

SOCIALLY NECESSARY SERVICES TOOL
Healthy Families America
(810)

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 Social Services (BSS), Acentra Health, and the SNS provider community in the delivery of quality services. The *Review Process* is applicable to **all** SNS providers and all BSS case types.

1.	During the period under review, are records of the service kept? (If no documentation is present, but invoices exist, chart is scored "0").	1	0		
2.	For the period under review does the service meet Admission Criteria? <ul style="list-style-type: none"> Was the service referred by case worker within the Bureau for Social Services or staff contracted to act in the caseworker role? Is there a copy of the referral for services in the record? Does the consumer referred meet the criteria for the service? Is the family engaged in an active Child Protective Services case? Is there a copy of the WV BSS Prevention or Case Plan in the chart record? 	3	1.5	0	
3.	For the period under review, does the service being provided meet the criteria of the services guideline definition? <ul style="list-style-type: none"> Is there documentation of in-person home visits to the family? Is there documentation of standardized screening and assessment (i.e., <i>The Family Resilience and Opportunities for Growth</i>)? Is there documentation that provider offered services intensely and over the long-term, with well-defined criteria and a process for increasing or decreasing frequency of service. Is there documentation of linkage to a medical provider to ensure optimal health and development and other services to meet their assessed needs. Is there documentation of linkage to community resource networks? (3, 1.5, 0) 	3	1.5	0	
4.	During the period under review, is the documentation of each service provided specific to the parenting deficits/issues identified in the client's assessment and service planning? (Noted exception for court ordered services that exceed identified goals and objectives identified in service plan.)	6	4	2	0
5.	During the period under review, is there documentation that the client(s) was physically present for the service?	3	2	1	0
6.	During the period under review, is there documentation indicating that the client was informed of what goals/objectives must be achieved to be discharged from the service?	6	3		0
7.	During the period under review, are all documents signed by the appropriate licensed/credentialed staff? <ul style="list-style-type: none"> Signature and Credential of staff providing service Signature and Credential of Licensed Professional responsible for supervision. 	3	1.5		0

8.	<p>During the period under review, does the documentation support the duration and frequency of the service provided?</p> <ul style="list-style-type: none"> • Duration of service event to units invoiced. • Did the parenting intervention occur in a setting/time/environment conducive to facilitating learning and discussion? • Duration of services/authorization periods related to client progress/barriers to goal achievement. 	3	2	1	0
9.	<p>During the period under review, do all monthly summaries include the following: This needs to be inclusive of new information that is in the revised monthly summary.</p> <ul style="list-style-type: none"> • Circumstances of referral/identified need • Service(s) to address the need • how service is addressing identified deficits, behaviors or conditions requiring intervention • barriers and/or progress toward goal achievement • unmet needs • level of participation as it relates to individual clients • is there documentation that monthly summaries were completed and transmitted to the appropriate BSS worker by the 10th of the following month? 	6	4	2	0

