



**SOCIALLY NECESSARY SERVICES TOOL**  
**Adult Life Skills**  
**(310)**

<b>Provider:</b>		<b>Provider's Consumer ID:</b>	
<b>Consumer FACTS #:</b>		<b>Consumer Medicaid #:</b>	
<b>Review Date:</b>		<b>Reviewer Name:</b>	
<b>Consumer Name:</b>			

**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), KEPRO, 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? <b>(NOTE: If this question is scored zero all remaining questions are scored zero)</b>	3	0		
2.	For the period under review does the service being provided meet the criteria of the services guideline definition? <b>(NOTE: If this question is scored zero all remaining questions are scored zero)</b>	3	1.5	0	
3.	Is there a copy of the referral for services in the record?	3	0		
4.	During the period under review are records of the service kept? <b>(NOTE: If this question is scored zero all remaining questions are scored zero)</b>	1	0		
5.	For the period under review is there a completed copy of the SAMS Family Functioning Assessment and/or service plan and/or safety service or Behavioral Control Plan in the case record? If the answer is "no" is there documentation of at least three attempts to obtain this information? <b>(NOTE: If this question scores zero then question 6 is also scored zero)</b>	3	1.5	0	
6.	During the period under review are the services being provided consistent with the most recent referral/Safety Plan/Treatment Plan/Youth Behavior Control Plan/Service Plan?	6	0		
7.	During the period under review is the documentation of each service provided specific to the consumer receiving the service?	3	1	0	
8.	Was the client present (face-to-face) for the intervention?	3	2	1	0
9.	During the period under review is there documentation the consumer was informed of what goals/objectives must be achieved to be discharged from the service?	3	0		
10.	During the period under review are all documents signed by appropriately licensed/credentialed staff?	3	0		
11.	During the period under review does the documentation support the duration and frequency of the service provided?	3	2	1	0
12.	During the period under review does a comprehensive review of the circumstances for the referral substantiate continuation of the service?	3	0		
13.	During the period under review is the consumer's response to the intervention clearly documented?	3	2	1	0
14.	During the period under review is there documentation of efforts to link the consumer(s) to natural supports or other community resources?	3	0		

<b>15.</b>	During the period under review were the basic home management skills and/or social/emotional support networks to be developed clearly identified?	6	4	2	0
<b>16.</b>	During the period under review is there evidence that the service improved the parent's capacity for solving problems and resolving conflicts?	6	4	2	0
<b>17.</b>	During the period under review does the documentation substantiate that there was a lack of skill knowledge not due to a mental health condition?	3	1.5	0	
<b>18.</b>	During the period under review is there ongoing documentation assessing the need for additional services (not identified in the initial referral) not currently being provided?	3	1.5	0	
<b>19.</b>	During period under review is the service provided appropriate to meet the identified need?	3	1.5	0	
<b>20.</b>	During the period under review , do all monthly summaries include the following: <ul style="list-style-type: none"> <li>• identified need</li> <li>• service to address the need</li> <li>• how service is eliminating/reducing/controlling behaviors or conditions requiring intervention</li> <li>• barriers and/or progress towards goal achievement</li> <li>• unmet needs</li> <li>• level of participation as it relates to individual consumers</li> <li>• is there documentation that monthly summaries were completed and transmitted to the appropriate DHHR worker by the 10<sup>th</sup> of the following month?</li> </ul>	3	2	1	0