



Detroit Wayne Integrated Health Network

707 W. Milwaukee St.
Detroit, MI 48202-2943
Phone: (313) 833-2500
www.dwihn.org

FAX: (313) 833-2156
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

Outpatient Provider Meeting

Friday, June 24, 2022

Virtual Meeting

10:00 am – 11:00 am

Agenda

Zoom Link: <https://dwihn-org.zoom.us/j/93220807823>

- I. Welcome/Introductions
- II. Claims- Kyra Houston
 - CCBHC billing
 - Error Messages
 - Admission Record
 - Disability Designation
- III. Children's Initiative Department- Cassandra Phipps
 - DHHS Foster Care / Access Screening Updates-- Memo and Presentation (pages 2-16)
 - Summer Prevention Activities (pages. 17-20)
<https://www.surveymonkey.com/r/DWIHNSTEAM>
- IV. Credentialing- Ricarda Pope-King
 - Credentialing Process
- V. Quality- Dayna Stevens & Starlit Smith
 - Training on the IPOS (pages 21-24)
- VI. Recipient Rights
 - Recipient Rights Training (Mike Olver, ORR Trainer) (Pages 25-26)
 - Recipient Rights Monitoring (Ed Sims, ORR Monitor) (Pages 27-28)
- VII. Managed Care Operations- June White
 - Service Delivery Expansion Survey- Jacquelyn Davis
 - Contracting/Credentialing- Sharon Matthews
- VIII. Administrative Updates – Eric Doeh, President and CEO
- IX. Questions
- X. Adjourn

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Memo

To: Children's Initiatives Network (SED and I/DD)

From: Cassandra Phipps, Director of Children's Initiatives

Date: June 17, 2022

Re: Department of Human and Health Services Foster Care Screening

CC: Melissa Moody (Chief Clinical Officer), Ebony Reynolds (Clinical Officer), Jacquelyn Davis (Clinical Officer)

This correspondence is to inform of a new collaborative effort between Detroit Integrated Health Network (DWIHN) and Wayne County Department of Health and Human Services (DHHS). Research indicates that children involved in child welfare have higher rates of mental and behavioral health needs compared to children in the general population.¹ For children in out-of-home placements, the trauma of being removed from their parents' care and custody can exacerbate these needs and lead to placement disruptions or placement in residential settings. The goal of this collaboration is to ensure that children in DHHS care are connected to mental health services that meet their needs early in a new case or placement to prevent disruptions and better support their wellbeing.

Effective 7/1/2022, DHHS child welfare specialists from the North Central Regional Office will contact DWIHN Access Department to provide a Trauma Screening Checklist and request a community mental health screening for children ages 7 to 17. After the screening has been completed an intake appointment will be scheduled with a children provider. All other Wayne County DHHS child welfare specialists will continue to contact children providers directly for community mental health screenings as usual.

This new process will be discussed further during the Children System Transformation meeting on 6/24/2022 @ 9:00am to 10:30am virtually. If you are interested in attending the meeting or have any questions please contact Kim Hoga at Khoga1@dwihn.org or Monica Hampton at Mhampton@dwihn.org.

Thank you for your assistance,

Cassandra Phipps LPC, LLP, CAADC

Cassandra Phipps LPC, LLP, CAADC
Director of Children's Initiatives

¹ <https://www.ncsl.org/research/human-services/mental-health-and-foster-care.aspx>

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Early Connections to Mental Health Services Initiative

North Central Wayne DHHS Staff Training, June 2022



Agenda

- Welcome
- Purpose of new initiative
- Overview of changes to expect
- Walk-through of key steps in new DWIHN referral process
- Questions

Why is it important to screen children for trauma & connect them to services early in a new placement?

Children in foster care have disproportionately high rates of mental health needs, which can be exacerbated by the trauma of being removed from their parents' care.

Unmet needs often contribute to behavioral challenges that make children more difficult to care for and can lead to placement disruptions and placement into residential settings.

