



## **Detroit Wayne Integrated Health Network**

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

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

### **Residential Provider Meeting**

**Friday, June 24, 2022**

**Virtual Meeting**

**11:30 am –12:30 pm**

**Agenda**

**Zoom Link: <https://dwihn-org.zoom.us/j/92653624476>**

- I. Welcome/Introductions
- II. Claims- Kyra Houston
  - Error Messages
  - Admission Record
  - Disability Designation
- III. Credentialing- Ricarda Pope-King
  - Credentialing Process
- IV. Quality- Dayna Stevens & Starlit Smith
  - Training on the IPOS (pages 2-5)
- V. Recipient Rights
  - Recipient Rights Training (Mike Olver, ORR Trainer) (pages 6-7)
  - Recipient Rights Monitoring (Ed Sims, ORR Monitor) (pages 8-9)
- VI. Managed Care Operations- Sharon Matthews
  - Contracting/Credentialing
- VII. Administrative Updates – Eric Doeh, President and CEO
- VIII. Questions
- IX. Adjourn

#### **Board of Directors**

Angelo Glenn, Chairperson  
Dorothy Burrell  
Jonathan C. Kinloch

Kenya Ruth, Vice Chairperson  
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Kevin McNamara

Dora Brown, Treasurer  
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Michelle Jawad  
William Phillips

**Eric W. Doeh, President and CEO**





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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](mailto: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](mailto: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: \_\_\_\_\_

MHWIN # \_\_\_\_\_

Today's Date: \_\_\_\_\_

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](mailto: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](mailto:orr.training@dwihn.org).
- ❑ ORR Trainers remain available at [orr.training@dwihn.org](mailto: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 1<sup>st</sup> 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](mailto: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](mailto:esims1@dwihn.org), or 313-433-2845-work cell

Schakerra Pride, ORR Manager-[spride@dwihn.org](mailto:spride@dwihn.org), or 313 498-4769-work cell