



Lapeer County Community Mental Health  
 Network Providers Monitoring FY2024  
 Network Providers End-Of-Year Report

Purpose	To monitor LCCMH network providers’ compliance to the FY24 contract. Providers are monitored on six domains: Contract Compliance, Recipient Rights, Corporate Compliance, Clinical Assessment, Finance 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	10/1/2023-09/30/2024
Network Provider Monitoring Team	Brooke Sankiewicz, LMSW, CADC – Chief Executive Officer Regina MacDonald, MS – Contract Manager Tara Reed – Contract Manager Lisa Jolly, BS – Recipient Rights Officer Stephanie Rudow, LMSW, CAADC, CS – Clinical Supervisor/Credentialing & Privileging Committee Chair Emma McQuillan, MBA – Chief Financial Officer Lisa Ruddy, MPH, CHES, CHC – Quality and Compliance Supervisor Jacklyn Shillinger, BA – Quality Improvement Coordinator Kelly North, MBA – Recipient Rights Advisor
Standards	Contract Compliance – 95% Recipient Rights – 95% Corporate Compliance – 100% Clinical Assessment – 95% Finance / Data Compliance – 95% Training Compliance – 100%

<b>Provider</b>	<b>Contract Compliance (Standard 95%)</b>	<b>Recipient Rights (Standard 95%)</b>	<b>Corporate Compliance (Standard 100%)</b>	<b>Clinical Assessment (Standard 95%)</b>	<b>Finance/Data Compliance (Standard 95%)</b>	<b>Training Compliance (Standard 100%)</b>	<b>Overall Score</b>
Alternative Services, Inc. – Lake Nepessing	100%	100%	100%	100%	100%	94%	99%
Alternative Services, Inc. – Lippincott	100%	100%	100%	100%	100%	100%	100%
Alternative Services, Inc. – Woodlawn	100%	100%	100%	100%	100%	100%	100%
Beacon Specialized Living – Lapeer	100%	80%	100%	100%	100%	94%	96%
Beacon Specialized Living - Southfield	100%	100%	100%	100%	100%	94%	99%
Beacon Specialized Living – Wave Crest	100%	100%	100%	100%	100%	92%	99%
Burnett AFC	100%	100%	100%	100%	100%	100%	100%
Center for the Arts / Gallery 194	100%	100%	100%	100%	100%	100%	100%
Central State Community Services – Oregon	100%	100%	100%	100%	100%	100%	100%
Central State Community Services – Vassar	100%	80%	100%	100%	100%	95%	96%
Churchill Farms	88%	100%	100%	100%	100%	100%	98%
Contract Management Associates, Inc.	100%	100%	100%	100%	100%	100%	100%
Cornerstone AFC	100%	100%	100%	100%	100%	100%	100%
Cynthia McNeil	100%	100%	100%	100%	100%	100%	100%
Diane Vaughan	100%	100%	100%	100%	100%	100%	100%

<b>Provider</b>	<b>Contract Compliance (Standard 95%)</b>	<b>Recipient Rights (Standard 95%)</b>	<b>Corporate Compliance (Standard 100%)</b>	<b>Clinical Assessment (Standard 95%)</b>	<b>Finance/Data Compliance (Standard 95%)</b>	<b>Training Compliance (Standard 100%)</b>	<b>Overall Score</b>
Family Literacy Center	100%	100%	100%	100%	100%	100%	100%
Family Services Agency of Mid-Michigan	100%	100%	100%	100%	100%	100%	100%
Flatrock – Brandon	100%	100%	100%	100%	100%	100%	100%
Flatrock - Brookwood	100%	100%	100%	100%	100%	100%	100%
Flatrock – Burton	100%	100%	100%	100%	100%	100%	100%
Flatrock – Flint Township	100%	100%	100%	100%	100%	100%	100%
Flatrock – Flushing	100%	100%	100%	100%	100%	100%	100%
Flatrock – Goodrich	100%	100%	100%	100%	100%	100%	100%
Flatrock – Lapeer North	100%	100%	100%	100%	100%	100%	100%
Fowler Center	100%	100%	100%	100%	100%	82%	97%
Genoa Pharmacy	100%	N/A	N/A	N/A	N/A	N/A	100%
Golden Arrow Drop-In Center	100%	N/A	N/A	N/A	N/A	N/A	100%
Greater Lapeer Transportation Authority	100%	100%	N/A	52%	100%	100%	75%
Guardian Angel Services, 4U, Inc.	100%	100%	100%	100%	100%	100%	100%
Hamilton Community Health Center	100%	N/A	N/A	N/A	N/A	N/A	100%
Helping Hand Nursing Services	100%	100%	100%	100%	100%	100%	100%
Hope Network – Westwood	100%	100%	100%	100%	100%	98%	99%
Jacqueline Raymond	100%	100%	100%	N/A	100%	100%	100%
Journey Therapy Center	86%	100%	100%	100%	100%	62%	91%
Lapeer Teamwork – CLS/Respite	88%	100%	33%	100%	100%	89%	85%