Compared to children in the general population, children in foster care are:

- **7x** more likely to experience depression
- **6x** more likely to exhibit behavioral problems
- **5x** more likely to feel anxiety
- **3x** more likely to have attention deficit disorder

Goal of North Central Wayne mental health connections initiative:

Screen children for trauma & connect them to mental health services earlier in a new placement to prevent disruptions & better meet children's needs

Key changes that you can expect:

1. New guidelines for staff to ensure that all children are screened for trauma & referral to services early in a new case or placement.
 - a) CPS completes trauma screening checklist for all children prior to 5-day transfer conference
 - b) Foster Care/ Ongoing CPS refers all children ages 3 to DWIHN within 14 days of a new placement or transfer to Ongoing CPS
2. New tracking system managed by HLOs to monitor and follow-up on children's connection to services
3. New central referral point at DWIHN that will simplify the referral process for staff, children, & caregivers
4. Improved coordination with DWIHN to better meet the mental health needs of children in care

Overview of new referral process

Trauma screening

- CPS specialist completes trauma screening checklist **prior to 5-day transfer conference**
- FC/ CPS Ongoing specialist reviews checklist with caregiver and/or child **w/in 14 days of placement/ case transfer**

Referral

- FC/ Ongoing CPS specialist completes online DWIHN trauma checklist submission form to initiate referral for **any child age 3+**
- Specialist contacts Access together with caregiver to make referral to DWIHN **w/in 14 days of placement/ case transfer**

Intake & first therapy session

- Access schedules intake with provider
- Specialist attends intake along with child and caregiver
- **Prior to first therapy session**, specialist establishes communication with therapist

Ongoing services

- Specialist informs therapist about any upcoming court dates & TDMs/FTMs
- Therapist shares regular progress updates with specialist

Other changes to the mental health referral process:

- HLOs will track trauma screening, referrals, and connections to services and may reach out for details about cases if they are missing information
- Specialist are expected to be present for the *initial call to Access* and *initial intake appointment* to share important details about the child's history and case

Step 2: Complete referral to DWIHN

FC/ Ongoing CPS:

1. Within 14 days of removal or transfer to Ongoing CPS, refer any child 3 years old and older to DWIHN for a mental health screening.
2. Complete DWIHN trauma screening submission form (*more details on next slide*).

For Youth Ages 3 – 6	For Youth Aged 7 and Older
<ol style="list-style-type: none">a. Call Access (1-800-241-4949) and explain that you are looking for a referral to Infant Mental Health (IMH) services. <u>Access will provide a referral to an IMH provider.</u>b. Call IMH provider for an initial screening and intake appointment. Complete call along with parent/caregiver.	<ol style="list-style-type: none">a. Call Access (1-800-241-4949) for initial screening. Complete call along with parent/caregiver. <u>Access will schedule an intake appointment directly with a mental health provider.</u>

3. Following referral:

- a. Document date of referral in a Social Work Contact and complete a Case Service.
- b. Email the assigned HLO with 1) the trauma screening checklist and 2) the referral and intake date for tracking purposes.

How to complete DWIHN trauma screening submission form

Directions for Submission

Please complete this form & then contact the DWIHN Access Call Center at 800-241-4949 to complete a mental health screening.

Today's Date *

Contact Information of Current Caregiver

First Name *

Last Name *

Relation to Child *

Phone Number *
use the following format: 000-000-0000

Email Address

What is the Child's Medicaid/Recipient ID Number?

Child's First & Last Name *

Child's Date of Birth *

1. Fill in details about the child's current caregiver (i.e. foster parent, relative caregiver, or custodial parent for Ongoing CPS cases)

2. Fill in the child's name, date of birth, and Medicaid/ Recipient ID Number if known

Name of Primary Caseworker/Contact Person for Mental Health Screening *

Agency Name

Primary Casework Phone Number *

Email Address of Primary Caseworker

DHHS District Office *

Status of Child *

File Upload *
Upload the Trauma Checklist & Court Order

Send me a copy of my responses

Submit

Powered by smartsheet
Privacy Notice | Report Abuse

3. Fill in your own contact details and the name of your agency (i.e. North Central Wayne DHHS). Note the district office of origin and select the current legal status of the child from the drop-down menu.

4. Upload the trauma screening checklist and any legal documents available. Select "send me a copy of my responses" and submit.

The purpose of this form is to provide DWIHN with key pieces of information about the child, including their trauma history and current legal status, prior to referral and intake.

- Specialist completes the form prior to contacting DWIHN Access Department.
- DWIHN Access Department will gather any supporting documents from the form and upload into MHWIN system.
- Both DWIHN Access and DWIHN Children's Initiative Department will have access to the results.

For questions, contact Monica Hampton mhampton@dwihn.org or Kim Hoga khoga1@dwihn.org.

