

# Social Services Block Grant Provider Documentation

**Policy 14.03** 

Effective: August 15, 2023

#### Introduction

Agencies that contract with the Tennessee Department of Human Services through the Social Services Block Grant must submit documentation in support of program administration.

# Scope

The purpose of this policy is to provide uniform compliance parameters for staff and agencies regarding the documentation and forms necessary for the successful administration of the Social Services Block Grant program.

## **Policy**

### A. Abuse Reporting Log

State law requires any individual who has knowledge of or suspects the abuse, neglect, or exploitation (A/N/E) of a child or vulnerable adult to report their concerns immediately to the appropriate department. Agency staff who suspect current clients are suffering A/N/E must file an intake report with the Social Services Block Grant (SSBG) Coordinator who will enter the report into the case management system (CMS) and keep a log of all reports.

#### **B.** Incident Reports

Providers are required to report all critical incidents involving SSBG clients to the APS hotline and complete a written report within forty-eight (48) hours and submit it to <a href="mailto:SSBG.DHS@tn.gov">SSBG.DHS@tn.gov</a>.

In circumstances where the critical incident involves agency staff, providers must investigate the claim and submit a completed investigation report within thirty (30) days.

Generally, providers maintain the discretion to remove, suspend, and return their employees to service. However, in circumstances where agency staff are suspected of misconduct, TDHS SSBG may request the involved staff member be suspended from contact with SSBG clients until the licensing authority (if appropriate), the provider, and TDHS investigations are completed. TDHS must grant approval for the staff member to return.

## C. Client Surveys

Adult Day Service (ADS) providers must complete a customer satisfaction survey with each client upon each redetermination, entering the results into the portal. If the average of all responses is less than ninety percent (90%), a correction action plan will be required.

#### D. Corrective Action Plans

TDHS SSBG may require providers to submit a <u>HS-3460 SSBG Corrective Action Plan</u> in the following circumstances:

- In response to a periodic monitoring review completed by the TDHS Office of the Inspector General (OIG) in which findings occur,
- In response to a notice of deficiency from TDHS SSBG staff regarding contractual and/or policy requirements, or
- If the adult day service customer survey averages a satisfaction rate of less than ninety percent (90%).

# E. Annual Service Proposal

Refer to the Annual Service Proposal section in the 14.02 SSBG Fiscal Accountability policy.

## F. Annual Program Evaluation

TDHS SSBG believes continuous quality improvement (CQI) is a critical aspect of successful service provision. To that end, TDHS SSBG providers are required to complete the <a href="HS-3131 SSBG Annual Program Evaluation">HS-3131 SSBG Annual Program Evaluation</a> form within ninety (90) calendar days of the completion of each standard contract term. The provider's Executive Director is responsible for ensuring that this report is prepared and submitted to <a href="SSBG.DHS@tn.gov">SSBG.DHS@tn.gov</a>.

Date of Last Review: 08/01/2023
Date of Next Review: 08/15/2024
Supersedes: See Supersedes section

Effective Date: 08/15/2023 RDA SW22

#### G. Service Plan

Provider agencies must complete an Initial Service Plan upon receipt of each referral in the CMS. Periodic Service Plans are then assigned by task each subsequent six (6) months until the case is closed. Service Plans are not required on Specific Assistance Only cases.

All service plans must be developed in a manner that respects the client's preferences; clients have self-determination and the right to decline assistance with any given activity. In circumstances where the client cannot communicate on their own, the caregiver's input must be sought on the client's behalf. All planned activities must be in furtherance of the <a href="SSBG">SSBG</a> Service Goals.

#### H. Risk Assessment

With the opening of each case, providers must complete an Initial Risk Assessment. This assigns a numerical score to each client representing their overall well-being. Periodic Risk Assessments are then assigned by the CMS each subsequent six (6) months until the case is closed. Risk Assessments are not required on Specific Assistance Only cases.

## I. Monthly Client Services Report

The Monthly Service Report is required from all providers. This report is generated by the CMS then submitted to all agencies to add the number of units provided and to sign that the report is accurate. SSBG state office staff use units as a basis for calculating provider efficiency. See Units of Service section of SSBG Fiscal Accountability Procedures and policy 14.01 SSBG Eligibility.