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Lapeer Teamwork – Skill Building / Supported Employment	88%	100%	100%	100%	100%	92%	97%
Life Skills Centers, Inc.	100%	100%	100%	100%	100%	100%	100%
Lighthouse Neurological Rehabilitation Center	100%	100%	100%	100%	100%	98%	99.7%
Mathews AFC	100%	100%	100%	100%	100%	100%	100%
McLaren Lapeer Region	57%	100%	100%	94%	100%	97%	91%
Michigan Community Services, Inc. – CLS	100%	100%	33%	100%	100%	100%	89%
Michigan Community Services, Inc. – Park St.	100%	80%	100%	100%	100%	100%	97%
ResCare – Briggs	100%	80%	100%	100%	100%	100%	97%
ResCare – Burnside	100%	100%	100%	100%	100%	100%	100%
ResCare – Davis Lake	100%	80%	100%	100%	100%	100%	97%
Rescare – Clinton	100%	100%	100%	100%	100%	98%	99.7%
ResCare – Farnsworth	100%	100%	100%	100%	100%	100%	100%
ResCare – Frances	100%	100%	100%	100%	100%	100%	100%
Rescare – Holly House	100%	100%	100%	100%	100%	95%	99%
ResCare – Reamer	100%	100%	100%	100%	100%	98%	99.7%
ResCare – Silverwood	100%	100%	100%	100%	100%	100%	100%
Resident Advancement, Inc. – Burleigh	100%	100%	100%	100%	100%	94%	99%
Resident Advancement, Inc. – Hampshire	100%	80%	100%	100%	100%	60%	90%
Resident Advancement, Inc. – North Branch	100%	100%	100%	100%	100%	100%	100%
Stuart T. Wilson	100%	100%	100%	100%	100%	100%	100%

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Victoria's Assisted Living FKA Caremore of Metamora	100%	80%	100%	100%	100%	100%	97%

### Summary of Findings

LCCMH had a total of 183 contracts in FY24. During the provider monitoring process, only those contracts that have direct interaction with persons served are reviewed. A total of 56 providers were reviewed. The overall compliance for all domains and providers was 98%, which remained the same from last fiscal year (98%). Overall compliance rates for each domain were as follows:

- Contract Compliance: 98%
- Recipient Rights: 97%
- Corporate Compliance: 96%
- Clinical Assessment: 99%
- Finance/Data Compliance: 100%
- Training Compliance: 97%

Twenty-four providers (43%) required a Corrective Action Plan (CAP) due to one or more areas in non-compliance. This is a decrease from FY23 (47% of providers had a CAP). 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

- The IPOS in-service form was updated in FY24. A recommendation is to continue to train LCCMH staff and the network providers on how to accurately complete and use the form. This is the biggest training issue with the majority of providers.
- In FY23, LCCMH began conducting onsite training reviews when possible. LCCMH should continue to try to conduct most training reviews on-site to address issues immediately, provide support, and build rapport with providers.

- Continue quarterly network provider meetings to share information and explain requirements.
- Work closely with providers who continue to be non-compliant over multiple years in the same area.
- At the quarterly network provider meetings, continue to give reminders about ensuring staff is completing medication training within 90 days of hire if they pass medications.
- Continue to give reminders about having staff complete IPOS in services forms within 30 days of hire.
- Review and address issues at the time of the occurrence with providers. Track occurrences, dates, and times.

JS 5/29/24