

Rehabilitation Service Delivery Accuracy (RSDA) Instrument

Question	Compliance		
General			
1. Was data entered correctly and consistently in the VR&E record?	Yes	No	NA
A. Case status dates were not consistent with documentation in the VR&E record.	<input type="checkbox"/>		
B. SEH indicator was not consistent.	<input type="checkbox"/>		
C. Pre-CH31 salary was not consistent.	<input type="checkbox"/>		
D. Selected track was not consistent.	<input type="checkbox"/>		
2. Were required documents signed, dated, and filed correctly?	Yes	No	NA
A. VAF 28-1902b, Certification of Entitlement and Counseling Narrative, was missing or unsigned.	<input type="checkbox"/>		
B. VAF 28-0957, VR Guidelines and Debt Prevention, was missing or unsigned.	<input type="checkbox"/>		
C. Rehabilitation Plan was missing or unsigned.	<input type="checkbox"/>		
D. Rehabilitation Plan had expired.	<input type="checkbox"/>		
E. 28-1905, Authorization and Certification of Entrance or Reentrance into Rehabilitation and Certification Status, was missing or unsigned.	<input type="checkbox"/>		
3. Did the case comply with regulatory time limits?	Yes	No	NA
A. Duration of employment services exceeded 18 months.	<input type="checkbox"/>		
B. Duration of IL services exceeded 24 months (or 30/36 months with concurrence).	<input type="checkbox"/>		
C. Duration of EE services exceeded 12 months (or 18/24 months with proper documentation and concurrence).	<input type="checkbox"/>		
4. Was required concurrence documented?	Yes	No	NA
A. Appropriate level of concurrence for program cost was not documented.	<input type="checkbox"/>		
B. Entitlement extension concurrence was not documented.	<input type="checkbox"/>		
C. IEEP extension beyond 12 months was not documented.	<input type="checkbox"/>		
D. Approval of more than one term of academic training in an IEEP was not documented.	<input type="checkbox"/>		
E. IILP concurrence was not documented prior to implementing the plan.	<input type="checkbox"/>		
F. IL extension beyond 24 months: concurrence was not documented.	<input type="checkbox"/>		
G. IL extension beyond 36 months: concurrence of Director of VR&E Service was not documented.	<input type="checkbox"/>		
H. Reimbursement for a firearm occurred with no documented concurrence.	<input type="checkbox"/>		
I. Retroactive induction concurrence was not documented.	<input type="checkbox"/>		
J. Retroactive reimbursement concurrence was not documented.	<input type="checkbox"/>		
K. Self-employment plan concurrence was not documented.	<input type="checkbox"/>		
5. Were case management appointments and contacts documented at the required frequency?	Yes	No	NA

