

## *DCF Credentialed Provider Review Tool*

*Therapeutic Support Services, Support Services,  
Supervised Visits, Temporary Care & CHAP –*

ELEMENTS	YES	NO	N/A	PROGRAM REVIEW COMMENTS	INFORMATION- LOCATION & CLARIFICATIONS
<b>A. POLICY AND PROCEDURES – Administration</b>					
1. The provider’s policy and procedure manual has language that includes the following: The provider safeguards the use, publication, and disclosure of information on all clients who receive service under this agreement in accordance with all applicable federal and state laws regarding confidentiality and HIPAA. This includes but is not limited to names or photo images of children that are committed to the Department.					Policy and Procedure Manual
2. Has the provider reported all changes in status (regarding credentialing requirements), to the Department’s contracting Agent, (Advanced Behavioral Health) within 30 days of its occurrence					Policy and Procedure Manual
3. Does the provider offer services outside of normal business hours?					Policy and Procedure Manual
4. Does the provider ensure that staff maintain proper supervision, oversight and management to assure the child’s safety and well-being?					Policy and Procedure Manual
5. Does the provider have written policy & procedures for managing and reporting emergencies and urgent circumstances that may arise while providing services to ensure the safety and security of the child or youth and other parties involved?					Policy and Procedure Manual
6. Does the provider have written policy/procedures to respond to and address potential unsafe child behaviors? (e.g., running away, physical aggression, self-harm, etc.)					Policy and Procedure Manual
7. Does the provider have written policy & procedures prohibiting the use of physical restraint?					Policy and Procedure Manual
8. Does the provider refrain from using the DCF logo and/or affiliation in any advertisement for their agency and also abstain from using state resources to market the service and/or program it offers (i.e. DCF employee’s e-mailing list)?					<i>Review of marketing materials Contact AO via Grants &amp; Contracts Specialist</i>

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<b>B. BILLING</b>					
9. <b>TSS, SS &amp; SV only:</b> Does the billing regarding staff supervision activities indicate a charge for the supervisor’s time only, not both the supervisor and staff person?					<i>CHAP/CHEER: Supervision costs are included in the rate &amp; not billable separately.</i>
10. Does the provider submit invoices directly to the assigned DCF Area Office designee for payment processing no later than the 10th of each month?					
11. Is the provider abiding by the service “rate” that the Department has established for each service? Hourly rate- includes transportation –the first 20 miles one way (40 miles R/T) TSS: \$40; SS: \$35; TC: \$26; SV: \$45					Client records/invoices/billing/fiscal reports ( <i>invoice and fiscal review will be conducted prior to the site visit</i> )
12. Is the provider in compliance with the “CT False Claims Act” – Connecticut General Statutes Chapter 55e- Section §4-274 through §4-289? <i>See comments for definition</i>					<i>DEFINITION: The C.G.S section §4-275 False claims and other prohibit acts regarding state-administered health or human services program refers to individuals who present a false or fraudulent claim for payment or approval (e.g. double billing; billing for services not being provided; billing for excessive or unnecessary services, etc.).</i>
<b>II. STAFF TRAINING &amp; SUPERVISION</b>					
13. Is there evidence that all agency employees providing services have reviewed the <i>Guide to the Code of Ethics or Best Practices Guidelines</i> and have a signed agreement statement in their file?					Staff Records
14. Does each employee providing services have a copy of a signed <i>DCF Confidentiality Statement in their staff record?</i>					Staff Records
15. Is there evidence that staff have been trained in handling emergencies?					Staff Records
16. Does the provider maintain written documentation confirming that each employee providing services has and maintains the necessary credentials to provide the service?					Staff Records
17. Is there evidence that all agency employees have received mandated reporter training by a certified trainer, or the DCF online training program?					Staff Records The agency must include mandated reporter training as one of the required trainings for newly hired employees.
18. Does the provider have records of orientation and in-service training for all staff providing services to children? Does the training include: <ul style="list-style-type: none"> <li>• Program philosophy</li> <li>• Policies</li> <li>• Practices</li> </ul>					Staff Records The agency must also keep their in-service training logs up to date.

