

**PERFORMANCE REVIEW FOR
FAMILY CAREGIVER SUPPORT PROGRAM**

Page1:

Complete the following:

Agency: _____

Review Date: _____

Agency Staff Interviewed: _____

(You may want to have the person interviewed sign)

Signature of Reviewer: _____

Pages 1 – 2:

Program Verification – Part I; Categories I - V

Check as many services as are applicable by contract:

Page 3:

Individual Client Record Review

Complete as instructed by **DAAS ADMINISTRATIVE LETTER NO. 08-10**,
Revised Assessment Policy, sec. 308, AAA Policies and Procedures Manual,
September 25, 2008

*Note: Copy this page as many times as needed. Each category of service (I –V)
should be on a separate sheet.*

Page 4:

Method of Service Provision and Client Eligibility

Complete as appropriate

Page 5:

Service Priority

Complete as appropriate

Pages 6 - 7:

Program Integrity

Complete as appropriate

Pages 8 - 9:

Fiscal Verification – Part II

Reimbursement Methods and Accounting System

Complete as appropriate

Page 10:

Monitoring Notes