Step 3: Support intake & start of services

1. Within 30 days of removal/ case transfer to Ongoing CPS:

- ❑ Complete intake appointment. Attend appointment along with child and caregiver to share information about the child's trauma history and current circumstances.

2. Upon completion of intake appointment:

- ❑ Obtain name and contact information for child's assigned therapist.
- ❑ Document intake appointment, therapist's contact information, and any delays/barriers to intake date and/or service begin date in a Social Work Contact.
- ❑ Email HLO to provide the therapist's contact information and date of first appointment for tracking purposes.

3. Before first therapy session, contact child's assigned therapist to:

- ❑ Share information and answer any questions related to the case.
- ❑ Obtain the schedule of appointments.
- ❑ Request a copy of the child's treatment plan.
- ❑ Inform therapist of upcoming court dates and upcoming FTMs/ TDMs.

Step 4: Support ongoing engagement in services

1. Complete the following at the given intervals:

- Monthly:** Check in with therapist to ask for treatment progress and to share case updates; document in a Social Work Contact.
- Attend **once monthly** Child and Family Team meetings if child is in wrap-around services.
- Quarterly:** Complete case service review and upload supporting documentation including therapy progress reports.

2. Communicate with the youth's therapist or provider at the following touchpoints:

- Court dates:** Inform therapist of upcoming court dates and request progress update.
- FTMS/TDMs:** Invite therapist to FTM/TDMs at least a week before the meeting.
- If a placement change occurs:** Work with DWIHN, the therapist, and the child's new caregiver to determine whether the child will be able to continue with the same provider.
- If case transfers to a new FC or CPS Ongoing specialist:** Contact therapist to provide contact information for new case worker.

A new Trauma Screening Checklist should be completed in the following circumstances:

- ✓ At 180 days in the placement
- ✓ At the caregiver's report of behavioral changes in the child
- ✓ At a placement change
- ✓ Prior to case closure

Anticipated Pilot Launch Date: Wednesday, June 15

Resources available to you:

- Children's MH services checklist – *provides a detailed overview of the trauma screening and referral process*
- Monthly CMH/SED meetings hosted by Monica Hampton – *to ask questions about specific cases or referral process more generally*

Other things to note:

- HLOs may reach out to you if they don't hear from you about each step in the process to ensure that children have been screened for trauma and connected to services to meet their needs.
- Providers may contact a central inbox monitored by HLOs to notify DHHS if children are consistently missing appointments or at risk for termination of services (MDHHS-NCDHHS-MHServices@michigan.gov)

Appendix

Contact Information

Detroit Wayne Integrated Health Network:

Access Department:

- **Yvonne Bostic** (Access Call Center Administrator) / ybostic@dwmha.com

If you have any questions or concerns regarding the DWIHN Access Call Center, please send an email to: accesscenter@dwihn.org. Also, the DWIHN Helpline is also always available 24/7 at [800-241-4949](tel:800-241-4949).

Website: <https://www.dwihn.org/DWIHN-Access-Call-Center>

Children's Initiative Department:

- **Cassandra Phipps** (Director of Children's Initiative) / cphipps@dwihn.org
- **Kimberly Hoga** (Clinical Specialist) / khoga1@dwihn.org
- **Monica Hampton** / mhampton@dwihn.org







Website: <https://www.dwihn.org/childrens-initiatives>

DHHS:

Your assigned HLO can answer questions about specific cases or internal expectations for staff

- **Rachelle Dia Dia**, DiaR@michigan.gov
- **Chantell Goodwin Goodwill, Chantell (DHHS)** GoodwillC@michigan.gov
- **Kenyatta Hawthorne** HawthorneK@michigan.gov

Supporting documents

Description	Link or embedded document
Children's mental health services checklist	 <p>MH Services Checklist</p>
CSA trauma screening checklists	 <p>Screening checklist 0-5</p>  <p>Screening checklist 6-18</p>
DWIHN trauma screening submission form	<p>https://app.smartsheet.com/b/form/f12ca442f9964489801905e2e446f9e3</p>
DWIHN Access Department clinical screening form – <i>note that this is provided for specialists to preview prior to calling Access</i>	 <p>Access Screening Form</p>
DWIHN Infant and Early Childhood Mental Health Brochure	 <p>IMH Brochure</p>
DWIHN Children's Initiative Website (Wayne County Services Flyer, Children Crisis Flyer, Children Services Guidebook):	<p>https://www.dwihn.org/childrens-initiatives</p>
CAFAS / PECFAS / DECA handbook	 <p>CAFS PECFAS Guidebook</p>



Putting Children First Initiative Prevention Workshop Survey (Summer 2022)

Detroit Wayne Integrated Health Network is looking to partner with local agencies to provide a STEAM (Science, Technology, Engineering, Arts, and Math) Workshop and Chemistry/Entrepreneur (create personal care items such as soap and learn the business aspect) Workshop this Summer 2022.

