

## **Life Skills Development Level 2 – Supported Employment**

- iBudget Handbook -

Supported employment services provide training and assistance to help support individuals in job development and sustaining paid employment at or above minimum wage unless the person is operating a small business.

This service can be performed on a full or part-time basis and at a level of benefits paid by the employer for the same or similar work performed by trained non-disabled persons. The provider assists with acquisition, retention, or improvement of skills related to accessing and maintaining employment, or developing and operating a small business.

With the assistance of the provider, the person receives help securing employment according to the person's knowledge, skills, abilities, supports needed, desired goals, and planned outcomes. This service is conducted in a variety of settings, including work sites.

LSD 2 should include assisting a person to learn job tasks needed to be employed, and the person should be included in all aspects of job development, interviewing, and job seeking activities.

## Service Specific Record Review – Life Skills Development 2 (SEC)

#	Performance Measure/Standard	Protocol	Not Met Reasons
1	<p>The provider has complete Service Logs covering services provided and billed during the period under review.</p>	<p>iBudget Handbook COMPLIANCE</p> <p>Review Services Log(s) for the entire period of review.</p> <ul style="list-style-type: none"> <li>• Determine available Service Log(s) include all required components.                             <ul style="list-style-type: none"> <li>○ Name of person receiving service</li> <li>○ Name of person providing the service</li> <li>○ Name of the service</li> <li>○ Date of service</li> <li>○ Time in/out</li> <li>○ Summary or list of services provided</li> </ul> </li> </ul> <p>Review Service Log(s) against claims data to ensure accuracy in billing.</p> <ul style="list-style-type: none"> <li>• Compare each date of service in claims to documented service date on each Service Log in the period of review.</li> <li>• Compare units paid in claims to units documented on each Service Log.</li> <li>• Billing can be done on a periodic basis combining documented units into one billable unit. In these instances, the single billed unit must match total documented units since the last billing date.</li> </ul> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<ol style="list-style-type: none"> <li>1) Service Log was not present for the date of service for which the claim was submitted. (B)</li> <li>2) Service Log did not contain the name of the person receiving services. (B)</li> <li>3) Service Log did not contain the date service was rendered. (B)</li> <li>4) Service Log did not contain time in/out. (B)</li> <li>5) Service Log did not contain a summary or list of services provided. (B)</li> <li>6) Discrepancies were noted between units billed and services documented. (B)</li> </ol>
2	<p>The Employment Stability Plan covering services provided and billed during the period under review is in the record.</p>	<p>iBudget Handbook COMPLIANCE</p> <p>The Employment Stability Plan (ESP) is also known as the Individualized Plan for Employment (IPE).</p>	<ol style="list-style-type: none"> <li>1) Employment Stability Plan was not in the record for some or all of the period of review. (B)</li> </ol>

## Service Specific Record Review – Life Skills Development 2 (SEC)

#	Performance Measure/Standard	Protocol	Not Met Reasons
		<p>Review record to determine if there is an Employment Stability Plan present covering the entire period of review (this may require review of 2 Employment Stability Plans).</p> <ul style="list-style-type: none"> <li>• Review record to determine the date the Support Plan was received from the Support Coordinator.                             <ul style="list-style-type: none"> <li>○ Provider is responsible for documenting the date the Support Plan was received from the WSC and/or efforts to obtain.</li> </ul> </li> <li>• Review record to determine the completion/development date of the Employment Stability Plan.                             <ul style="list-style-type: none"> <li>○ Employment Stability Plan must be completed at a minimum within 30 days of receipt of the Support Plan from the WSC.</li> </ul> </li> </ul> <p>Exception: When the Support Plan is received more than 30 days prior to the Support Plan effective date the following may apply.</p> <p>The Employment Stability Plan must be developed no later than 30 days prior to the SP effective date or within 30 days of receipt of the Support Plan, whichever date is later.</p> <p>Example: SP effective 10/1</p> <ul style="list-style-type: none"> <li>• SP received 7/15 – develop ESP no later than 9/1 (30 days prior to SP effective date)</li> <li>• SP received 8/15 – develop ESP no later than 9/14 (within 30 days of receipt)</li> <li>• SP received 9/15 – develop ESP no later than 10/15 (within 30 days of receipt).</li> </ul> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<p>2) Employment Stability Plan was not completed within 30 days of receipt of the Support Plan. (B)</p> <p>3) Employment Stability Plan was not completed within 30 days following the initiation of the new service. (B)</p> <p>4) Provider documentation does not demonstrate date the Support Plan was received from WSC. (B)</p>

