

Social Services Block Grant Provider Documentation

Policy 14.03

Effective: December 1, 2024

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

State law mandates any individual who suspects or knows about the abuse, neglect, or exploitation (A/N/E) of a child or vulnerable adult to report their concerns immediately to the appropriate department.

- Provider 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.
- When the SSBG Block Grant Coordinator is not available, provider staff must report directly to [APS Intake](#) and notify the SSBG Block Grant Coordinator by email.

B. Incident Reports

Critical incidents are those that jeopardize the health, safety, or life of clients when provider staff are present; disasters, both natural or manmade; and adult day service closures without forty-eight (48) hours' notice.

Providers must report all critical incidents involving SSBG clients in writing to [SSBG state office](#). SSBG state office will review and respond with instructions regarding appropriate next steps.

Generally, providers maintain the discretion to remove, suspend, and return their employees to service. However, in incidents where agency staff are suspected of misconduct, TDHS 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.

Further details about what constitutes a critical incident are described in [SSBG Provider Documentation procedures](#).

C. Client Surveys

Adult Day Service (ADS) providers complete a customer satisfaction survey in the CMS with each client annually. If the average of all responses is less than ninety percent (90%), a corrective action plan will be required.

D. Corrective Action Plans

TDHS SSBG may require providers to submit [HS-3460 SSBG Corrective Action Plan](#) 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 [HS-3131 SSBG Annual Program Evaluation](#) 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 SSBG.DHS@tn.gov.

G. Service Plan

Provider case managers 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 personal support case is closed.
- twelve (12) months until the adult day services case is closed

Periodic Service Plans can be completed by case managers or by personal support service personnel assigned to the client.

Note: 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 [SSBG Service Goals](#).

H. 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 the Units of Service section of [SSBG Fiscal Accountability Procedures](#) and Policy [14.01 SSBG Eligibility](#).

I. 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.

J. Missed Appointment Log

To minimize client impact caused by provider-canceled appointments, each provider is required to document the appointments they cancel that are not rescheduled for the same week. Appointment cancellations must be minimized, using alternate staff when necessary. [HS-3480 Missed Appointment Log](#)

K. Invoices

Monthly invoices are required for reimbursement. Refer to [14.02 Fiscal Accountability](#) policy.

L. Grant Disbursement Reconciliation Report

Each provider must submit a grant disbursement reconciliation report within sixty (60) days of the 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.

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](#)

Definitions/Acronyms

Term	Definition
Agency	Provider
A/N/E	Abuse/Neglect/Exploitation
APS	Adult Protective Services
CIC	Change in Circumstances
CMS	Case management system
CQI	Continuous Quality Improvement
Critical Incidents	Those that jeopardize the health, safety, or life of clients when provider staff are present; disasters, both natural or manmade; and adult day service closures without forty-eight (48) hours' notice.
IE	Income Eligible
Provider	Agency
SSBG	Social Services Block Grant
TDHS	Tennessee Department of Human Services
WRI	Without Regard to Income

Supersedes

14.03 Social Services Block Grant Provider Documentation, effective 08/15/2023

Approval History

Approved By	Approver Title	Approved Date	Effective Date
Clarence H. Carter	Commissioner	11/18/2024	12/01/2024
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
11/18/2024	12/01/2024	Policy Section	This policy revision clarified the process for reporting adult abuse, who can complete periodic service plans, removed Risk Assessment info, and the quarterly expense reporting section.
08/01/2023	08/15/2023	Policy section	Implementation of changes surrounding the creation of the SSBG Portal
08/15/2022	10/01/2022	Policy section	Added deadline for report. Added form link, changed satisfaction threshold. Updated title, clarified timeframes
03/23/2021	04/01/2021	N/A	New Policy

Approved By	<i>Clarence H. Carter</i>	Approval Date	11/18/2024
Authority	45 CFR 96.70 et seq. 42 CFR §1397. Tenn. Code Ann. 71-6-103	Effective Date	12/01/2024
Application	SSBG State Office and Contracted Providers		