Please complete the survey by Thursday June 30, 2022 if you are interested in registering a member to participate. After we receive interest of days and times DWIHN Children's Initiative Department will work with the local agency to identify when to offer the workshop.

STEAM Workshop Information:

- 1 workshop - 60 minutes virtually or in-person (max of 30 youth)
- If the workshop is in person the location is still to be determined
- Criteria: Ages 10 to 14

* Preferred Day/Time of the Week:

	Time
Monday	<input type="text"/>
Tuesday	<input type="text"/>
Wednesday	<input type="text"/>
Thursday	<input type="text"/>
Friday	<input type="text"/>
Saturday	<input type="text"/>

Chemistry/Entrepreneur Workshop Information:

- 1 workshop - 120 minutes virtually or in-person (max of 30 youth)
- If the workshop is in person the location is still to be determined
- Criteria: Grades 6 - 12

* Preferred Day/Time of the Week:

	Time
Monday	<input type="text"/>
Tuesday	<input type="text"/>
Wednesday	<input type="text"/>
Thursday	<input type="text"/>
Friday	<input type="text"/>
Saturday	<input type="text"/>

Chemistry/Entrepreneur Workshop Information:

- 8 week workshop - 60 minutes virtually or in-person (max of 30 youth)
- If the workshop is in person the location is still to be determined
- Criteria: Grades 6 - 12

* Preferred Day/Time of the Week:

	Time
Monday	<input type="text"/>
Tuesday	<input type="text"/>
Wednesday	<input type="text"/>
Thursday	<input type="text"/>
Friday	<input type="text"/>
Saturday	<input type="text"/>

* **Is the Parent/Guardian willing to sign a DWIHN release form?**

Yes

No

* **Is the Parent/Guardian willing to sign a DWIHN Media Consent Form?**

Yes

No

If you have any questions / concerns please contact
Director Cassandra Phipps at 313-300-1278 or
cphipps@dwihs.org

Done

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See how easy it is to [create a survey](#).

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Detroit Wayne Integrated Health Network CRSP Notification Form

Date of notification: _____ Member's MHWIN #: _____

Contact Information of individual completing this form

Organization's Name: _____

Individual's Name: _____

Telephone Number: _____

Email Address: _____

CRSP Provider: _____

I am forwarding this notification to advise DWIHN that the above Clinically Responsible Service Provider (CRSP) failed to provide the following documentation:

- Current/Valid IPOS (signed by legally responsible individual)
- Evidence of in-service training on IPOS
- Evidence of in-service training on Crisis Plan
- Evidence of in-service training on the Behavior Treatment Plan

This notification is to be emailed to DWIHN's QI Performance Monitoring Administrator, Starlit Smith at: ssmith@dwihn.org

This form is limited to the documents listed above. If more is needed Starlit Smith may be contacted by email at ssmith@dwihn.org or by phone at 313-320-3719

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DWIHN Treatment Plan Training Procedures

Purpose

To ensure the appropriate training has been provided to staff who will be responsible for implementing the supports and services identified in the plan. This includes training on a member's Individual Plan of Service (IPOS), Wraparound Plan of Care (POC), crisis plan, behavior treatment plan (BTP), or other clinical treatment plan as authorized in the member's IPOS.

Expected Outcome

Staff providing supports and services will be trained and proficient in implementing the goals and objectives in the plan.