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3	<p>The current Employment Stability Plan covering services provided and billed during the period under review contains all required components.</p>	<p>iBudget Handbook COMPLIANCE</p> <p>NOTE: For the purposes of this standard, only the “current Employment Stability Plan” will be reviewed. This is defined as the Employment Stability Plan associated with the Support Plan in effect at the time of the record review.</p> <p>Review the current Support Plan to determine the goals/outcomes to be addressed by Life Skills Development 2.</p> <p>Review the current Employment Stability Plan to determine minimum content is included:</p> <ul style="list-style-type: none"> <li>○ Demographic information of person receiving services</li> <li>○ Current job information to include onsite contact person at the job location,</li> <li>○ Employment level of support needed</li> <li>○ Plan for fading of the level of support as appropriate</li> <li>○ Periodic performance review information,</li> <li>○ Identification of natural supports being used,</li> <li>○ Social security benefits information and work incentives being used</li> <li>○ Career interests of the person for future planning.</li> <li>○ Documentation of the person’s employment outcome (including the attained job or position, benefits received, rate of pay, number of hours worked weekly, and other quality indicators as requested by APD</li> <li>○ Notes regarding ongoing instructions on the reporting of wages and work incentives to the Social Security Administration on a monthly and quarterly basis</li> <li>○</li> </ul>	<ol style="list-style-type: none"> <li>1) Current Employment Stability Plan was not in the record.</li> <li>2) Current Employment Stability Plan did not include the name of the person served.</li> <li>3) Current Employment Stability Plan did not identify and document efforts to develop natural supports in the workplace.</li> <li>4) Current Employment Stability Plan did not include a plan for the fading of supports.</li> <li>5) Current Employment Stability Plan did not include documentation of current employment outcomes (e.g. job details, job/position, rate of pay, number of hours worked weekly).</li> <li>6) Current Employment Stability Plan did not include level of support needed for employment.</li> <li>7) Current Employment Stability Plan did not include periodic performance review information.</li> <li>8) Current Employment Stability Plan did not include social security benefits information.</li> <li>9) Current Employment Stability Plan did not include use and purpose of work incentives utilized or reasons for the lack thereof.</li> </ol>

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#	Performance Measure/Standard	Protocol	Not Met Reasons
			<p>10) Current Employment Stability Plan did not include career interests of the person for future planning.</p> <p>11) Current Employment Stability Plan did not include documentation on reporting of wages and work incentives to the Social Security Administration monthly and quarterly.</p>
4	<p>Provider documentation demonstrates Employment Stability Plan is being followed as written.</p>	<p>iBudget Handbook COMPLIANCE</p> <p>Review record for current Employment Stability Plans covering the entire period of review.</p> <ul style="list-style-type: none"> <li>• Review the ESP to determine the person’s current employment status and career interests (current and future).</li> <li>• Refer to information under “Employment level of support needed” and the “Plan for fading of the level of support” to determine the individualized goals and objectives developed to support the person. <ul style="list-style-type: none"> <li>– This information may also be elsewhere in the ESP and referred to as outcomes and/or strategies or other similar terms.</li> </ul> </li> </ul> <p>After determining the person’s current employment goal’s and the provider’s plan to support the person review provider documentation such as Service Logs, Quarterly (Monthly) Summaries and other available provider documentation to determine if the ESP is being followed as written.</p>	<p>1) Employment Stability Plan was not in the record for some or all of the review period.</p> <p>2) Provider documentation did not demonstrate plan for fading of support needed was being followed.</p> <p>3) Provider documentation did not demonstrate Employment Stability Plan is implemented as written.</p>
5	<p>A Quarterly Summary covering services provided</p>	<p>iBudget Handbook COMPLIANCE</p>	<p>1) One or more Quarterly/Monthly Summaries were not in the record.</p>

