

# Add Reviews Manually

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CDT

You can manually add reviews to a provider's record outside of KidKare, or the Admin Review site. This is especially useful if you do all review work manually.

1. Click the **Providers** menu and select **Provider Reviews**. The List Reviews window opens.
2. In the **Filter By** section, select **All Providers** or **Selected Providers**. If you choose Selected Providers, click the **Provider** drop-down menu and select the provider.
3. Click **Refresh List**.
4. To add a review:
  - If you filtered to All Providers in **Step 2**, click **Add** next to the provider for whom to add a review. The Add New Review window opens.
  - If you filtered to a specific provider in **Step 2**, click **Add Review** in the bottom-left corner of the window. The Add New Review window opens.

The screenshot shows the 'Add New Review' window for Shelley, Mary 998894. The window is divided into four tabs: General, Meal, Disallow, and Other. The General tab is currently selected and contains the following fields and options:

- Date:** A date selection box.
- Review:** A dropdown menu with '--Select--' as the current selection.
- Type:** A dropdown menu with 'Standard Review' as the current selection.
- Checkboxes:** Provider Inactive, Followup Required, Not Home, Special / Evaluation Visit, Technical Assistance Offered, and Unannounced.
- Next Review:** A date selection box.
- Notes For Next Review:** A large text area.
- (printed on Sponsor Review Worksheet)** text below the notes area.

The Meal tab contains the following fields and options:

- Monitor:** A dropdown menu with 'Frankenstein, Adam' as the current selection.
- Arrival Time:** A time selection box.
- Departure Time:** A time selection box.
- Meal Type Reviewed:** A dropdown menu with 'No Meal' as the current selection.
- Checkboxes:** Infant (with a note 'Check to compare foods') and Non-Infant.
- Shift(s) Observed:** A checkbox for 'First'.
- Annual Training Complete:** A checkbox.

The Disallow tab contains the following fields and options:

- Training:** A checkbox.
- Start Time:** A time selection box.
- End Time:** A time selection box.
- Total Hours:** A text input field.
- Type:** A dropdown menu with '--Select--' as the current selection.
- Session Name:** A text input field.

The Other tab is currently empty.

At the bottom of the window, there are four buttons: 'Add Another', 'Disallow Calendar', 'Save', and 'Close'.

5. In the General Tab:
  - a. Click the **Date** box and enter the date of the review.
  - b. Click the **Review** drop-down menu and select the classification of this review. This impacts the date set in the Next Review box. You can choose from the following:
    - 1st - 4th Review
    - Follow-up Review

- Pre-approval Review
- 28 Day/30 Day/ 4 Week Review
- Special/Eval

**Note:** If you select Special/Eval, the next review due date is not set, and this review does not affect the provider's review schedule.

c. Click the **Type** drop-down menu and select the type of the review. Some review types can be automatically set by other fields in the software. For example, weekend reviews are determined by the review date.

d. Check the box next to any of the following options that apply:

- Provider Inactive
- Followup Required
- Not Home
- Special/Evaluation Visit
- Technical Assistance Offered
- Unannounced

e. Click the **Notes for Next Review** box and enter any notes for the next review. The information entered in this box prints on the Sponsor Review Worksheet in the Review History section.

**Note:** Even though the **Next Review Date** box defaults to a certain value based on the review type, you can change it, if needed.

f. In the **Monitor** section, select the Monitor, their arrival time, and their departure time.

g. In the **Meal Type Reviewed** section, select the meal type and age groups reviewed. Your selection here affects the available options in the Meal tab. Note that if you select No Meal, the Meal tab is not available.

h. Check the **Annual Training Complete** box if the Monitor recorded an annual training with the provider during this review. If you check this box, the system assumes that training occurred and you can supply any other relevant training information.

i. Check the **Training** box if any other training was completed with this provider. Then, enter the training details: Start/End Time, Total Hours, Type, and Session Name.

