



VR-REV

CRS Performance Review

Date:

Provider Name:

Contract Year:

- Onsite
- Internet
- Telephone

Names of Individuals Taking Part in the Meeting

Vendor:

ACCES-VR:

- Supported Employment Information Directory
- Supported Employment Corrective Action Plan- if applicable
- Vendor Survey Results
- CRS Indicators (Report is Titled UCS)
- CRS Utilization (Report is Titled UCS)
- CRS Hot and Cold Report

Comments:

Review of Documentation Related to Accessibility, Health and Safety:

No Concerns

Concerns

Concerns in what Area:

- Health and Safety Inspection
- Transportation licenses
- Staff Resumes
- Curriculum for Work Readiness I, II and III
- ADA Accessibility Guidelines
- Emergency Response Plan
- Certificate of Occupancy
- Confidentiality of Consumer Records

Does Site Need Further Review:

Yes

No

Comment/Recommended Review:

Contracted Services (check all that apply and attach CRS Appendix B-1):

Please Report on Each Service Separately (add additional sheets if necessary)

Service and/or Case Service Code:

Comments/Remediation:

VR-REV

Service and/or Case Service Code:

Comments/Remediation:

Additional Comments/Remediation:

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Summary

Total Contract Utilization Review: On Track
 Under
 Over

Narrative:
(Issues; performance; strengths; improvement opportunities; etc.)

Next Steps

Next Review Scheduled for

ACCES-VR

Print Name: _____
Signature: _____
Title: _____

Provider

Print Name: _____
Signature: _____
Title: _____