Process

- A. When a new document (IPOS, POC; Crisis Plan; Behavior Treatment Plan or other clinical document) is developed, all staff who work directly with the member are to be trained on the specific, individual components of the plan, prior to providing the service.
- B. When a document Amendment is completed to add or change services, all staff who work directly on the amended treatment services, goals or objectives are to be trained on the specific, individual components of the service. All staff must be trained prior to documenting their first service to the individual under the amended change
- C. The trainings will be provided by the or author of the plan and by each specialized professional within their scope of practice. If determined to be able to safely and accurately communicate the learned information, those in attendance can be considered qualified to train other staff, i.e., Train-the-Trainer
- D. The required documentation is DWIHN's Treatment Plan Training Log. This form captures critical information needed to meet all MDHHS and DWIHN requirements. All documentation must be legible.
 - a. Each dated training session will be documented on separate training forms. Reminder: ongoing training sessions cannot be added to the form as a running list. When new staff are trained on a separate date you must have a separate form.
 - b. All signatures must be dated and accompanied by a legible printed name.
 - c. Once all staff have been trained the form is to be uploaded into the member's medical record in MHWIN, under Scanned and Uploaded documents, titled "DWIHN Training Log_DATE"
 - d. All training documents must be maintained in the member's record.
 - i. Regarding Train the Trainer: Any staff that receives training from the plan author or clinical specialist and then trains others, must retain a copy of the initial training they received in the member's record. The documentation trail needs to reflect the initial and subsequent trainings, that would be expected (as documented evidence) at the time of a site review.
- E. Exceptions:
 - a. In emergent situations, when staff not trained on the members' plan must work with the individual to ensure their health and safety, training on the IPOS will take place within 24 hours of the initial shift.
 - b. DWIHN does not require additional training for medication administration as that is a standard training in the direct care toolbox and approved by MDHHS. The CMHSP policies for training of direct care staff to provide medication services should outline the requirement for initial and annual medication checks with an RN to assure proficiency

DWIHN Treatment Plan Training Procedures

- F. Trainings may take place virtually to meet the needs of the member and their staff. When done virtually:
 - a. the trainings must take place via a secure platform;
 - b. the staff receiving the training must have access to a copy of the document they are being trained on;
 - c. The trainer must verify those in attendance and complete the training log, to include:
 - i. Member's name and MHWIN#
 - ii. Date of the training
 - iii. Type of document/assessment being presented
 - iv. Date of document/assessment being presented
 - v. Names of all participants clearly documented
 - vi. Name/title of the trainer clearly documented
 - d. The trainer will ensure that the training log is uploaded into MHWIN, as noted in 4 above.
- G. Roles and Responsibilities
 - a. Training shall be provided by; the primary case holder / clinically responsible service provider or other qualified staff that are responsible for monitoring the IPOS and are not providers of any other service to that individual and by each specialized professional within the scope of their practice, as appropriate.
 - b. Any change in goals, objectives, interventions, significant behaviors or events shall be updated in the appropriate planning document and a new training must occur in regard to supports and services.

Related Policies

Person-Centered Planning / Individual Plan of Service

Telemedicine Policy

Quality Assurance/Improvement

Compliance with All Applicable Laws

Legal Authority



DWIHN Treatment Plan Training Log

This form is to serve as a Training Record. It is essential that this form be completed each time a plan is developed or revised and retained in the member's record.

Member Name: _____
 Today's Date: _____

MHWIN # _____
 Today's Location: _____

Check if virtual training:

Training Category:

- IPOS/POC
- Plan Amendment
- ABA Applied Behavioral Analysis (Autism Benefit)
- Behavior Treatment/Support Plan
- Other: _____
- Physical Therapy Plan
- Speech Therapy Plan
- Supported Employment Plan
- Occupational Therapy Plan
- Vocational Plan

Date of Document selected above: _____

Staff being Trained

Print Name	Sign Name	Title	Date

Staff providing Training

Print Name	Sign Name	Title	Date

New Hire Recipient Rights Training

- ❑ Trainings are currently open for Registration in MHWIN 2 months in advance.
- ❑ There are 9 to 11 trainings held each month.
- ❑ **Staff Record**-Ensure the record is completely filled in, especially the provider name and location as well as the date of hire and the email address.
- ❑ The email address in the staff record should be that of the participant. This will ensure that they receive the correct training documents.
- ❑ Participants must be present online, with working cameras, and remain visible and available to communicate with us throughout the course.
- ❑ If your staff are seen driving during the training, laying down/asleep, OR **OBSERVED OTHERWISE NOT ENGAGED DURING THE TRAINING**, they will be removed from the training. If the camera is facing the ceiling, the floor or otherwise NOT on the training participant, the participant will be removed from the training and will have to reschedule. NHRRT is considered a "face-to-face" training, in a virtual format.
- ❑ For the month of May, 475 **participants were registered**, with 267 **completing** and 208 **No Shows**. Providers please assist us in decreasing the No Show rate by supporting and communicating with your staff to complete the training.

