# **Closed CSR Review Checklist**

Consumer Name:	Reviewer:						
Reason for Exit:	Died	Goal Met	Moved	Other	Withdrew	Date:	
Coordinator:		Continue Mailing List?					
Reviewer: Upon	receipt	of the closed	d consume	er file from	the coordinate	or:	
ead coordinator	to com	plete it. Writ al, Sports/Red	e N/A if thi creation, D	s is a con MD or a T	sumer in a grou ransitional Hou	rian; who will assign a up, or is a nursing using Consumer.	
			• •		tion contained tation why not:	within the following Circle One	
Yes or No		Consumer Ir	nformation I	Page— <i>Exi</i>	it information cor	npleted	
Yes or No		Consumer Disability and Language information complete					
Yes or No	Request for Services-Services Requested & Living Situations comp					g Situations complete	
Yes or No	Programs and Funding complete						
Yes or No				•	al written by cons een selected.	sumer; closure dates	
Yes or No or	N/A	N/A Contact Log contains entries for intake, assessment, closure and g successful and unsuccessful as well as entries for timely meetings the consumer, which reflect work accomplished on the 1:1 consum goal.					
Yes or No or	N/A	N/A Contact Log contains entries for intake, assessment, closure a successful and unsuccessful as well as entries for timely meeti the consumer group entries are entered, correct and reflect wo accomplished on the <b>group consumer goal</b> .				timely meetings with	
Yes or No or	N/A	Return any CSR's to Deb or Marian with a list of errors (in the CSR or in the database); they will review and correct with the coordinator, then return the CSR to the program assistants.					
Consumer	and W		ures, make	e sure for	ms are dated or	ering to check for give short	
Yes or No		Consumer Profile printed and in place					
Yes or No		Goal and/or	r Goal Sum	ımarv is n	rinted and in pl	ace	

Yes or No Eligibility Determination & Accommodation Checklist

Yes or No Written/original Goal(s) (Step 3C) or Waiver (Step D). Consumer has

determined: successful or unsuccessful.

Yes or No or N/A Authorization to Request or Release Confidential Records and Information

(Step 4A)

Yes or No Authorization For Publicity (Step 4B)

Accept/Decline (DMD/Sp/Rec)

Yes or No Authorization for use of Case File in a State, Federal or QUILS Review

Accept/Decline (Step 4C)

Yes or No Signed--ILS Program Information Packet Checklist (Step 5)

DMD/SP/Rec

Yes or No or N/A Copy of Closure Letter in the CSR (not needed for group participants)

### 3. Check that the following forms have been completed:

Yes or No Assessment completed

Yes or No Flow Chart completed

Yes or No Checklist Complete

Yes or No or N/A Employment documentation criteria has been met

4. Step 7

Yes or No or N/A Upon return of **Step 7 from Deb or Marian**, place in the

consumer's file, on the left side, on top of the Flow Chart. This

step does not apply to group participants.

#### In the Volunteer Mailing Database:

Yes or No or N/A Change/Update Consumer's address if needed

Yes or No or N/A Remove from the **Consumer** Mail Group

Yes or No or N/A Delete this consumer from the **Volunteer Database**, if they no longer want to

receive First Look or Advocacy Action News. If they are on other mailing lists,

don't delete them.

#### 5. Finished at last! Place this form on top of the Flow Chart on the left side of the CSR.

## When all is well with the world, place the CSR in the closed consumer file cabinet. Ya Hoo!

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