

SOCIALLY NECESSARY SERVICES TOOL Chafee Youth Transitioning Program: Transitional Living Placement- Pre-placement Activities

(500)

Provider:	Provider's Consumer ID:	
Consumer FACTS #:	Consumer Medicaid #:	
Review Date:	Reviewer Name:	
Consumer Name:		

Purpose: The Review Tool is a part of an integrative review process that evaluates/assesses technical compliance and the administrative application of Socially Necessary Services (SNS) by contracted providers. The Review Tool is a resource utilized to further enhance the collaborative efforts of the Bureau for Children and Families (BCF), APS Healthcare, and the SNS provider community in the delivery of quality services. The Review Process is applicable to **all** SNS providers and all BCF case types.

1.	 For the period under review does the service meet Admission Criteria? Youth completed Ansell-Casey within 30 days of placement? Did service begin 30 days before placement occurred? 	3	0		
2.	 For the period under review does the service being provided meet the service definition? Service plan must indicate purpose and dictate exact behaviors/ objectives/goals to be monitored via face-to-face and/ or phone calls 	3	0		
3.	Is there a copy of the referral for this service in the record?	1	0		
4.	 During the period under review does the documentation support service inclusions are being met? Assistance with housing, employment, education and economical needs Support, monitoring, on-going case work, adult life skills, crisis response, transportation contact/ visits, medical/ behavioral health/ community resource linkage 	6	1	0	
5.	During period under review is the service provided appropriate to meet identified needs based on the Ansell-Casey?	1	0		
6.	During the period under review is there sufficient documentation to support the frequency/intensity/ duration of services?	6	3	0	
7.	During the period under review is there documentation of efforts to link the consumer(s) to natural supports and/ or other community resources for newly impending unmet needs? • (financial aid counseling, tutoring, computer skill sets, driving lessons, medical assistance, tuition waivers)?	3	0		
8.	During the period under review, is there ongoing documentation that supports the youth are achieving original service plan goals (independence: skill sets, education, employment, housing, self preservation skills, keeping appointments)	6	0		

9.	During the period under review are all records/ monthly summaries of the services	6	3	1	0
	kept and signed by appropriately licensed/credentialed staff?				
	 identified needs/ services to address impending/unmet needs 				
	 how service is reducing/enhancing deficits in behaviors/conditions 				
	 examples of barriers and/or progression towards goals 				
	level of youth's participation				
	 monthly summaries completed and transmitted to appropriate 				
	DHHR worker by the 10 th of the following month				
	 copy of youth's 40 hours of planned weekly activity 				
	copy of youth's monthly budget submitted				