

Provider Risk Assessment Worksheet

Programs/Services: _____ Contractors name: _____

Effective Start Date: _____ End Date: _____ Contract # _____

Completed By: _____

Risk Assessment Type: Initial Renewal Date: _____

<p><u>Instructions:</u></p> <ol style="list-style-type: none"> 1. Only enter the risk value next to the risk factor. 2. Add the risk values and enter the total score below. 3. Using the scoring system to the right, place (X) in the appropriate box below indicating risk level. 	<p><u>Scoring</u></p> <p>0 – 11 = Low 12 – 21 = Medium 22 or > = High</p>
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Contractor Risk Factors & Assigned Risk Values	Risk Value (0-3)	Response Strategies (Possible Action Steps in a Monitoring Plan)
<u>Client health and safety:</u> Provider has unsupervised contact with clients or access to their belongings or finances; the nature of the service or vulnerability of the clients subjects the clients to health and safety risks		
<u>Contractor expertise:</u> Experience and competency of the provider in providing services for which the contract is written		
<u>Key staff turnover:</u> Recent turnover of key staff, new personnel or abnormal frequency of personnel turnover		
<u>Performance history:</u> Compliance issues which include known audit findings, litigation, or corrective actions		
<u>Policy changes:</u> Major policy changes regarding program or service		
<u>Budget:</u> A large percentage of a provider's funding comes through contracts with the AAA		
<u>Time since last monitoring:</u> No on-site monitoring in the last two years		
<u>Length of time providing services under the current contract:</u> Contracted for less than one year		

<u>Reporting, billing, responsiveness:</u> Frequency of reports, response times and accuracy of submitted budgets, reports, billings, and other contract deliverables		
<u>Clinical and/or administrative expertise:</u> Level of clinical and/or administrative expertise required to provide service		
<u>Service level fluctuations:</u> Significant expansion or decline in services		
<u>Media:</u> High profile entity or negative press in the past two years		
<u>Data sharing:</u> Electronic sharing of confidential or protected health information		
<u>Subcontracting of services:</u> Key activities are subcontracted and monitored by the provider		
<u>Other:</u> (add as appropriate)		
<u>Site visit required based on staff and/or management concerns with program?</u> <u>(Explanation and contracts manager concurrence required.)</u>		
Total Score		= Risk level <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High
Comments:		