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	and billed during the period under review is in the record.	<p>The quarterly time period begins on the effective date of the Support Plan.</p> <p>Refer to Support Plan to determine the goals/outcomes addressed by Life Skills Development 2.</p> <p>Determine Support Plan effective date to determine Quarterly Summary timeframes.</p> <ul style="list-style-type: none"> <li>• Determine if provider completes Monthly rather than Quarterly Summaries.                             <ul style="list-style-type: none"> <li>○ Monthly Summaries in lieu of Quarterly Summaries are acceptable.</li> </ul> </li> <li>• Review each Quarterly (Monthly) Summary within the period to determine minimum content is included:                             <ul style="list-style-type: none"> <li>○ Description of the person’s progress, or lack thereof, toward achieving each of the goals/outcomes identified on the Support Plan specific to service rendered.</li> <li>○ *Description of activities that took place during each quarter (month) of the Support Plan year that services were rendered.</li> </ul> </li> </ul> <p>*Description of activities that took place during each quarter (month) of the Support Plan year for Life Skills 2 will vary per person, frequency of service and could include but not be limited to updates related to information provided to APD or the WSC. Applications completed, interviews attended, coaching provided, Job change, pay raise, absences, performance review/issues, service award, change in hours, job responsibilities, etc.</p> <p>If the provider was not providing services at the time the last Quarterly/Monthly Summary was due, score N/A.</p>	<p>2) One or more Quarterly/Monthly Summaries were not reflective of progress toward one or more Support Plan goals/outcomes.</p> <p>3) One or more Quarterly/Monthly Summaries did not include a description of activities that took place during each quarter/month.</p> <p>4) One or more Quarterly Summaries were not aligned with the Support Plan effective date.</p>

## Service Specific Record Review – Life Skills Development 2 (SEC)

#	Performance Measure/Standard	Protocol	Not Met Reasons
6	The Annual Report covering services provided and billed during the period under review is in the record.	<p>iBudget Handbook COMPLIANCE</p> <p>Review record to determine if there is an Annual Report present covering the entire period of review (this may require review of 2 Annual Reports).</p> <p>Review record to determine Support Plan effective date.</p> <ul style="list-style-type: none"> <li>• Determine if the Annual Report is a component of the Third Quarterly Summary, Ninth Monthly Summary (for those completing Monthly Summaries) or a separate document (which is acceptable). <ul style="list-style-type: none"> <li>○ The Third Quarterly Summary or Ninth Monthly Summary may serve as the Annual Report when a summary of the previous three quarters (or nine months) is included.</li> </ul> </li> <li>• Determine date Annual Report was completed and provided to the Support Coordinator. <ul style="list-style-type: none"> <li>○ The Annual Report must be completed and provided to the Support Coordinator at least 60 days prior to the Support Plan effective date.</li> </ul> </li> </ul> <p>If the provider rendered services to the person for less than 12 months, the Annual Report would cover all months since services were initiated.</p> <p>If the provider was not providing services to the person at the time the last Annual Report was due, score as N/A.</p> <p style="text-align: center;"><b>This standard is subject to identification of a potential billing discrepancy</b></p>	<ol style="list-style-type: none"> <li>1) Annual Report was not in the record. (B)</li> <li>2) Annual Report was completed, but not at least 60 days prior to the Support Plan effective date. (B)</li> <li>3) Annual Report did not indicate a date of completion. (B)</li> </ol>

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#	Performance Measure/Standard	Protocol	Not Met Reasons
7	The Annual Report covering services provided and billed during the period under review contains all required components.	<p>iBudget Handbook COMPLIANCE</p> <p>Refer to Support Plan to determine the goals/outcomes addressed by Life Skills Development 2</p> <p>Review record to determine Support Plan effective date.</p> <ul style="list-style-type: none"> <li>• Determine if the Annual Report is a component of the Third Quarterly Summary, Ninth Monthly Summary (for those completing Monthly Summaries) or a separate document (which is acceptable).               <ul style="list-style-type: none"> <li>○ The Third Quarterly Summary or Ninth Monthly Summary may serve as the Annual Report when a summary of the previous three quarters (or nine months) is included.</li> </ul> </li> <li>• Review Annual Report for a summary of the first three quarters (or nine months) of the Support Plan year which must include:               <ul style="list-style-type: none"> <li>○ Description of the person’s progress, or lack thereof, toward achieving personally determined goals/outcomes identified on the Support Plan specific to the service rendered.</li> <li>○ Any pertinent information about significant events that occurred in the person’s life during the previous year.</li> </ul> </li> </ul> <p>*Examples of “any pertinent information about significant events that occurred in the person’s life during the previous year” will vary by person and frequency of service and could include but not be limited to major milestone achieved, “dream” job obtained, job promotion, significant event in the person’s personal life that impacted employment or efforts to gain employment, etc.</p>	<ol style="list-style-type: none"> <li>1) Current Annual Report was not in the record.</li> <li>2) Current Annual Report did not include a summary of the previous three quarters (or nine months) of the Support Plan year.</li> <li>3) Current Annual Report did not contain a summary of the person’s progress toward achieving one or more individually determined goals/outcomes on the Support Plan.</li> <li>4) Current Annual Report did not contain any pertinent information about significant events that occurred in the person’s life during the previous year.</li> </ol>