#### J. TDHS Annual Report

Every year, TDHS submits a report to the state giving the status of each division and highlighting success stories from clients around the department. In order to receive program information in a standardized fashion, TDHS issues a template seeking answers to specific questions and requesting statistics.

Because SSBG clients are served by contracting providers, each year this template is forwarded to the agencies for completion.

# K. Missed Appointment Log

Date of Last Review: 08/01/2023

In order to minimize impact to clients caused by provider-canceled appointments, each provider is required to document the appointments they cancel that are not rescheduled for the same week.

Appointment cancelations must be minimized, using alternate staff when necessary. <u>HS-3480 Missed</u>
<u>Appointment Log</u>

#### L. Grant Disbursement Reconciliation Report

Each provider must submit a grant disbursement reconciliation report within sixty (60) days of contract end. The report must include documentation indicating the total dollar amounts granted and spent. At their discretion, providers may use the final invoice as both invoice and reconciliation report.

If the provider invoiced and received more than allowed by contract, they will submit a refund along with the grant disbursement reconciliation report.

Any expenses invoiced after the grant disbursement reconciliation report is submitted will be considered unallowable and therefore, non-reimbursable. If the agency does not provide a grant disbursement reconciliation report, they will be considered ineligible for reimbursement and must refund all payments made under the contract.

The provider must close out its accounting records at the end of the contract term in such a way that no reimbursable funding expenditures and/or revenue collections are carried forward.

#### M. Quarterly Expense and Revenue Reports

Agencies must submit a quarterly expense and revenue report no later than forty-five (45) days after the end of the quarter. The State's payment of invoices is contingent upon timely submission. Reports should be submitted to <a href="mailto:SSBG.DHS@tn.gov">SSBG.DHS@tn.gov</a>.

# **Supporting Documents**

**HS-3115 SSBG Service Proposal** 

**HS-3130 Abuse Reporting Log** 

HS-3131 SSBG Annual Program Evaluation

hs-3460 SSBG Corrective Action Plan

HS-3465 APS Sub-Recipient Invoice for Reimbursement

HS-3475 SSBG Authorized Signatories

**HS-3480 Missed Appointment Log** 

HS-3489 SSBG Refusal of Services

14.01 SSBG Eligibility

14.02 SSBG Fiscal Accountability

**SSBG Fiscal Accountability Procedures** 

**SSBG Documentation Procedures** 

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# **Definitions/Acronyms**

Term	Definition
Agency	Provider
A/N/E	Abuse/Neglect/Exploitation
APS	Adult Protective Services
CIC	Change in Circumstances
cQı	Continuous Quality Improvement
IE	Income Eligible
Provider	Agency
SSBG	Social Services Block Grant
TDHS	Tennessee Department of Human Services
WRI	Without Regard to Income

# **Supersedes**

Policy 14.03 Social Services Block Grant Provider Documentation, effective 10/01/2022

# **Approval History**

Approved By	Approver Title	Approved Date	Effective Date
Clarence H. Carter	Commissioner	08/01/2023	08/15/2023
Clarence H. Carter	Commissioner	08/15/2022	10/01/2022
Clarence H. Carter	Commissioner	03/23/2021	04/01/2021

# **Revision History**

Date	Version	Location of Change	Description/Reason for Change
08/01/2023	08/15/2023	Policy section	Implementation of changes surrounding the creation of the SSBG Portal
08/15/2022	10/01/2022	Paragraphs A, D, H	Paragraph A: Added deadline for report. Paragraph D: Added form link, changed satisfaction threshold. Paragraph H: Updated title, clarified timeframes
03/23/2021	04/01/2021	N/A	New Policy

Approved By	Clarence 7. Carter	Approval Date	08/01/2023
Authority	Tenn. Code Ann. 71-6-103 45 CFR 96.70 et seq. 42 CFR §1397.	Effective Date	08/15/2023
Application	SSBG State Office and Contracted Providers.		

Date of Last Review: 08/01/2023 Date of Next Review: 08/15/2024 Supersedes: See Supersedes section Effective Date: 08/15/2023 RDA SW22

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