%	N/A	100%	100%

Provider	Contract Compliance (Standard 95%)	Recipient Rights (Standard 95%)	Corporate Compliance (Standard 100%)	Clinical Assessment (Standard 95%)	Finance/Data Compliance (Standard 95%)	Training Compliance (Standard 100%)	Overall Score
Family Services Agency	100%	100%	100%	88%	N/A	83%	94%
of Mid-Michigan							
Flatrock – Brandon	100%	80%	100%	100%	100%	100%	96.6%
Flatrock – Burton	100%	100%	100%	100%	100%	100%	100%
Flatrock – Flint	100%	80%	100%	100%	100%	100%	96.6%
Township							
Flatrock – Flushing	100%	80%	100%	100%	100%	100%	96.6%
Flatrock – Goodrich	100%	100%	100%	100%	100%	98%	99.6%
Flatrock – Lapeer North	100%	80%	100%	100%	100%	100%	96.6%
Fowler Center	100%	100%	100%	100%	100%	95%	95%
Genoa Pharmacy	100%	N/A	100%	100%	100%	N/A	100%
Golden Arrow Drop-In	100%	100%	100%	100%	N/A	N/A	100%
Center							
Greater Lapeer	100%	100%	100%	93%	N/A	N/A	98%
Transportation							
Authority							
Guardian Angel	100%	100%	100%	100%	N/A	100%	100%
Services, 4U, Inc.							
Hamilton Community	100%	N/A	100%	100%	100%	N/A	100%
Health Center							
Helping Hand Nursing	100%	100%	100%	100%	100%	100%	100%
Services							
Hope Network – New	100%	100%	100%	100%	100%	N/A	100%
Passages							
Hope Network –	100%	100%	100%	100%	100%	96%	99%
Westwood							
Jacqueline Raymond	100%	100%	100%	100%	N/A	100%	100%

Provider	Contract Compliance (Standard 95%)	Recipient Rights (Standard 95%)	Corporate Compliance (Standard 100%)	Clinical Assessment (Standard 95%)	Finance/Data Compliance (Standard 95%)	Training Compliance (Standard 100%)	Overall Score
Lapeer Teamwork –	100%	100%	100%	100%	N/A	94%	99%
CLS/Respite	1000/	750/	1000/	1000/	NI/A	000/	0.40/
Lapeer Teamwork – Skill Building /	100%	75%	100%	100%	N/A	90%	94%
Supported Employment							
Life Skills Centers, Inc.	100%	100%	100%	100%	N/A	100%	100%
Martinez AFC	100%	100%	100%	100%	100%	N/A	100%
Mathews AFC	100%	100%	100%	100%	100%	100%	100%
McLaren Lapeer Region	100%	100%	100%	100%	100%	53%	92%
Mercy Plus Home Care	100%	100%	100%	100%	100%	N/A	100%
Michigan Community	100%	0%*	100%	100%	100%	100%	83%
Services, Inc. – CLS		*Only one item in this domain was scored, 0/1 = 0%					
Michigan Community Services, Inc. – Park St.	100%	100%	100%	100%	100%	89%	98%
Redwood, Inc. – Lighthouse	100%	80%	100%	100%	100%	93%	96%
Redwood, Inc. – Oakhill	100%	80%	100%	100%	100%	93%	96%
ResCare – Briggs	100%	80%	100%	100%	100%	93%	96%
ResCare – Burnside	100%	80%	100%	100%	100%	97%	96%
ResCare – Clinton	100%	100%	100%	100%	100%	N/A	100%
ResCare – Davis Lake	100%	80%	100%	100%	100%	93%	96%
ResCare – Farnsworth	100%	80%	100%	100%	100%	95%	96%
ResCare – Frances	100%	80%	100%	100%	100%	97%	96%

Provider	Contract Compliance (Standard 95%)	Recipient Rights (Standard 95%)	Corporate Compliance (Standard 100%)	Clinical Assessment (Standard 95%)	Finance/Data Compliance (Standard 95%)	Training Compliance (Standard 100%)	Overall Score
ResCare – Raymond	100%	100%	100%	100%	100%	95%	99%
ResCare – Reamer	100%	80%	100%	100%	100%	90%	95%
ResCare – Silverwood	100%	100%	100%	100%	100%	90%	98%
Resident Advancement, Inc. – Hampshire	100%	80%	100%	100%	100%	100%	96.6%
Resident Advancement, Inc. – North Branch	100%	100%	100%	100%	100%	90%	98.3%
Safehaus, Inc.	100%	100%	100%	100%	100%	32%	88%
Turning Leaf Behavioral Health Services	100%	100%	100%	100%	100%	81%	96%

Summary of Findings

LCCMH had a total of 123 contracts in FY22. During the provider monitoring process, only those contracts which have direct interaction with persons served are reviewed. A total of 56 providers were reviewed. The overall compliance for all domains and providers was 96%. Overall compliance rates for each domain were as follows:

Contract Compliance: 99%Recipient Rights: 94%

Corporate Compliance: 99%Clinical Assessment: 99%

Finance/Data Compliance: 100%

• Training Compliance: 89%

Thirty-nine providers (69%) required a Corrective Action Plan (CAP) due to one or more areas in noncompliance. Most of the CAPs were in the domains of Training Compliance or Recipient Rights. Some common problems with training compliance are providers not keeping copies of the individual plan of service (IPOS) training record, not completing the trainings in the required timeframe, or missing training documentation (certificate or training sign-in sheet).

Many providers have a good rapport with clinical supervisors and Recipient Rights. Many providers have their trainings well-organized and they are easy to review.

Recommendations

- Improve IPOS training process internally at LCCMH and externally with providers. Update the IPOS in-service form to ensure trainings are completed within 30 days of IPOS, amendment, or periodic review.
- When possible, LCCMH will conduct onsite training reviews with providers to reduce burden of electronic reviews.
- Continue quarterly network provider meetings to share information and explain requirements.
- Improve network provider onboarding process for new providers by meeting with them to discuss contract requirements.
- Work closely with providers who continue to be noncompliant over multiple years in the same area.

LR 8/22/22