



**SOCIALLY NECESSARY SERVICES TOOL**  
**Individualized Parenting**  
**(300)**

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), 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:</b> If zero, then all questions are scored zero)	3	0		
2.	For the period under review, does the service being provided meet the criteria of the services guideline definition? <b>(NOTE:</b> If zero, then all questions are scored zero) <ul style="list-style-type: none"><li>During the period under review is there documentation of the consumer's improvement or lack thereof in one or all of the following areas: knowledge and competence in discipline, appropriate supervision, encouragement of child/adolescent care, age-appropriate development and realistic expectation and standards of child/adolescent behavior?</li><li>During the period under review was an evidence-based curriculum used to provide the service?</li></ul>	3	0		
3.	Is there a copy of the referral for services in the record?	1	0		
4.	During the period under review, are records of the service kept? <b>(NOTE:</b> If zero, then all questions are scored zero)	1	0		
5.	For the period under review is there a completed copy of is there a copy of the SAMS Family Functioning Assessment and and/or service plan and/or safety service plan or Behavioral Control Plan in the record? If the answer is "no", is there documentation of at least three attempts to obtain this information? <b>(NOTE:</b> If no, then question 6 also scores zero)	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?	6	4	2	0
8.	During the period under review was the service provided in a one-on-one setting (i.e. one provider to one family)?	3	2	1	0
9.	During the period under review is there documentation the consumer was physically present for the service?	3	2	1	0
10.	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		

<b>11.</b>	During the period under review are all documents signed by appropriately licensed/credentialed staff?	3	0		
<b>12.</b>	During the period under review does the documentation support the duration and frequency of the service provided?	3	2	1	0
<b>13.</b>	During the period under review is the consumer's response to the intervention clearly documented?	3	2	1	0
<b>14.</b>	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 is there documentation substantiating one of the following deficits is present in current parenting practices: inappropriate expectation of the child/adolescent, inability to be empathetic/aware of child/adolescents needs, difficulty assuming the parental role, and/or lack of knowledge in feeding, bathing, basic medical care and basic supervision?	3	2	1	0
<b>16.</b>	During the period under review is there ongoing documentation assessing the need for additional services not currently being provided (e.g. services not identified at initial referral)?	3	1.5	0	
<b>17.</b>	During period under review is the service provided appropriate to meet the identified need?	3	1.5	0	
<b>18.</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