New Hire Recipient Rights Training

- ❑ **Course Completion**-Staff must participate in the virtual- live training using the Zoom app AND pass the quiz with a score of **80%** or greater. NHRRT documents, including the quiz, are *different for* each training, so any attempts by Participants to submit documents from a previous training will not be accepted. The deadline to return the quiz is **3pm** the day of the class. Incomplete or late exams will not be accepted.
- ❑ Review the DWIHN website and/or the MHWIN newsflash for updates regarding NHRRT.
- ❑ **Evening NHRRT class** is offered once per month from 4pm-6pm, return of the completed quiz is due by **9pm**, the day of the class. Please check MHWIN for available training dates.
- ❑ Please contact ORR Trainers ASAP to remove a registered participant once you become aware that they are unable to attend NHRRT, to ensure scheduling availability.
- ❑ **To Maintain Compliance**- Register your staff for NHRRT training during the onboarding process.
- ❑ If Providers have difficulty registering staff for NHRRT, PowerPoint Instructions are available via our email orr.training@dwihn.org.
- ❑ To unregister a participant, assistance with certificate verification or for any questions regarding training, please email us at orr.training@dwihn.org.
- ❑ ORR Trainers remain available at orr.training@dwihn.org to partner with Providers and ensure compliance with regulatory standards and DWIHN policies related to ORR Training requirements.

Provider Meeting

Presenter: Edward Sims, ORR RRI-Monitoring

Friday, June 24, 2022

ORR Annual Site Review Process:

- ORR Monitoring began conducting “in person” site review visits in May 1st 2022-Covid questionnaire responses will determine if an *alternative to in person* SRs will be conducted
- The ORR Reviewer will contact the Vendor to schedule a convenient date/time to conduct the site review visit. Please respond promptly to ORR’s request
- ORR Reviewer *may* request photos and other documents to be submitted, prior to the review date-postings, MMHC, policies
- Training request - Provide information for any new staff hired since the last site review visit, that are currently working at the facility-name, date of hire, date of NHRRT, possibly date of ARRT update
- Are there any *additional sites* owned by Provider, other than the one that’s being reviewed?
- Copies of the final SR documents will be sent out to Providers via email & USPS
- Please assure the ORR Reviewer is provided with a valid email address for Provider/Site Rep.
- If you would like a copy of the list of items to be reviewed during the SR, email me at esims1@dwihn.org to receive a copy of the list

Questions/What the ORR Reviewer will look for during site review:

- Where certain documents are located in the facility-posters, Rights booklet, MMHC, Policies
- If any members have restrictions or limitations on use of the phone, mail, visiting hours-If yes, included in IPOS ONLY FOR RESIDENTIAL
- Do Members & Staff know how to file a complaint?
- Where confidential information is stored-Is it locked/password-protected, i.e., medication, cleaning products, member charts
- Are there any health or safety violations observed by the Reviewer? Interior-exterior of the home-trip hazards, loose railings, broken steps, unlocked meds etc.
- Are contraband items posted & visible? Weapons, drugs, alcohol etc.
- Were there any new staff hired since the last SR-if yes, require evidence for active staff only?
- If yes, did new staff attend NHRRT within 30 days of their hire date?

- Is the staff's NHRRT training older than 1 Year? If yes, provide evidence of their ARRT/update via DWC
- If a licensed AFC provide the expiration date of license

Corrective Action Plan-If applicable, Vendors have **ten** business days to submit the CAP response:

- a. NHRRT face-to-face required within 30-days of hire-MMHC mandate- If no, **Non-compliant** for that FY
- b. Annual RR Training via Detroit Wayne Connect-due every year after NHRRT is attended
- c. Staff Record-contact information should be kept current
- d. Environmental walk-through conducted in person-Reviewer observes interior & exterior of facility for violations
- e. Repeat non-compliance-for violations 2 concurrent FY's, notification sent to Contract Manager for that facility
- f. Provider/Vendor contact information should be kept current
- g. Vendor will receive copies of site review documents via email & USPS
- h. ORR requires the Site Rep's/Vendor's signature on page #4 of the site review tool
- i. Questions? Q & A

Contact Info-ORR Monitoring:

Edward Sims, ORR RRI-esims1@dwihn.org, or 313-433-2845-work cell

Schakerra Pride, ORR Manager-spride@dwihn.org, or 313 498-4769-work cell