Instructions for Completing the IM-210

The purpose of the IM-210 is to provide a uniform method of reporting Quality Assurance/ Quality Control (QA/QC) findings to local offices. It provides local offices the opportunity to challenge the QA/QC error decision and is a tracking tool for the local agency as well as QA/QC to ensure appropriate updates / actions are taken timely.

The IM-210 is initiated by QA/QC. QA/QC distributes the IM-210 to the agency. The agency must respond to the information provided on the IM-210 no later than by close of business on the tenth working day after receipt. This date can be found in Section C (top portion).

The agency is responsible for setting up a procedure to ensure the information provided on the IM-210 is acted upon timely and appropriately, and that QA/QC receives the completed IM-210 by the tenth working day after receipt. Error cases should be reviewed and responded to within 24 hours after receipt, if possible

The responsibility for responding to the IM-210 will rest with the staff listed on the IM-210 and their Supervisor and Manager. If an error is caused by actions taken by a different Staff than who is listed on the IM-210, the IM-210 must also be reviewed with this staff as well as their immediate Supervisor.

Sections A through C (top portion) will be completed by QA/QC. After QA/QC completes sections A through C (top portion), the IM-210 will be submitted to the agency via upload to a SharePoint Site.

Section A. INITIAL FINDINGS

QA/QC will complete Section A for the case selected for review. In this section, all identifying information for the case under review will be listed.

Section B. SNAP POSITIVE/NEGATIVE DISPOSITION

QA/QC will complete Section B. In this section, QA/QC will indicate if the case review was completed, dropped, or if the participant refused to cooperate. QA/QC will also indicate if an error was found in the case review. If an error was found, QA/QC will list the error source, amount, findings, and the SNAP policy reference.

QA/QC will also list any additional information discovered during the case review (i.e. new telephone number, new residence, change of household composition, change in employment status, etc.). This additional information may or may not be in reference to an error. This information needs to be added to the case record, if still valid.

The date the IM-210 is uploaded to the SharePoint Site to be considered the date of report for this additional information.

Section C. OFFICE RESPONSE

The QA/QC and field staff will be required to complete Section C.

QA/QC will list the name and email address of the person to whom the local office should send the IM-210 response in the *Send Response To* field. The response from the local office is to be sent electronically via email.

QA/QC will list the date by which the local office must have the record updated as well as a response submitted to QA/QC in the *Office Response Due By* field. This date will be ten (10) working days following the date QA/QC sends the IM-210 to the local office. QC/QA staff will enter DATE UPLOADED to indicate the date the review and supporting documents were uploaded to State Agency/field's SharePoint site.

The local office will need to review and respond to the case review by completing Section C items 1 through 7, including signatures of staff (when required), of the IM-210; then returning the entire form to QA/QC.

1. *Does the local office agree with the case findings presented by QA/QC?*

   The Program Coordinator, supervisor, and staff discuss all reviews found to be in error. After review of the case, a decision must be reached if the local office agrees or disagrees with the QA/QC decision:

   - If yes, complete items 2 through 7.
   - If no, the Program Supervisor or above must contact the QA/QC Program Coordinator immediately to discuss. If resolution cannot be reached, the local office will check no and provide a detailed explanation and complete items 2-7. The IM-210 is to be sent only to the QA/QC manager listed for a final decision.

     Note: Include supporting documentation such as; additional verification, manual reference, memo, etc., when disagreeing with an error case finding.

2. *Cause / Reason for the error(s)*

   The office must check all factors which caused the error(s).

3. *Comment "in detail" on the cause/reason for the error(s)*

   The office must explain in detail the cause of and/or the reason for the error. A brief statement such as "worker error" or "client failed to report" is not sufficient.

4. *Indicators/clues that could have prevented the error(s)*

   In an effort to allow staff/supervisors to consider all possible factors that could have prevented the error(s) from occurring, this area has been provided. In some situations, no indicators will be present.

5. *Corrective actions taken*

   The office must check the action(s) taken to correct the error(s).

      5a. Explain actions taken to correct the error

         The office must outline the action(s) taken to correct the error.

      5b. List action(s) taken on additional information provided by QA/QC

         The office must outline the action(s) taken to update the record with the additional information provided by QA/QC.

6. *Preventative corrective action(s) taken*

   The cause of the error(s) must be evaluated to determine if preventive corrective action(s) are necessary (i.e. misapplication of policy, information disregarded, etc.). The preventive measures may involve an individual Staff or unit. Plans for the action(s) must be indicated in this field. Check the appropriate box(es) to indicate what preventive action(s) has been taken.

7. *Teaching point*

   List any and all teaching points found during the review of the QA/QC review that may help avoid future errors.

   Example: Remind staff of the access to the Public Service Agencies listing on the FSD Intranet under "Resource Links".
   Example: As FAMIS does not include student eligibility as a driver question, staff need to ask about student enrollment for the correct month during application timeframe.

   Note: *Verifications QA/QC receives on error cases are provided. If field staff request verification QA/QC obtained for correct case findings, please list:* The QA/QC Unit will provide verification(s) received during the case review. It is field staff's responsibility to request these items. This field gives the local office the opportunity to request documents QA/QC may have obtained during the case review.

The staff and supervisor are required to sign the form. The Program Coordinator's signature is only required on error cases.