A. Initial case management appointment was not documented within the required 30/60 days of plan development.	<input type="checkbox"/>		
B. Contact was not consistent with documented Level 1 contact.	<input type="checkbox"/>		
C. Contact was not consistent with documented Level 2 contact.	<input type="checkbox"/>		
D. Contact was not consistent with documented Level 3 contact.	<input type="checkbox"/>		
E. Interrupted – Unplanned: Interval between contact exceeded 90 days.	<input type="checkbox"/>		
F. Interrupted – Planned: Contact schedule was not documented or contact exceeded the 120-day mark.	<input type="checkbox"/>		
6. Were case management appointments, contacts, and follow-up appropriately documented?	Yes	No	NA
A. Case management appointments: Documentation did not address progress in the rehabilitation plan, and did not cover vocational, medical, financial, academic, or other issues impacting progress.	<input type="checkbox"/>		
B. Contacts: Documentation did not address the Veteran's progress in the rehabilitation plan or provide follow-up on identified issues.	<input type="checkbox"/>		
C. IL: All issues identified on the Case Support Checklist were not addressed.	<input type="checkbox"/>		
7. Did the record contain the documentation required in support of regular progress reviews as appropriate?	Yes	No	NA
A. Grades or transcripts were not documented to show progress in the rehabilitation plan.	<input type="checkbox"/>		
B. Job logs or other evidence was not documented to show progress in employment services.	<input type="checkbox"/>		
C. VAF 28-0852, Case Support Checklist: IL Case Support Checklist, was not documented when required.	<input type="checkbox"/>		
D. VAF 28-1905c, Monthly Report of Training and Wages, was not documented when required.	<input type="checkbox"/>		
8. Was an annual review of the plan documented?	Yes	No	NA
9. Was the plan amended when required?	Yes	No	NA
A. Plan was not amended as needed.	<input type="checkbox"/>		
B. The plan was not amended when additional services were required.	<input type="checkbox"/>		
C. The plan was not amended when the Veteran attended training at a different facility.	<input type="checkbox"/>		
D. The plan was not amended when the goal changed.	<input type="checkbox"/>		
E. The rehab plan and/or active objectives were expired.	<input type="checkbox"/>		
10. Were referrals made when needed?	Yes	No	NA
A. The Veteran was not referred to VHA as needed.	<input type="checkbox"/>		
B. The Veteran was not referred to other VA resources as needed.	<input type="checkbox"/>		
C. The case was not referred to the VRP as needed.	<input type="checkbox"/>		
D. The Veteran was not provided referrals to campus or community resources as needed.	<input type="checkbox"/>		
E. The Veteran was not referred to DOL as needed/required.	<input type="checkbox"/>		
11. Was case status movement consistent with documentation?	Yes	No	NA

12. Was the case moved to Interrupted status when appropriate and is required documentation in the file?	Yes	No	NA
A. Reasons for interruption, expected outcome, actions to be completed during interruption, and expected date of return were not documented.		<input type="checkbox"/>	
B. Extensive efforts were not made to contact the Veteran prior to Interruption when contact was lost.		<input type="checkbox"/>	
C. The Veteran was not informed of interruption in writing.		<input type="checkbox"/>	
□ EE Status			
13. Were the services provided in EE status designed to resolve the question of feasibility?	Yes	No	NA
A. Services outlined on the IEEP would not resolve the question of feasibility to achieve a vocational goal.		<input type="checkbox"/>	
B. Services consist solely of academic training.		<input type="checkbox"/>	
14. Was the feasibility determination documented after the provision of Extended Evaluation services?	Yes	No	NA
□ IL Status			
15. Was collaboration with the appropriate VA entities completed, as needed?	Yes	No	NA
16. When the comprehensive IL assessment indicated a need for home adaptations, was a referral made to SAH?	Yes	No	NA
□ JR Status			
17. Was the IEAP developed at least 60 days prior to the completion of training?	Yes	No	NA
18. Was the Job Ready Declaration documented and complete?	Yes	No	NA
A. There was no documented Job Ready Declaration.		<input type="checkbox"/>	
B. The Job Ready Declaration did not clearly explain that there were no impediments in the Veteran's ability to obtain or maintain employment.		<input type="checkbox"/>	
C. There was no evidence of contact with the Veteran while the case manager was making the job ready determination.		<input type="checkbox"/>	
D. Documentation did not support the Job Ready Declaration.		<input type="checkbox"/>	

□ Reviews (For tracking only. Not included in score. Answering No does not result in an error.)			
19. Was the requested Higher-Level Review completed in an accurate and timely manner?	Yes	No	N/A
A. The requested review was not completed accurately.		<input type="checkbox"/>	
B. The review was not completed in a timely manner (90 days or less from date of request).		<input type="checkbox"/>	
C. The review was not completed by a more experienced VRC than the individual who made the decision.		<input type="checkbox"/>	
D. The review indicated a Duty to Assist error, but a Supplemental Claim Review was not initiated.		<input type="checkbox"/>	
E. The requested informal conference was not provided.		<input type="checkbox"/>	
20. Was the requested Supplemental Review completed in an accurate and timely manner?	Yes	No	N/A
A. The requested review was not completed accurately.		<input type="checkbox"/>	

B. The review was not completed in a timely manner (125 days or less from date of request or identification of a Duty to Assist error).	<input type="checkbox"/>
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<input type="checkbox"/> General Comments