Elements of Case Management: A Roadmap

17 June, 1998

Keith R. Prior
Analyst V
Healthy Start Field Office
UC Davis
Davis, CA 95616-8729
530.752.8468
apriori@ucdavis.edu

Contents

INTRODUCTION ...................................... 1
OUTREACH ........................................... 3
COMMUNITY EDUCATION ............................. 3
FOCUSED OUTREACH ................................. 3
INTAKE .............................................. 5
ASSESSMENT ........................................ 5
ELIGIBILITY ....................................... 5
MANAGING CASES ................................... 7
THE PROCESS OF PLANNING, OFFERING SERVICES OR HAVING SERVICES PROVIDED, AND FOLLOW-UP TO REASSESS AND REVISE PLANS. ........................................... 7
CASE PLAN ......................................... 7
INFORMATION & REFERRAL ........................ 7
DIRECT SERVICES .................................. 7
FOLLOW-UP & INFORMATION SHARING .......... 7
EVALUATION OF SERVICE OUTCOMES ............ 7
CASE PLAN REVISION ................................ 7
PROGRAM EVALUATION ............................. 9
REPORTING TO SPONSORS ........................ 9
REFLECTION ON PRACTICE ....................... 9
AUTOMATED SYSTEMS .............................. 11
AUTOMATED CASE MANAGEMENT .................. 11
PROGRAM EVALUATION & REPORTING .......... 11
SYSTEM INTEGRATION .............................. 11
DATA INTERCHANGE ............................... 11
Introduction

This is a work in progress.

In the following pages I am trying to lay out a rough map of the territory of Case Management. In doing this I am trying to define the generally agreeable terms found across all case management models.

While these terms are assembled in what may look like a glossary, they should not be construed to be tasks or as a list of “things to be done.” Each of these elements (with the exception of Automation) is required, in differing degrees, in making up a system of case management.

These components are all interrelated and interdependent. None of them will be worth much without the others.

Some of you may wish that I had included examples in each of these elements. These will be included in the next version of this document. So then, this should be considered as a very general guide to the territory of case management.

The interrelated and interdependent nature of these components can be presented in a visual way. To me it might look like the figure on the facing page.

This document was prepared with the text on the left, facing the related figures on the right. In this way you can make use of the figures for overheads without making enlargements. Feel free to make use of these materials as overheads or reprint this as you need. And, should you wish to use this material I can send you a text version of the file.

Since my plan is to continually revise and expand this document, I encourage your comments, suggestions, and additions.

Keith Prior
Case Management

Outreach → Intake & Assessment → Management of Cases → Evaluation

Feedback
<table>
<thead>
<tr>
<th>Outreach</th>
<th>The general purpose of outreach is to inform the community about the availability of services. The design of the services will have been grounded in the community needs assessment that took place during the planning for the collaborative.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Education</td>
<td>This is a general broadcast of information about assessed need and offered solutions.</td>
</tr>
<tr>
<td></td>
<td>The group of activities here probably looks a lot like marketing. It involves posters, presentations to community groups, door-to-door fliers and face-to-face interactions with people in the community in churches, storefronts, clinics, pool halls and wherever else the intended service population might congregate.</td>
</tr>
<tr>
<td>Focused Outreach</td>
<td>Information directed to potentially eligible individuals or families.</td>
</tr>
<tr>
<td></td>
<td>In this the goal is to have the information reach the specific population for which the service(s) are designed. This might involve going to specific places where the population is understood to be found. Unlike the broadcast of Community Education, this is focused by what is known about the population to be served, their habits, their culture, and the associated issues that confront the population.</td>
</tr>
</tbody>
</table>
The Community