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<ul style="list-style-type: none"> <li>• Procedures</li> <li>• HIPAA</li> <li>• Confidentiality</li> <li>• Learning Inventory Scale Training (LIST) *Required for <b>CHAP staff</b></li> </ul>					
19. Does the provider assess the training needs of staff?					Staff records and/or p/p manual,
20. Do staff receive additional training related to their positions and responsibilities in ways that promote positive development? <i>(Note: training topics may include: Ohio Scales, working with children and youth who have experienced trauma, cultural competency, and child and adolescent development.)</i>					Staff Records
21. Are all staff that provide services receiving at least 15 minutes of face to face individual supervision per month (per case)? <i>(Example: a staff member who carries 5 cases would receive 1.25 hours of supervision each month)</i> <b>CHAP: At least 0.5 hour per week</b>					Staff Records Skype is allowed, telephone supervision is forbidden.
22. Is there written documentation of supervisory notes including feedback for staff regarding their performance?					Staff Records
23. Do the supervisor's qualifications in this program the same as the qualifications required and stated in the provider agreement?					Staff Records <b>TSS &amp; SS:</b> supervisors must have a master's degree and a background in working with children. <b>SV:</b> Supervisor must have a clinical license. <b>CHAP:</b> Bachelor's Degree in Human Services + one year of experience
<b>III. SERVICE SPECIFIC</b>					
24. Regarding <u>emergency</u> situations, is there documentation indicating that notification was made to the Department's Area Office staff during business hours and the Careline after hours?					Child/Family Record
25. Is there an appropriate protocol for handling emergencies? <b>CHAP/CHEER:</b> Protocol must include youth emergency and crisis assistance 24/7					
26. Is the same staff person providing the service throughout the course of the service? If not, was this change discussed and approved by the Area Office SW and documented in the client record?					Child/Family Record <b>Yes</b> , if the same staff provided the service. <b>Yes</b> , if there was a staff change & was approved by DCF. <b>No</b> if changes were not approved/documentated.
27. Does the provider maintains a caseload reasonable and does not exceed staff's ability					

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to provide the service? For CHAP/CHEER the Case Manager's caseload shall not exceed eight (8) youth at any one time.					
28. Are the services occurring in the community or other normative settings to promote engagement?					Child/Family Record
29. Does the service support and reinforce DCF treatment goals for the child?					Child/Family Record
30. Does the service include a variety of activities that promote learning and the development of social skills?					Child/Family Record
31. When child goals/objectives are changed, is there evidence that this was discussed and approved by the DCF Area Office?					Child/Family Record
32. Is there evidence of discharge planning in the case record, thirty days before the DCF authorization ends?					Child/Family Record
33. Does the provider have a copy of a signed, written approval from the Department WAF (Wrap Around Funds) or a <i>USE plan</i> with a date <u>prior</u> to the start of the service delivery, for all services? <i>CHAP/CHEER: DCF 2163A for additional hours</i>					Child/Family Record
34. Is there evidence that an initial contact with DCF occurred within five business days of receiving an approved referral for the purposes of developing an individualized service plan? <i>CHAP/CHEER: Initial contact with DCF within 2 weeks of referral to schedule a meeting to develop the Action/Discharge Plan.</i>					Child/Family Record
35. Are the number of hours per week provided to the assigned child is not in excess of the hours outlined in the PA and/or approved by DCF? a. TSS 8 hours per week for 6 months b. SS: 5 hours per week for 6 months c. TC: max of 45 hours or 90 days whichever comes first d. SV: max of 25 hours or 60 days whichever comes first e. CHAP: 5 hours per week -at least 3 hours face to face					Child/Family Record <i>Note: AO designee can approve additional hours and/or length of time for all services</i>
36. If the length of time of a service was extended, is there documentation for the need to continue the service and the reason why the goals were not met as planned?					Child/Family Record
37. <b>TSS only:</b> If the child is in congregate care with a plan to discharge, was the TSS service involved for a <u>maximum of two visits</u> , one hour each, while the child is living in a congregate care facility?					Child/Family Record Congregate care: TSS <u>only</u> for a child who is ready for discharge and the plan is to have TSS for this child in the community. In these cases,