## Service Specific Record Review – Life Skills Development 2 (SEC)

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		<p>If provider has rendered services to the person for less than 12 months, the Annual Report would cover all months since services were initiated.</p> <p>If the provider was not providing services to the person at the time the last Annual Report was due, score as N/A.</p>	
8	<p>The provider maintains Service Authorization(s) covering services provided and billed during the period under review.</p>	<p>iBudget Handbook COMPLIANCE</p> <p>Service Authorizations are provided annually or more frequently as changes dictate.</p> <ul style="list-style-type: none"> <li>• Review the Service Authorizations for Life Skills Development 2 to ensure: <ul style="list-style-type: none"> <li>○ The Service Authorizations are available to cover all services provided and billed during the period under review;</li> <li>○ The Service Authorizations are in approved status;</li> <li>○ The Service Authorizations indicate the correct rate (e.g. agency, solo, geographic, non-geographic, Monroe county rate, correct ratio). <ul style="list-style-type: none"> <li>❖ Refer to the current APD Provider rate table as needed.</li> </ul> </li> </ul> </li> </ul> <p>WSCs <b>and</b> service providers must verify the Service Authorizations are correct based on the amount, duration, frequency, intensity, and scope authorized for the service in the iBudget system. If corrections are needed the service provider should immediately contact the WSC for resolution.</p> <ul style="list-style-type: none"> <li>○ Consider provider’s documented due diligence in securing corrected Service Authorizations when incorrect Service Authorizations are received or updates are in process.</li> </ul>	<ol style="list-style-type: none"> <li>1) Service Authorizations were not present in the record.</li> <li>2) One or more Service Authorizations were not present in the record.</li> <li>3) One or more Service Authorizations were not in approved status.</li> <li>4) One or more Service Authorizations did not indicate the correct rate.</li> </ol>

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9	<p>Provider is in compliance with billing procedures and the Medicaid Waiver Services Agreement.</p>	<p>iBudget Handbook Current APD Provider Rate Table COMPLIANCE</p> <p>Determine if services are being provided in accordance with the Handbook.</p> <p>Provider bills the appropriate rate:</p> <ul style="list-style-type: none"> <li>• Solo vs. Agency</li> <li>• Geographic, non-geographic or Monroe County</li> <li>• An agency or group provider for rate purposes is a provider that has two or more employees to carry out the enrolled service(s). A provider that hires only subcontractors to perform waiver services is not considered an agency provider for rate purposes.</li> </ul> <p>Determine if provider has at least two employees to carry out the enrolled service(s) during the period of review.</p> <p>Review provider payroll to confirm withholding of the following taxes:</p> <ul style="list-style-type: none"> <li>• Federal income tax withholding</li> <li>• The employee’s portion of Medicare tax and employee’s portion of Social Security tax (FICA)</li> <li>• Employer’s Federal Unemployment Tax Act (FUTA)</li> </ul> <p>Review Claims data to determine rate billed</p> <ul style="list-style-type: none"> <li>❖ Refer to the current APD Provider Rate Table as needed.</li> </ul> <p>Determine if services are being provided in accordance with the Handbook.</p> <ul style="list-style-type: none"> <li>• Review provider records for service authorizations, Service Logs, and other available provider documentation.</li> </ul>	<ol style="list-style-type: none"> <li>1) Provider documentation demonstrated the provider is a solo but billed the agency rate. (B)</li> <li>2) Provider documentation demonstrated the provider is not considered an agency for rate purposes but billed the agency rate. (B)</li> <li>3) Provider documentation demonstrated the provider billed the geographic rate for services rendered in a non-geographic area. (B)</li> <li>4) Provider documentation demonstrated the provider billed the Monroe County rate for services not rendered in Monroe County. (B)</li> <li>5) Provider documentation demonstrated service was rendered in groups larger than the authorized ratio. (B)</li> <li>6) Provider documentation demonstrated service was rendered in groups larger than eight individuals. (B)</li> <li>7) Provider documentation demonstrated the person was under the age of 22 without a standard high school or GED diploma. (B)</li> <li>8) Provider documentation demonstrated provider is billing for services provided by the person’s employer. (B)</li> <li>9) Provider documentation demonstrated the provider received payment for</li> </ol>

