



Review Type: Standard Review Dates: 1/1/2015 - 1/4/2015 County Size: Large Draft Report

Overall Case Statistics			
Total Cases Reviewed:	70	Total County Caseload (as of 12/01/14):	30500
Total Standard Cases (non-Denied):	60	Total Denied Cases:	10
Total QA County Reviewed Cases:	24	Total State QA Home Visit Cases:	3
Total Special/Anomaly Cases:	18	Total Severely Impaired Cases:	18

Case Funding Types			
PCSP Cases:	11	IPO Cases:	0
CFCO Cases:	48	Residual Cases:	1

Assessment Statistics			Yes	No	Percentage
Initial Assessments:	6	Initial Assessment completed within 45 days of application date:	0	6	00.0%
Reassessments (12 mo):	48	Current Reassessment in case file:	15	33	31.3%
Reassessments (18 mo):	0	Current Reassessment in case file:	0	0	N/A
ICT Assessments:	6	Inter-Cty Transfer Assessment performed within regulatory guidelines:	6	0	100.0%

Assessment Narratives/Needs Assessments			Yes	No	Percentage
Documentation is consistent with all Functional Index (FI) rankings:			30	30	50.0%
Social Worker's observations were included:			57	3	95.0%
Sufficient documentation for all assessed services:			50	10	83.3%
Hours assessed calculated and documented correctly:			35	25	58.3%

Household / Living Situation			Yes	No	Percentage
Information regarding Household/Living Situation consistent in CMIPS:			55	5	91.7%

Paramedical Cases (SOC 321)		N/A	Yes	No	Percentage
Number of Paramedical Cases Reviewed:	23				
Form SOC 321 is in the case file:		23	0		100.0%
Form SOC 321 is current:		22	1		95.7%
Authorized Hours consistent with form SOC 321:		21	2		91.3%
Are the services Paramedical:		22	1		95.7%
Form SOC 321 is completed by a healthcare professional:		23	0		100.0%
Form SOC 321 signed by Recipient:		23	0		100.0%

Protective Supervision (SOC 821)		N/A	Yes	No	Percentage
Number of Protective Supervision Cases Reviewed:	9				
Sufficient documentation and justification:		7	2		77.8%
Form SOC 821 in case file, or documented as sent:		9	0		100.0%
24-Hour plan in case file and reviewed at last reassessment:		9	0		100.0%
County addressed PS needs at each reassessment:		8	1		88.9%

Unmet Needs		N/A	Yes	No	Percentage
Number of cases with Unmet Needs Reviewed:	4				
Social Worker documented attempt to identify other Unmet Needs resources:		0	2	2	50.0%

Alternative Resources		N/A	Yes	No	Percentage
Number of cases where social worker documented that Alternative Resources were explored:		56	4		93.3%
When available, was the source and service of the Alternative Resource documented:		0	55	1	98.2%
The number of hours are correctly adjusted in the Alternative Resource column:		46	5	5	50.0%
SOC Form 450 (Voluntary Services Certification) is in the case when required:		55	0	1	00.0%

Critical Incidents	
Number of cases with Critical Incidents found:	0

IHSS Forms		N/A	Yes	No	Percentage	
SOC 332	Recipient/Employer Responsibility Checklist	0	60	0	100.0%	
SOC 426A	Recipient Designation of Provider	1	44	15	74.6%	
SOC 827/864	Emergency Backup Plan/Risk Assessment Plan	0	60	0	100.0%	
SOC 873	Healthcare Certification	0	60	0	100.0%	
Form Info		N/A	Yes	No	Percentage	
Form 873 signed by a Healthcare Professional:			60	0	100.0%	
Healthcare Professional check "Yes" indicating the need for IHSS on SOC 873:			60	0	100.0%	
County took appropriate action if healthcare provider selected "No IHSS Needed" on SOC 873:		60	0	0	N/A	
If no SOC 873 available, was alternative documentation in case file:		60	0	0	N/A	
Number of Declined SOC 827/864 Forms:		0				
Proration		N/A	Yes	No	Percentage	
Number of cases with Proration Reviewed:		30				
Adjustments correctly reflect the shared living regulations requirement:			30	0	100.0%	
Properly Documented why Domestic and Related services were not Prorated:		11	13	6	68.4%	
Hourly Task Guidelines (HTGs)		Yes	No	Percentage		
	Domestic Services	AA	0	1	00.0%	
	Preparation of Meals	BB	8	3	72.7%	
	Meal Clean-Up	CC	3	2	60.0%	
	Laundry	DD	25	1	96.2%	
	Shopping For Food	EE	0	0	N/A	
	Other Shopping/Errands	FF	0	0	N/A	
	Bowel and Bladder Care	II	16	3	84.2%	
	Feeding	JJ	4	2	66.7%	
	Routine Bed Baths	KK	6	0	100.0%	
	Dressing	LL	11	2	84.6%	
	Menstrual Care	MM	1	1	50.0%	
	Ambulation	NN	13	2	86.7%	
	Transfer	OO	7	2	77.8%	
	Bathing/Oral Hyg/Groom	PP	17	3	85.0%	
	Rubbing Skin/Repos	QQ	14	3	82.4%	
	Care/Assist w/Prosthesis	RR	11	4	73.3%	
Number of times exception language was required and whether it was properly documented in case file.			136	29	82.4%	
County QA Reviewed Cases		N/A	Yes	No	Percentage	
Number of cases Previously Reviewed by County QA:		24				
QA Staff correctly identified all inaccuracies and omissions present during their desk review:		2	1	21	04.5%	
In all instances, County QA staff correctly applied CDSS regulations and policies:		5	18	1	94.7%	
Was County remediation process consistent with that noted in the CDSS QA Manual and followed:		20	3	1	75.0%	
Number of cases with County QA Home Visits:		0				
Were all issues identified during the County QA Home Visit addressed:		0	0	0	N/A	
Companion Cases						
Total number of companion cases reviewed:		0				
Denied Cases		Yes	No	Percentage		
Cases which were appropriate for denial:		10	0	100.0%		