Overview

**Description:** Indirect monitoring of services is the case manager’s use of documentation to ensure that the Individual Support Plan is effectively implemented and adequately addresses the needs of the person in services. This guide offers information about indirect monitoring.

**Purpose/Rationale:** Reliance on written documentation from a provider can be a useful method of monitoring when used appropriately. The case manager’s progress note that supports the claim for a case management service has to describe how the case manager drew a conclusion about the services and the ISP.

**Applicability:** Case managers who receive and review documentation from providers and use it to assist in the monitoring of services.

**Procedure(s) that apply:**

In order to make a case management claim based on a review of documentation, a Personal Agent (PA) or Services Coordinator (SC) must apply professional judgment to determine whether the provider is meeting the support needs of the person. By comparing the individual’s ISP and the SC/PA’s knowledge of the individual and his or her support needs to the provider’s written documentation a case management claim may be made.

Documentation that may serve as the basis for a monitoring service may come several ways, including provider progress notes and incident reports. A progress note or other written documentation may be part of a timesheet or invoice, sent separately from a timesheet or invoice, or delivered through email. However it arrives, the provider’s documentation must be maintained in a record at the case management entity, accessible by anyone who needs to see it to verify it supports the case management claim.

To make a claim for an indirect monitoring service, a Services Coordinator or Personal Agent must write their own progress note following a review of the provider’s documentation. **Unless there is reason to suspect that the assessed needs have changed or were incorrectly identified, a supporting progress note needs to show, at least, that the services delivered were consistent with the ISP.** A supporting progress note needs to show the reasoning that led to the conclusion that the services delivered did or did not meet the support needs identified in the ISP for which the provider is responsible to meet. The case manager’s progress note must be able to show how the provider’s documentation allowed the case manager to conclude that
the services delivered were adequate and effective, or not. It must tie the support described in the provider’s progress note back to the ISP, even if to say the ISP is in need of change.

Checking the math on a timesheet is not a case management service, nor is comparing the amount of services delivered to those authorized and attempting to draw conclusions from the result. For example, a timesheet from a Personal Support Worker (PSW) that records a number of hours that matches what is authorized on the ISP is not enough to demonstrate that the specific supports required from the PSW to meet identified support needs were delivered, adequate and effective.

If it is unclear after review of the provider’s documentation that the services were adequate or effective, follow up with the individual, provider, employer or others may be appropriate. Through conversation with others, this follow up may be a qualifying encounter if documented adequately.

An indirect monitoring service is not a reciprocal case management contact. It cannot substitute for site or setting specific monitoring or financial monitoring.

**Provider Agency Progress Notes**

Any paid service must be supported by documentation that shows:
1. The individual who was provided with the service
2. The date(s) of service
3. The provider of the service (Agency’s business name or Independent Provider’s name)
4. The amount of service (units of service)
5. A description of the service adequate to demonstrate the service was consistent with, and within the scope of, the service authorized for the provider in the Individual Support Plan (ISP) or Service Agreement (SA)
6. There must be one progress note per shift per individual

Adequate provider agency progress notes focus on describing the supports a person received to achieve the desired outcome. These include the ADL, IADL, medical and behavioral supports identified on the ISP as being needed. The notes should focus on the specific activities (i.e. “visited a museum”) only insofar as they are important to achieving the desired outcomes as described in the ISP. Simply stating the name of the service associated with the procedure code is not sufficient (i.e. “Provided Day Support Activities” is not an adequate progress note to support a claim by the agency or for the purposes of indirect monitoring.) An adequate note will allow a SC/PA to determine if the services are consistent with those authorized in the ISP.

Provider agency progress notes are also a place for the provider to convey observations about possible changes in support needs, challenging behaviors and a wide variety of topics. These reported observations should be reviewed by the SC/PA for their potential impact on risk identification, new person-centered information, and service planning. The SC/PA’s supporting progress note should reflect their assessment of the observations and the actions they will take in response, if any.

ISP goals (or the content from the ISP included on a service agreement) should be written in
such a way that the provider can clearly understand what they should be doing when delivering a service. The provider will then be able to report back how they supported the individual to achieve the desired outcome(s) during the delivery of the service. The Oregon ISP Instruction Manual has information that will help a SC/PA describe desired outcomes in a way that will be useful for:

- individuals to use to guide their services,
- providers to give support that will be beneficial, and
- the SC/PA to be able to recognize the support as consistent with, or contradictory to, the ISP or service agreement.

Frequently Asked Questions:

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