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		<ul style="list-style-type: none"> <li>○ Determine if services are rendered in accordance with approved Service Authorizations.</li> <li>○ Determine if service is rendered using the approved ratio.                             <ul style="list-style-type: none"> <li>▪ Ratios for LSD 2 can range from 1:1 up to 1:8</li> </ul> </li> </ul> <p>Determine age of person:</p> <ul style="list-style-type: none"> <li>○ Persons under 22 are eligible with a standard high school diploma.</li> <li>○ If person is under the age of 22 years and does not have a standard high school or GED diploma, they must first exhaust available resources through the public school system.</li> </ul> <ul style="list-style-type: none"> <li>● Review Service Logs to determine if the provider receives payment for incentives or subsidies of unrelated vocational training.</li> <li>● Review Service Logs and other documentation to determine if the provider bills for supports provided by the person's employer.</li> <li>● If Service Authorizations and/or Service Logs are not present for some or all of the period under review, refer to other provider documentation such as the Employment Stability Plan, Quarterly/Monthly Summaries, etc. to assist with determinations.</li> </ul> <p>The provider should bill no more than 8 hours per date of service.</p> <ul style="list-style-type: none"> <li>○ Review Claims data and determine if the provider billed more than 8 hours per date of service.</li> </ul> <p>The provider should bill no more than a maximum of the equivalent of 56 hours per week of all Life Skills Development services combined.</p>	<p>incentives, subsidies of unrelated vocational training. (B)</p> <p>10) Provider documentation indicated provider billed in excess of 8 hours per date of service. (B)</p> <p>11) Service is not being rendered in accordance with the Handbook. (B)</p>

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#	Performance Measure/Standard	Protocol	Not Met Reasons
		<b>This standard is subject to identification of a potential billing discrepancy</b>	
10	Provider bills for services after services are rendered.	<p>iBudget Handbook COMPLIANCE</p> <p>Provider is not to bill for services prior to rendering.</p> <ul style="list-style-type: none"> <li>• Review Claims data for date billed.</li> <li>• Review dates on Service Logs.</li> <li>• Compare dates of service on Service Logs to “claim billed date” in claims.</li> <li>• Determine if services were rendered prior to billing for each date of service during the period of review.</li> </ul>	1) Provider documentation demonstrated the provider billed for services prior to rendering on one or more dates during the period under review.
11	The provider documents ongoing efforts to address the person’s interests and preferences related to securing and maintaining employment.	<p>iBudget Handbook PERSON CENTERED PRACTICE</p> <p>Ask the provider to describe method of soliciting and documenting information about the person’s interests and preferences related to desired employment outcomes.</p> <ul style="list-style-type: none"> <li>• Review record for documentation supporting stated method used to determine the type of work the person is interested in, preferred activities, the hours, pay and needed supports on an ongoing basis.</li> <li>• Review Service Logs, Situational Assessment, Quarterly/Monthly Summaries, Employment Stability Plan, and other provider documentation to determine stated methods are used to assist in securing employment based on desired outcomes.</li> <li>• Review the Support Plan as a reference document to determine the person’s preferences for securing and maintaining employment.</li> </ul>	<p>1) Provider documentation did not demonstrate efforts to learn about the person’s interests and preferences related to employment.</p> <p>2) Provider documentation did not demonstrate ongoing efforts to address the person’s interests and preferences related to employment.</p>

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		<ul style="list-style-type: none"> <li>Look for documentation related to provider efforts to learn about the person’s career interests, abilities, needs and considerations of hours of employment, time of day/week, type of work, level of pay, desired benefits, etc.</li> </ul>	
12	The provider documents ongoing efforts to assist the person/legal representative to know about rights.	<p>iBudget Handbook Chapter 393 F.S. PERSON CENTERED PRACTICE</p> <p>Ask the provider to describe method of assisting the person and when applicable the legal representative to know about their rights and responsibilities as related to this service.</p> <p>Review available Service Logs or other provider documentation demonstrating efforts to support the person, and when applicable the legal representative to know about rights on an ongoing basis.</p> <ul style="list-style-type: none"> <li>Review available Service Logs, Quarterly/Monthly Summaries, Annual Report, and other provider documentation demonstrating efforts to support the person, and when applicable the legal representative to know about rights.</li> </ul> <p>*Examples of efforts to assist the person/legal representative to know about rights will vary by person and frequency of service. Information could include, but not be limited to identification of rights most important to the person, access to personal possessions, fair wages, voting, freedom from discrimination, education on Informed Consent, confidentiality, privacy, religion, free from harm, self-determination, etc.</p>	<ol style="list-style-type: none"> <li>1) Provider documentation did not demonstrate efforts to assist the person/legal representative to know about rights.</li> <li>2) Provider documentation demonstrated efforts to assist the person/legal representative to know about rights but not on an ongoing basis.</li> </ol>
13	The provider documents ongoing efforts to ensure the person’s physical health needs are addressed.	<p>iBudget Handbook PERSON CENTERED PRACTICE</p>	<ol style="list-style-type: none"> <li>1) Provider documentation did not demonstrate efforts to gather information about the person’s physical health needs.</li> </ol>