IV. QUALITY ASSURANCE/IMPROVEMENT

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38. Does the provider have a quality assurance/improvement system to monitor and enhance its business practices, organizational structure, oversight and supervision, staff and system performance, and service delivery and provision?					Policy and Procedures / Quality Management procedures
39. If payments to the provider exceeded \$300,000.00 in a calendar or fiscal year, did the provider have an annual financial audit by an outside accountant?					Policy and Procedures / Quality Management procedures
40. Does the audit include management letters, audit recommendations, and is in a generally auditing format?					Policy and Procedures / Quality Management procedures
<b>V. DATA AND REPORTING</b>					
41. Did the provider submit a completed Individualized Service Plan to the DCF AO social worker or designee within <b>30 days (TSS, SS &amp; CHAP)</b> ; within <b>5 days (TC)</b> and within <b>one week (SV)</b> of the initial meeting?					Child/Family Record
42. Did the provider submit, at a minimum, monthly progress reports to the DCF social worker or designee by the 10 <sup>th</sup> day of the month following the month of service (or other interval dictated by the Department)?					Child/Family Record
43. Did the provider submit written discharge summary/report at the end of the service, whether planned or precipitous, within 30 days of the discharge date?					Child/Family Record
44. <b>SV only:</b> Did the provider submit within one week of the initial meeting, to the DCF social worker or designee, the completed guidelines for visitation that include expectations of attendance, behavior, language, acceptable participants and other factors that will support a successful supervised visitation?					Child/Family Record
45. <b>SV only:</b> Did the provider submit a written supervised visitation summary, to the DCF social worker, including: observation of the parent, parent-child interaction, safety considerations, and a summation of the interactional feedback provided to the parent identifying strengths and recommendations for improvement?					Child/Family Record
<u>Feedback/Comments for TSS, SS, SV services:</u>					

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<b><u>Additional Elements for CHAP/CHEER Services: # 46-60:</u></b>					
46. Does the Provider submit monthly program logs to the Program Development Oversight Coordinator (PDOC)?					<i>Contact AO via Grants &amp; Contracts Specialist</i>
47. Is there documentation of ongoing education and training to improve life skills on the Department Action/Discharge Plan/Individual Life Skills Progress Report for each youth?					
48. Is there evidence of Providers active participation in the Department Case Planning Conferences and Administrative Case Reviews for all youth?					
49. Is there evidence that a CHAP/CHEER Contract and Action/Discharge Plan for each youth has been developed and implemented?					
50. Is there evidence that the Provider has assisted in identifying, developing and supporting permanent family relationships?					
51. Is there evidence that the Provider has assisted in identifying, developing and supporting a network of community providers?					
52. Is there evidence that the Provider provided ongoing in-person contact and supportive & crisis intervention?					
53. Is there evidence that the Provider has assisted in developing a monthly budget and monitoring monthly expenditures?					
54. Is there evidence that the Provider has facilitated job shadowing opportunities, industry exposure and tours?					
55. Is there evidence that the Provider has assisted youth in career/job searches utilizing local Department of Labor (DOL) resources?					
56. Is there evidence that the Provider provided employment site visits, and employer recruitment in the career fields matched with the youth's skills and interest?					
57. Is there evidence that the Provider participation in an approved educational, vocational or career development program?					
58. Is there evidence that the Provider provided job coaching in the career fields matched with the youth's skills and interest?					

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59. Is there evidence that the Provider assisted youth in improving skills by arranging services such as; tutoring, resume writing, interview skill development, etc.?					
<p>60. Is there evidence that the Provider is meeting the listed RBA outcomes?</p> <p>a. Percentage of youth served who demonstrated improvement on the Learning Inventory of Skills Training (L.I.S.T.) measure of functioning between admission and discharge.</p> <p>b. Percentage of youth served that were successfully linked to community based services and/or pro-social supports.</p> <p>c. Percentage of youth who indicated an overall satisfaction rating at discharge based on Satisfaction Survey</p> <p>d. Percentage of youth at discharge who have obtained vocational certification or made positive progress toward or achieved post-secondary education diploma</p>					
<p><b><u>Provider Feedback:</u></b></p>					