P-2352 Reach Up Supervisory Case Reviews

Overview of Reach Up Supervisory Case Reviews (19-18)

Supervisory case reviews (SCRs) are completed by Reach Up Supervisors and used as a tool to promote best practice among Reach Up Case Managers.

Selecting Cases for Review

Each Reach Up Supervisor selects number of cases asked for by Central Office.

Reviews must be completed by the last business day of the month each month.

Cases should be chosen by the supervisor at random from every case manager in the district, including contracted case managers.

Choose different case manager's cases to review each month until everyone has had a case reviewed and continue in this manner.

Tracking SCRs

Log the review on the "Supervisory Case Review Tracking Sheet" located on the shared drive in the SCR folder (Y:\AHS ALL SHARE\ESD\SCR).

Scan or save the original document to the share drive.

Role of the Operations Director

District Operations Directors will choose 3 of the case reviews that the Reach Up Supervisor has completed to review and log that on the "Supervisory Case Review Tracking Sheet".

Use of Form 242CR-RU

Form 242CR-RU is completed by the Reach Up Supervisor for each Supervisory Case Review.

Identifying information

Date completed: Actual date the supervisor is completing the SCR.

Month of review: Should be same month as the date completed. Best practice is to review 4-6 months back in the case, or as long as the case manager has held the case if shorter than 4-6 months.

Intake (only for cases opened in previous 12 months)

Initial appointment scheduled within 30 days from the time the case manager was assigned the case.

Assessment process began in first 60 days: Case notes indicate case manager using an accepted assessment tool within the first 60 days of working with the participant.

Initial FDP signed and dated in file: 614 FDP

FSM (Family Support Matrix) updated with case manager perspective: Case notes indicate which FSM domains were discussed with participant. Case notes indicate case manager reasoning behind why certain domains are considered Strength, Neutral or Interfere.

Assessment

UNCOPE/PHQ2 (604SUPP): Completed during initial appointment or within 30 days of the initial appointment if not appropriate at first meeting. If not in file, case manager should complete. Can be rescreened if changes in participant's life warrant rescreen. Concerns should be followed up with referrals.

For new applicants who have already been screened with UNCOPE/PHQ2 in file, only do a rescreen if there is reason to believe things have changed, or to expect different screening results and the participant is willing to complete it again.

If participant is currently in treatment, screening does not have to be completed, but case notes should clearly indicate why screening was not done and what type of treatment participant is in.

Documentation of goal-setting tool: Case notes indicate an accepted tool (such as the Stepping Stones) was used to identify participant goals.

Evidence of participant driven goal setting: It should be clear in case notes that the goal-setting process and selection of goals for prioritization was participant driven.

FSM is current: S, N and I indicators match the latest information available from case notes. If certain domains have not been discussed, domain is left N for Neutral. Assessment Began Date does not need to be updated.

Family Development Plan

Signed and dated: Matches date signed in ACCESS.

Current: Includes at least one current activity.

Matches documented goal planning conversations in case notes: Activities include tasks and are written with strength-based language. When possible, goals use existing ACCESS activities, with specifics spelled out in the tasks.

Hand-written FDP matches ACCESS: Activity name, dates and hours.

Activities and support services

Participation code: The code in ACCESS is appropriate given the current needs of the participant and aligns with activities.

Realistic highest capacity: Goals include things that are achievable and move the participant forward while providing realistic and achievable levels of challenge. Goals are measurable and include a set timeline. Back-up person is identified to help hold the participant accountable.

Activities are up to date and reflect participant progression: Goals build on each other. Participant is making progress. When goal is not met, case notes indicate discussion on how to meet goal, or goal is changed.

Appropriate modifications/deferments: FDP includes activities to help improve or resolve identified obstacles. Appropriate codes are used. Deferments end on last day of month whenever possible.

Appropriate referrals: Case notes provide clear identification of services providers and next steps.

Appropriate use of support services, including incentives: Ensure support service discussions are in case noes and indicate when approved or denied. Documentation is available in case file—estimates, receipts, ACCESS check issuance.

Scheduled/verified hours entered: Timesheets are entered by the 12th of the following month. Participants are held accountable for late timesheets when appropriate. Hours are entered correctly.

Appropriate planning for transportation: Ensure transportation is addressed in case notes with use of transportation survey or other tools as appropriate. Good News Garage and Ready to Go resources are accessed when appropriate.

Contact with Participant

Evidence of key RU frameworks: Case notes reflect case manager’s knowledge of and use of key frameworks and best practices in conversations and actions with participant.

Frequency of contact meets intensity of need: Minimum of monthly contact with case manager, more as situation requires. Text messaging and email utilized when available.

Home/community meetings offered: Offered and participant preferences documented.

Case notes: Entered for each contact with participant. Notes are legible, up to date with no big gaps in time. Language is professional and relevant. Include summary of discussions around Reach Up requirements (for example: time limits, conciliation process, mandatory youth, young child deferments). Good cause and use of excused absences are noted. Participant's goals and plan should be clearly stated in notes.

Conciliations, sanctions and 60-month closures

Good Cause: Pursued and documented, if good cause is found conciliation/sanction is removed.

Conciliation forms: Resolution matches reason for conciliation.

Sanction forms: 606 is signed and dated; Reasons letter is available. Sanction entered into ACCESS

Timeframe followed: 10 days to determine good cause; 10 days if verification of good cause reason is needed.

Miscellaneous

CATN notes used appropriately.

Case file maintenance: Documents are in appropriate brads and in chronological order.

Appropriate Releases of Information have been obtained for all appropriate referrals and other community partners.

TODOs in ACCESS are up to date.

Next Steps/Due Date section of the spreadsheet. Issues in need of follow up are noted. For example, no UNCOPE or PHQ2 was found in the file. This should be highlighted as a next step with a due date for the Reach Up Supervisor to follow up on.