

HCP-C

MODULE 4

Case Management





CASE STUDY

HOP-C Case Management Example

HOP-C case management was delivered through a psychosocial rehabilitation model and rooted in a strengths-based approach. This type of approach requires relational work and is structured as a partnership between the participant and the case manager that focuses on personal strengths and goal attainment. It requires a great deal of relational work that is culturally sensitive, trauma sensitive and trauma informed. HOP-C had two case-managers from two organizations, LOFT Community Services and Covenant House Toronto, that worked together in a team-based model with the clinical psychologist and the peer team. Its key components include care coordination, life skills assessments, crisis intervention or prevention and advocacy in various settings.



HOP-C North Case Management Example

HOP-C North case management prioritized relationship building with each youth first, and case management second. This was reflected in the language used, as case managers were called “Youth Coordinators” to ensure that each youth felt autonomous in their decision-making. This autonomy was also reinforced through the adaptive nature of the youth coordinators’ roles. Their job description remained fluid as a means to best support the needs and services required of each individual youth. For example, many Indigenous youth fear accessing community services due to chronic experiences of racism in such environments. As such, not only did youth coordinators support youth to connect to the necessary services, they also provided a protective role within this service engagement. The youth coordinators maintained their prioritization for relationship building by continuing to engage with youth regardless of the need for service access or typical case management services. As many Indigenous youth have had dozens of different workers involved in aspects of their care since early childhood, the HOP-C North youth coordinators aimed to demonstrate consistency, nurturance, patience, and respect to each youth they worked with. This allowed youth to navigate their daily lives knowing they could reach out to access the support of a youth coordinator, without feeling any sort of obligation. Each youth coordinator also met the youth where they were at in terms of their cultural engagement. This included providing the opportunity for access to cultural services and access to an Elder whenever needed. Youth had the choice of how and when they would engage with the cultural programming available.

VALUES AND PRINCIPLES

Case management is a key component of a collaborative intervention and in many ways, case managers are the glue that hold the whole intervention together. Good quality, client-driven case management is so important for a few reasons:

1. Case managers are often the first point of contact for an intervention and play an important role in client engagement.
2. Case managers help the client navigate the various components of the intervention and thereby integrate and connect the elements of the intervention together.
3. Case managers are well positioned to reflect on how successful the intervention is in helping clients reach their goals and therefore play an important role in design, implementation, and evaluation.

The style and approach may differ depending on the home agency, but we recommend a case management approach that is:

1. Goal oriented and client-centered , and flexible: This means helping clients to develop a list of their own goals and supporting them in achieving those goals, and incorporating flexibility in approach to meet individual needs
2. Wraparound: This means a case management approach that is proactive and mobile, and that aims to create a circle of support around the individual.
3. Integrated team delivery: No one can do it alone – by creating and fostering a strong team environment case managers should have other team members to approach for troubleshooting client challenges or responding to crises.
4. Case management delivery is consistent as a means to provide a source of stability to clients who may be otherwise used to inconsistent engagement with past services.

WORKSHEET 1

Identifying a Case Management Philosophy and Approach

This worksheet should be filled out by all members of the case management team and discussed as a means of identifying strategies and approaches. Also consider discussing the worksheet at a team meeting in order to clarify the role within the broader team. The goal is not necessarily to ensure all case management is being delivered in exactly the same way but that the approaches within the team are compatible and align with the goals and values of the intervention.

1. *Is there a particular model that informs your approach?*

2. *Check what values/objectives are most important to your role*

- | | |
|---|--|
| <input type="checkbox"/> Structure and Accountability | <input type="checkbox"/> Coordination of services |
| <input type="checkbox"/> Goal setting | <input type="checkbox"/> Fostering independence |
| <input type="checkbox"/> Anti-oppressive practice | <input type="checkbox"/> Housing stability |
| <input type="checkbox"/> Life skills development | <input type="checkbox"/> Ensuring basic needs are met |
| <input type="checkbox"/> Empathy and compassion | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Emotional support | <input type="checkbox"/> Counselling/Psychotherapy |
| <input type="checkbox"/> Systems navigation | <input type="checkbox"/> Crisis support |
| <input type="checkbox"/> Referral | <input type="checkbox"/> Consistency |
| <input type="checkbox"/> Mentorship | <input type="checkbox"/> Supporting cultural/spiritual needs |
| <input type="checkbox"/> Friendship | |
| <input type="checkbox"/> Community connection | |

3. *Now pick your top 5 values/objectives from the list above and do your best to rank them starting with the most essential.*

Most essential:

2nd:

3rd:

4th:

5th:

4. In an ideal situation do you see case management as an indefinite or time limited? Discuss the rationale behind your answer.