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#	Performance Measure/Standard	Protocol	Not Met Reasons
		<p>Ask the provider to describe method used to gain and document knowledge of the person’s physical health information relevant to the service provided.</p> <ul style="list-style-type: none"> <li>• Ask the provider how information related to physical health is maintained and updated on an ongoing basis.</li> <li>• Review record for documentation supporting stated method.</li> <li>• Supporting documentation may be found in Service Logs, Quarterly (Monthly) Summaries, Annual Report, intake forms, stand-alone forms, or other available provider documentation.</li> </ul> <p>*Key/critical physical health information will vary per person, service, and frequency of service. Information could include, but not be limited to diagnosis, certain environmental factors, medication related information, food allergies, and other key information critical to maintaining the person’s physical health, and relevant to the service provided.</p>	<ol style="list-style-type: none"> <li>2) Provider documentation demonstrated knowledge of the person’s physical health needs but not ongoing efforts to address identified needs.</li> <li>3) Key and critical physical health information was absent from the record.</li> </ol>
14	The provider documents ongoing efforts to ensure the person’s behavioral/emotional health needs are addressed.	<p>iBudget Handbook PERSON CENTERED PRACTICE</p> <p>Ask the provider to describe method used to gain and document knowledge of person’s behavioral/emotional health information relevant to the service provided.</p> <ul style="list-style-type: none"> <li>• Ask the provider how information related to behavioral/emotional health is maintained and updated on an ongoing basis.</li> <li>• Review record for documentation supporting stated method.</li> <li>• Supporting documentation may be found in Service Logs, Quarterly (Monthly) Summaries, Annual Report, intake forms, stand-alone forms, or other available provider documentation.</li> </ul>	<ol style="list-style-type: none"> <li>1) Provider documentation did not demonstrate efforts to gather information about the person’s behavioral/emotional health needs.</li> <li>2) Provider documentation demonstrated knowledge of the person’s behavioral/emotional health needs but not ongoing efforts to address identified needs.</li> <li>3) Key and critical behavioral/emotional health information was absent from the record.</li> </ol>

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		<ul style="list-style-type: none"> <li>• If based on review of the current Support Plan and provider documentation, if there are no behavioral/emotional health concerns indicated, score N/A.</li> </ul> <p>*Key/critical behavioral/emotional health information will vary per person, service, and frequency of service. Information could include, but not be limited to diagnosis, certain environmental factors, medication, Baker Acts, Police involvement, Behavior Plans, Safety Plan, and emotional well-being (stress, anxiety, depression, grief, other emotional issues, or diagnosis) and other information critical to behavioral/emotional health relevant to the service being provided.</p>	
15	Service Logs document service delivery that is varied, unique and person centered.	<p>iBudget Handbook PERSON CENTERED PRACTICE</p> <p>The service provided should be in direct relation to the achievement of the person’s goals/outcomes as specified in their Support Plan. Service Logs should describe the specific and individualized activities that took place during the service delivery.</p> <p>Review Services Log(s) for the entire period of review</p> <p>Determine if there is a pattern where multiple Service Logs are duplicates of a previous log.</p> <ul style="list-style-type: none"> <li>• Duplicate Service Logs are not acceptable for this service. The service provided must directly relate to the achievement of the person’s goals as specified in their Support Plan where progress is expected and can be measured.</li> </ul>	<ol style="list-style-type: none"> <li>1) Some Service Logs were duplicates of previous logs.</li> <li>2) Most, but not all, Service Logs were duplicates of previous logs.</li> <li>3) All Service Logs were duplicates of previous logs.</li> </ol>