6. Click the **Meal** tab and enter the information below. If you selected **No Meal** in **Step 5g**, go to **Step 7**.

a. Check the box next to each child in attendance for the meal. If this provider is set up for multiple servings, and you indicated that the Monitor observed both servings in the General tab, check the box next to the serving at which the child was present.

**Add New Review** Shelley, Mary 998894 Review Date: 04/03/2019 Meal: Lunch

General **Meal** Disallow Other

ServingTime: #1 [ : ]

#	Name	Age	Served 1
1-2	Frankenstein Victor	1Y	<input type="checkbox"/>
1-1	Woodville Mathilda	3Y	<input type="checkbox"/>

**Enter Infant Foods**

Was age-appropriate milk served?

**Non-Infant:**

Meat/Alternate: [ ] ...

Bread/Alternate: [ ] ...

Is this whole grain-rich?

Vegetable: [ ] ...

Fruit/Vegetable: [ ] ...

Milk: [ ] ...

**Use Template**

# of Children Observed: 0  
 # of Children Claimed: N/A  
 Infants Selected: 0

**Meal Attendance Taken**  
 Daily  Point of Service

**Provider Claim Source**  
 Online Claim  Scannable Claim

**Add Another** **Disallow Calendar** **Save** **Close**

- b. Enter the foods served. Click **Enter Infant Foods** to enter any infant foods, if needed. You can leave meal information blank, but if you do supply foods/attendance, the system cross-checks this information when the claim is processed. Any discrepancy between what you note here and what the provider has claimed causes an error when the claim is processed.
7. Click the **Disallow** tab. Use this tab to disallow meals based on information observed during the review. Only use this tab if the Monitor noticed a situation during the review that required a certain meal or set of meals to be disallowed.
  - a. Click the **Disallow Infant Meals** or the **Disallow Non-Infant Meals** box to disallow meals for a specific age group. Checking neither box has the same effect as checking both boxes when you specify a date and meal range.

- b. Click the **Disallow Starting Date** and **Ending Date** boxes and enter the first date and last date to be disallowed. To disallow meals for one day only, enter the same date in these boxes.
- c. In the **Starting Meal** section, check the box next to each meal to disallow from the starting date through (but not including) the ending date.
- d. In the **Ending Meal** section, check the box next to each meal to disallow *on* the ending date.
- e. In the **Reasons** section, check the box next to each reason to apply to the disallowances.

**Note:** You can also disallow meals with the Disallow Calendar. To do so, check the **Use Calendar to Disallow** box and then click **Disallow Calendar**. For more information see, [Disallow Meals with the Disallow Calendar](#). You must select reasons and save your progress before opening the calendar.

8. Click the **Other** tab. Use this tab to record additional information about the review. None of the information in this tab is required, and it is not checked when processing claims. You can reference this information in certain reports.

**Add New Review** Shelley, Mary 998894 Review Date: 04/03/2019 Meal: Lunch

General Meal Disallow **Other**

Nutrition Info Left  
 Eligibility Changed  
 Can Claim Own Children  
 Special Diet Statement  
 New Address  
 Helper Present  
  
 Civil Rights Review Complete  
 Building For the Future  
 Voucher/Subsidy Children Present  
 Corrective Action  
 Whole Grains Served Daily

Left 4 Month Supply of:  
 Regular Menus  
 Infant Menus  
 Enrollment Forms  
 Other Forms

Day Care Child Count:   
 Own Child Count:   
 Own Child Eligible Count:   
 Own Child Ineligible Count:

Comments:  
  
 (Not printed on Sponsor Review Worksheet)

Block Claim Visit     Block Claim Validated

Date of Last Training on File:  Block Claim Reason:

Provider Tier:  Provider Tier Reason:

Provider Mixed Tier Determined by Parent's Income Eligibility

Checkbox 1                      Custom Date 1:   
 Checkbox 2                      Custom Date 2:

          

9. When finished, click **Save**.
10. Click **OK** at the confirmation prompt. At this point, you can click **Add Another** to add another review, or click **Close** to close the window.