1. What goals do you expect to achieve with case management? How does your time frame influence your ability to achieve these goals?
2. If the preferred approach is time limited, discuss the ideal end point to a client relationship. How does that ideal end point align with the structure and timelines of the proposed intervention?
3. If time-limited, what is the plan for hand-off and transitioning out: [We recommend starting these conversations 1 month in advance]

5. What is your plan for engaging/contacting low/non-engagers?

6. What are the agreed upon targets for the program (if any)?

1. The expected number of face to face interactions, level and type of contact?
2. Discuss strategies to maximize engagement and establish realistic expectations for participation and engagement for the population involved with the program.

WORKSHEET 2

Integration and Communication

List the components within the intervention and discuss what role the case managers will play in the delivery of that component

Component 1: Mental Health Component

Role played by Case Management Team:

Case managers will make referrals and provide warm introductions for any clients looking for mental health support; case managers will promote and advertise the mental health group; case managers and psychologist will case conference together around client needs and troubleshooting.

Component 2: Peer Component

Role played by Case Management Team:

Case managers will invite peers to welcome meeting; continue to make warm transfers. Supporting peers in ongoing connections and work with clients.

Component 3: Agenda Planning for Case Conferencing Meetings

Role played by Case Management Team:

Consider these prompts when case conferencing with other components

- Status on Housing: updates regarding housing/landlord issues/rent increase
- Mental Health: Medication changes, changes in mood or behaviour, interventions or tools used (e.g., crisis plans)
- Community Resources/Other Supports: updates regarding pre-existing community/clinical supports
- Presenting Issues: legal involvement, family dysfunction, etc.
- Engagement Level: Community or program engagement
- Goals: progress, challenges
- Client feedback: general comments about the program

WORKSHEET 3

Case Management Troubleshooting

With all members of the collaboration, review these common scenarios and make a plan for how you can plan ahead for these complex situations:

1. *Clients are calling/texting the case manager's phone in the middle of the night in crisis*
2. *A client is showing signs of psychosis*
3. *A client is clearly interested in the intervention and would benefit but seems reluctant to engage for unknown reasons*
4. *A client continues to need support beyond the intended time frame of the intervention*
5. *A client is expressing suicidal ideation*
6. *A client is doing things to trigger other clients in drop-in or group programming*
7. *A client and case manager are having trouble connecting and building rapport*
8. *A client is under the influence of drugs or alcohol when out in the community with the case manager and acting in disruptive ways*
9. *A client is expressing distrust in an organization*
10. *A client does not want to attend programming in certain locations or buildings*
11. *The case manager finds out the client is engaging in illegal activity*
12. *Clients within the intervention are having a conflict with each other that is affecting their ability and willingness to engage*
13. *A client does not meet criteria for joining the program. How does the team respond overall? What does the referral process look like? Are partners prepared to accommodate the individual elsewhere? (other programs offered)*
14. *A client has mobility issues that interfere with their ability to access aspects of the program – i.e. Participant is bedridden but interested in accessing psychotherapy?*
15. *A client has pre-existing supports but wants to engage, how do we integrate with those supports in a way that avoids duplication of service?*

For each scenario, consider:

1. *Safety for the client is a primary concern. What steps need to be taken to ensure they are safe and free from harm?*
2. *Safety and support for the case manager is equally important. Are there policies and self-care plans in place to protect the well-being of the case manager? Who is available for support in difficult or crisis situations?*
3. *Professional standards only require that case managers report criminal activity to the police in situations where there is a risk of immediate harm to self and others.*
4. *Think about basic needs. Are basic needs being met and how might concerns about basic needs be feeding into or complicating these scenarios?*
5. *How can we leverage the team to support in these situations and what supports might be available within the partner agencies' networks?*



HOP-C North

During a group event one evening while staff were facilitating a cultural based life-skills program; a youth noticed an altercation erupted outside between an unknown male and female in well-known high risk area of town. The male was pulling the female by her feet down the sidewalk. The youth alerted the group which all participants ran to the window to watch the altercation. A female youth began to cry while witnessing the event. What are important factors to consider in this scenario?

WORKSHEET 4

Goal Setting Tool

Goal Scaling

Goal Attainment Scaling Instructions

Please have each client complete goal attainment scaling for 3-5 specific goals. Help the client identify what achieving each goal would look like, what surpassing the goal would look like, and what not meeting the goal would look like in practical and concrete terms.

