ADMINISTRATIVE OVERVIEW
SERVICE SPECIFIC ATTACHMENT

Grocery Shopping & Delivery Service

I. Service Capacity

A. Submit copies of the following policies:
   - Policy to ensure drivers are aware that they must assist consumers in putting away groceries, as needed
   - Policy that prohibits drivers from accepting gifts or gratuities from consumers
   - Policy/procedure on how consumers make payments for groceries, including the use of EBT cards and coupons
   - Policies on returns and reimbursements

B. Describe your grocery and delivery service, including detailed information on all of the following: how consumers place orders, how the order taker function is staffed, what store(s) are used, who shops and delivers (store employees?)

C. Describe the process for how orders are recorded and verified. Include any volume restrictions or other service limitations per order.

D. Describe how issues are handled regarding items that are requested but unavailable, including specific brands. How are substitutions made?

E. Describe the quality controls in place to ensure that shoppers select the correct items in the store.

F. May consumers use the service to return bottles?

G. Describe the number and type of vehicles used for deliveries. Are they all refrigerated trucks? If not, how are frozen and fresh or chilled foods maintained until delivery?

H. What is the average duration of a delivery route?

I. Describe the timeframe from order to delivery.

J. Is the day and time of your deliveries consistent each week for each service area? Explain.

K. Describe the system in place for handling weather or vehicle emergencies that may affect the delivery of groceries

L. Do you have a different system for providing services in a cluster? Explain.

M. How do you inform consumers about how the service works and the policies on subjects such as returns? If you use a brochure or flyer, attach a copy.

N. What is your proposed rate for Grocery Shopping Services? Describe any additional charges.

II. Staff Qualifications

A. Describe the experience and qualifications of the person responsible for service provision (the manager of the program), if different from the information provided in the Administrative Overview.

B. Describe the experience and qualifications you require for staff providing service, including order takers, delivery staff, etc.

III. Supervision

A. Describe the procedures for supervision, including frequency, documentation, and credentials/qualifications of supervisors for each position.

B. Describe the systems and procedures employed to ensure that services are delivered to consumers as authorized.

ADMINISTRATIVE OVERVIEW
SERVICE SPECIFIC ATTACHMENT

Provider employee who completed this form

Name: _____ Date: _____

SERVICE SPECIFIC ON-SITE REVIEW

Grocery Shopping & Delivery Service

Please note the documents and records which will be required for the Consumer files and/or Employee files to be reviewed at the time of On Site Evaluation

EMPLOYEE Records Review					
Provider Date Monitor					
Start Date & Termination Date, if applicable					
Number of reference checks					
CORI Check					
Orientation date					
Job Description(s)					
Current Driver's License (If Applicable)					
OIG monthly checks					
Annual Performance Appraisal: Date					
Comments					

SERVICE SPECIFIC ON-SITE REVIEW

Grocery Shopping & Delivery Service

Please note the documents and records which will be required for the Consumer files and/or Employee files to be reviewed at the time of On Site Evaluation

CONSUMER Records Review					
Provider Date Monitor					
ASAP Authorization					
ID Info – name; address; phone; DOB					
Emergency contact(s) and phone					
Name of current CM					
Start Date & Termination Date, if applicable					
Comments					
NOTE: Shaded data elements are only required in the Consumer File if provider is not on Provider Direct. Otherwise the PD Demonstrator will be asked to illustrate "on screen".					

Name and Position of Provider Direct Demonstrator	