Needs Assessment

General Information to Community

Community Education

Outreach

Client-Specific
| **Intake** | Intake has several forms. First there is the determination of the client’s strengths and needs and then there is the matching of the client’s needs and strengths to the services for which the client is eligible for those kinds of services for which an eligibility determination is required. |
| **Assessment** | Determining the specific needs and range of needs and strengths. In this the caseworker and the client work together to identify and define the client’s needs and assets, both obvious and latent. The case manager is acting as a facilitator to the service(s) being sought. |
| **Eligibility** | Determining the allowability of high-end services. The case worker, in matching the client to some high end services, applies the standards or criteria for eligibility and attempts to pre-determine the match between the client’s status or needs and the rules for accessing service(s). In this process the caseworker also examines the client’s strengths and assets to determine the extent to which advocacy is appropriate in obtaining other services that may not be available at the site. |
This probably looks more like a conversation where the staff and the client talk about needs, strengths, and goals in the context of the available services.
<table>
<thead>
<tr>
<th><strong>Managing Cases</strong></th>
<th>The process of planning, offering services or having services provided, and follow-up to reassess and revise plans.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case Plan</strong></td>
<td>Setting goals for treatment or services and a plan of action.</td>
</tr>
<tr>
<td></td>
<td>The caseworker and the client discuss and agree on a plan of action that is appropriate to the client’s needs and strengths and the eligibility determination.</td>
</tr>
<tr>
<td><strong>Information &amp; Referral</strong></td>
<td>Providing information and referring the client to services that match appropriate resources to client’s need(s).</td>
</tr>
<tr>
<td></td>
<td>The caseworker helps to prepare the client for the next steps, providing information, instruction, advocacy, and counsel in obtaining the services available through another agency, perhaps at another location.</td>
</tr>
<tr>
<td><strong>Direct Services</strong></td>
<td>Direct delivery of services matching appropriate resources to client’s need(s).</td>
</tr>
<tr>
<td></td>
<td>The caseworker provides direct service(s) to the client.</td>
</tr>
<tr>
<td><strong>Follow-up &amp; Information Sharing</strong></td>
<td>Contacting the client after a predetermined length of time to determine the outcome of the referral and the provision of services.</td>
</tr>
<tr>
<td></td>
<td>The caseworker and the client agree to contact one another after a specific period of time to see if the appropriate services have been rendered. This is the link to the revised case plan.</td>
</tr>
<tr>
<td></td>
<td>The case worker and the client agree on whether or not initial results will be shared and with whom; the case worker shares appropriate information with collaborative agencies about client services and follow-up.</td>
</tr>
<tr>
<td><strong>Evaluation of Service Outcomes</strong></td>
<td>Assessing the extent to which the available resources moved the client in the direction of the goals set out in the case plan.</td>
</tr>
<tr>
<td></td>
<td>This is the case worker and the client working together to look at the effectiveness of the services in meeting the goals set out in the case plan and may involve additional assessment and eligibility determination.</td>
</tr>
<tr>
<td><strong>Case Plan Revision</strong></td>
<td>Update the case plan and determine new goals and interventions.</td>
</tr>
<tr>
<td></td>
<td>Share revised case plan information with collaborative partners.</td>
</tr>
</tbody>
</table>
Managing Cases

Intake & Assessment → Case Plan

Information & Referral → Direct Services

Follow-Up

Evaluation

Case Plan Revision

Feedback

and/or and/or
<table>
<thead>
<tr>
<th><strong>Program Evaluation</strong></th>
<th>There are two principal reasons to conduct a program evaluation. The first is to inform the funding agencies or sponsors about the results of the case management activities and the second is to periodically reflect on how well the case management system works (and for whom it works).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reporting to Sponsors</strong></td>
<td>A summary of all managed cases or groups of cases, in an aggregate form, of activities, services, client characteristics, and changes in clients, services, and the community. This is a periodic report of managed cases to the funding or sponsoring agencies of the activities of the case workers aggregated across all services and clients. As an aggregate this reporting can determine the value of the program array to the collaborative stakeholders.</td>
</tr>
<tr>
<td><strong>Reflection on Practice</strong></td>
<td>Analyzing the characteristics of managed cases to discover characteristics of best practices and to reveal possible gaps in service. The reflective evaluation of managed cases consists of asking and answering specific questions about the caseload to determine if the cases being managed match the characteristics of the intended program plan, where there are strengths and weaknesses that require program adjustments, and what the value the program segments are to the types of clients being served.</td>
</tr>
</tbody>
</table>
Evaluation

Information from Managed Cases

Information System

Reporting

Reflection

To Funding Agencies for agency purposes

Informs Collaborative Partners about program strengths, weaknesses, processes, and outcomes.
**Automated Systems**

Up to this point all references to Case Management assume that the information flow is *at least* done with paper and pencil. No computer system is required to be able to provide case management or to conduct evaluations.

**Automated Case Management**

This is typically a computer-aided record-keeping system that tracks the flow of services and clients in the collaborative, facilitates follow-up, and may aid in carrying out program evaluation work.

This may involve a stand-alone computer, a network, or a manual manipulation of data between stand-alone computers.

It should not be assumed that an automated system will create a case management process for a site or reduce staff workload. It is often the case that with automation the workload changes and more can be accomplished.

**Program Evaluation & Reporting**

The automated case management system enables the case managers and the site coordinator to respond to the reporting and reflection-in-practice needs/requirements.

Minimally, such a system typically completes all the forms required by the funding agency and the collaborative partners. At an ideal it also allows the case manager and site coordinator to conduct specific analyses of the caseload.

**System Integration**

This addresses the extent to which multi-site projects share and use the same information about clients and services in and through an automated case management system.

This may be an automated process or managed by network services. It means that every site has the same information on all clients that all sites serve.

**Data Interchange**

Data interchange is the flow of information between and among the collaborative partner agencies (e.g., school system, welfare department, etc.) to facilitate the management of cases, and to prevent duplication of services. In all collaboratives there is a substantial commitment to share information in order to better serve the community without duplication of services and with a commitment to better integrate the provision of services. In this data interchange there is a gain in the efficiency of the assessment and eligibility processes.

This interchange can be either manual or automated.