Here are a few examples:

| In the next 6 months:

1. *Work: My goal is to work 20 hours a week*

- Not quite achieving my goal would look like:**
Working only occasional hours or not having stable employment
- Achieving my goal would look like:**
Having a stable part-time job where I am working 20 hours a week on a regular basis
- Surpassing my goal would look like:**
Working 25-40 hours a week on a regular basis; Working 20 hours a week on a regular basis in a job I really enjoy (e.g., Starbucks)

2. *Finances: I would like to repay \$600 of debt in 6 months*

- Not quite achieving my goal would look like:**
Saving less than \$50 per month or not being able to contribute to debt repayment
- Achieving my goal would look like:**
Saving \$100 a month and using it for debt repayment
- Surpassing my goal would look like:**
Saving \$120-\$150 a month and using it for debt repayment


3. *Housing: I would like to maintain my current housing for the next 6 months*


- Not quite achieving my goal would look like:**
Losing my apartment without having a move out plan
- Achieving my goal would look like:**
Maintaining my current apartment for the next 6 months or if I need to move, having a concrete plan for changing housing
- Surpassing my goal would look like:**
Maintaining my housing and making my bedroom my own space


MY “TO DO LIST”: Master Goal Sheet

| Home Life & Housing

- Details (Why / Challenges):
- Steps (Where & How):
- Timeframe (When):
- Worker Providing Support:


 **Not quite achieving my goal would look like:**


 **Achieving my goal would look like:**


 **Surpassing my goal would look like:**

| School

- Details (Why / Challenges):
- Steps (Where & How):
- Timeframe (When):
- Worker Providing Support:


 **Not quite achieving my goal would look like:**


 **Achieving my goal would look like:**


 **Surpassing my goal would look like:**

| Work




- Details (Why / Challenges):
- Steps (Where & How):
- Timeframe (When):
- Worker Providing Support:

 **Not quite achieving my goal would look like:**




 **Achieving my goal would look like:**

 **Surpassing my goal would look like:**




Finances

- Details (Why / Challenges):
 - Steps (Where & How):
 - Timeframe (When):
 - Worker Providing Support:
-  **Not quite achieving my goal would look like:**
-  **Achieving my goal would look like:**
-  **Surpassing my goal would look like:**

Health (Mental Health, Physical Health, Spiritual Health)


- Details (Why / Challenges):
 - Steps (Where & How):
 - Timeframe (When):
 - Worker Providing Support:
-  **Not quite achieving my goal would look like:**
-  **Achieving my goal would look like:**
-  **Surpassing my goal would look like:**


Personal & Social


- Details (Why / Challenges):
 - Steps (Where & How):
 - Timeframe (When):
 - Worker Providing Support:
-  **Not quite achieving my goal would look like:**
-  **Achieving my goal would look like:**
-  **Surpassing my goal would look like:**

HOP-C Program Goals

- Details (Why / Challenges):
- Steps (Where & How):
- Timeframe (When):
- Worker Providing Support:

 **Not quite achieving my goal would look like:**

 **Achieving my goal would look like:**

 **Surpassing my goal would look like:**

My Team (Social and Professional Supports):

Date Reviewed (Mid-point Review):

Date Reviewed (End date):

Areas for improvement / What I excelled at:

WORKSHEET 5

List of External Incentives

We found that external incentives can be a valuable way to improve engagement with case managers, to demonstrate caring, and to support client needs. Here we provide an opportunity to brainstorm a list of incentives that might be available to the collaboration. To help the process we offer our own suggestions, as well as space to consider your own ideas. In generating this list and thinking about sourcing consider agency resources within the collaboration, resources outside the collaboration, local businesses, and charities that might be supportive.

Consider

1. Bringing incentives to the first meeting – consider crafting as a “Welcome Basket” composed of small items that might be helpful or appealing (e.g., small journals, pens, socks, grocery gift cards).
2. Think about small external incentives that can be offered at each subsequent meeting as a way of supporting the relationship.
3. Try to find out if there are incentives that are particularly meaningful for the participant. The goal setting tool can help in identifying potential incentives. E.g. “Learn how to cook a meal”- provide the participant with cookware or ingredients to complete their meal of choice.

List of Potential Incentives

1. Food bank items
2. Clothing (socks, etc.)
3. Household cleaning supplies
4. Furniture and décor
5. Self-care supplies (tea, journals, stationary, soaps, etc.)
6. Coffee and Snacks
7. Transit Tokens/Tickets
8. Movie tickets
9. Own ideas: