

Case Management Series: Service plans, Documentation, and Exit Planning

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Sponsored by the Department of Economic Opportunity

The Florida Housing Coalition, Inc., is a nonprofit, statewide membership organization whose mission is to **bring together housing advocates and resources so that all Floridians have a quality affordable home and suitable living environment.**

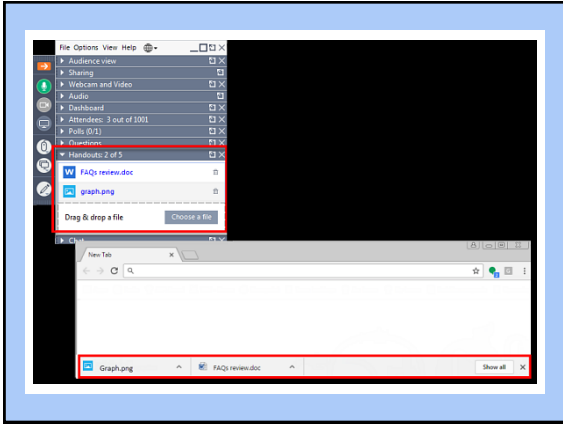


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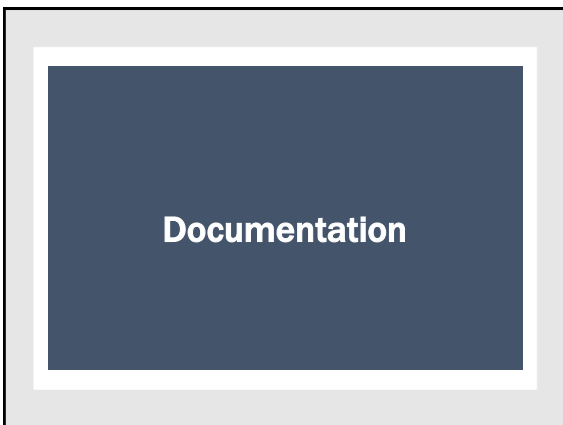
In the areas of affordable housing, fair housing, ending homelessness, & related issues

Webinar Logistics

- Participants are muted
- Enter your questions in the box in your webinar panel
- Handouts are available with this webinar
- Forgot to ask a question or want to ask privately?
Email me at rosado@flhousing.org
- This webinar is being recorded and will be available at www.flhousing.org
- A survey will immediately follow the webinar; **please** complete it! Thanks!







What system do you use?

- A. HMIS
- B. HMIS & Another System
- C. Case Management Software
- D. Electronic Health Records
- E. Other



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Documentation Should Be...

- ✓ Strengths-Based
- ✓ Person First
- ✓ Specific
- ✓ Objective
- ✓ Non-Clinical



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Strengths-Based Language

FOCUSED ON BARRIERS

- Non-compliant
- Lacks insight
- Stubborn
- Manipulative
- Attention-seeking

FOCUSED ON STRENGTHS

- Not open to...unwilling to
- Does Not Agree
- Really trying to get help

*PCRP Language Handout
 *Ally's Guide

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Person First Language

INCORRECT

- Schizophrenic
- Addict
- Mentally Ill
- Disabled
- Homeless

PERSON FIRST

- Person with schizophrenia
- Person with addiction
- Person with a mental health diagnosis
- Person with a disability
- Person experiencing homelessness



Specific and Objective



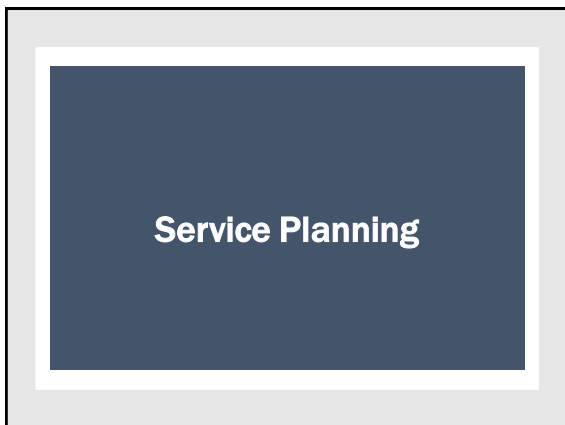
- **Specific:** Be clear so an outsider could read the note and understand
 - CM will follow up on birth certificate
 - CM will contact the clerk at DOH to check on the status of the birth certificate applied for on 3/22
- **Objective:** Impartial and Unbiased
 - Avoid "I think"
 - State matter of fact what the client said or did

Non-Clinical

- Do not use clinical terms if you are not a clinician
- Use plain language
 - Decompensating v. Experiencing symptoms of illness/addiction
 - No need to go into affect/mood unless it is necessary

Client Visit Record			
Client Name:	Mary Lamb	Date:	12/02/2017
Type of Contact:	Home Visit	Time:	3:30pm
Kept/Missed/RS	Kept	Length of Visit:	30
Subject:	Housing Stabilization		
Note:	CM met with CL for a scheduled home visit.		
Previous Actions:	-CL followed up with New Horizons and enrolled in the employment program. CL's first day will be on 01/08. New Horizons will provide transportation.		
Actions:	-CL requested a referral for the UCC food pantry. CM will fax a referral to UCC tomorrow.		
	-CM scheduled an office visit for 12/18/2017 at 9:00am. CM provided 2 bus tickets for an upcoming medical appointment.		
	Amanda Rosado, CM		
Goals Addressed:	Employment; Housing Stability; Transportation		
Signature:		Date:	





Consumers lead, control, exercise choice over, and determine their own path of recovery by optimizing autonomy, independence, and control of resources to achieve a self-determined life. By definition, the recovery process must be self-directed by the individual, who defines his or her own life goals and designs a unique path towards those goals. (SAMHSA, 2011)



Assessments and Planning



- Assessments should lead us right into the planning process.
- Assessments help us answer the questions:
 - Why are they here? (Housing)
 - What do they want?
 - What are the solutions?

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Types of Planning

01

Crisis Planning
• To be used when the client is in crisis at time of assessment

02

Action Planning
• After assessment, the action plan is comprised of client/program goals

03

Exit Planning
• Starts at the beginning of the CM process; Details the process of exiting CL from the program



Crisis Planning - In Crisis

- Get the person safe
 - Where can they stay?
- Do they need medical attention?
 - What hospital do they prefer?
- Do they need mental health crisis services?
 - Know your mental health crisis providers
 - Assess for suicide risk

Crisis Planning - Proactive

- How will you know you're in crisis?
- Who should be contacted?
- What information is okay to share with your support system?
- How have you coped with crisis before?
- What does not work?

*[Crisis Plan Example](#)

Exit Planning - Outcomes?

Shelter	RRH	PSH	MH Program
-Housing is obtained	-Housing is stable -CL feels they can sustain rent on their own -Services are no longer needed -HH paying no more than 50% of income toward rent	-Housing is stable -Intensive support services are no longer needed -Another subsidy becomes available	-Step down into lower MH case management -Maintaining treatment on their own; CM is not needed

Action Planning

- Goal setting with outcomes in mind
- Solicit client goals; what resources do they have?
- Reviewed Regularly
- Not a formality; tailor made



Microsoft Word
Document

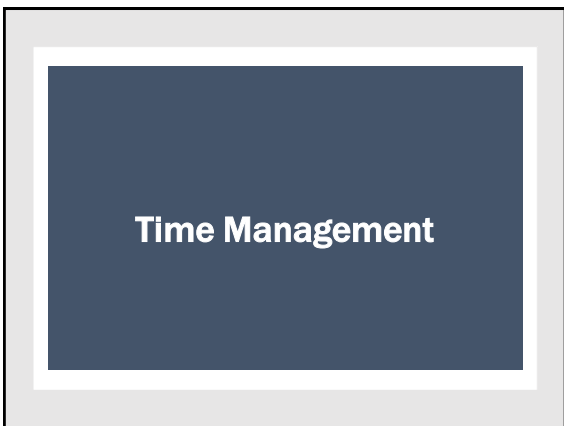


We are not good predictors of success














New Case Timeline

- Coordinated Entry referral immediately
- File Created – Within 3 business days of assessment
 - See Handout “Intake Progress Note”
- Action Plan – Within 1-2 weeks of assessment
- Ongoing Case Notes – Written and Filed within 3 business days



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Other Timelines

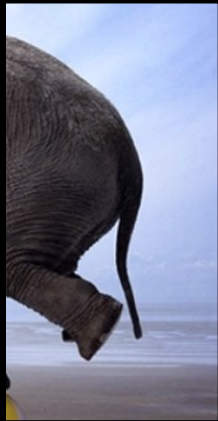
- Staffing – Weekly
 - See Handout “Staffing Form”
- Audits – Supervisor 4 files/month
- Personal Supervision – Monthly
- Group Supervision - Monthly



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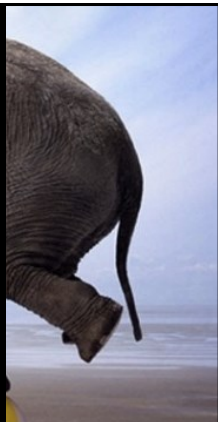
PRO TIPS

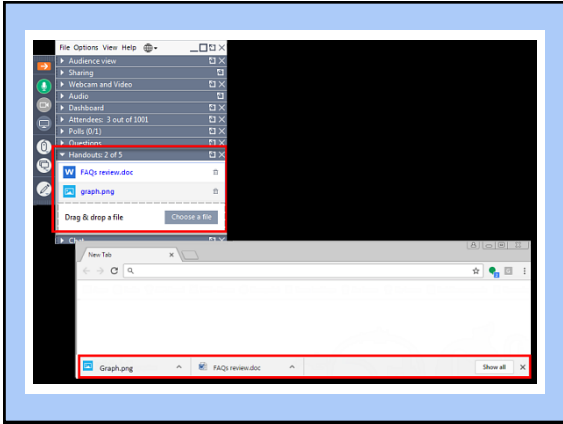
- ✓ Document Concurrently
- ✓ Schedule Appointments early in the day
- ✓ Plan the day before (print out what you need)
- ✓ Schedule “To Dos” in your calendar
- ✓ Objective-Based Visits
- ✓ Right-sized Case Loads



PRO TIPS

- ✓ Block out time on your calendar
- ✓ Take breaks when you need them (lunch break)
- ✓ REST when you are sick
- ✓ Take a mental health day
- ✓ Commit 1 hour per week to personal and professional development





Resources

- www.orgcode.com – OrgCode Consulting
 - Creator of the VI-SPDAT, SPDAT
 - Housing Based Case Management Forms (Crisis Plan, Exit Plan, etc.)
- www.endhomelessness.org – National Alliance to End Homelessness
 - Rapid ReHousing Toolkit
 - Emergency Shelter Webinar Series
 - Lots of resources for system performance, coordinated entry, etc.
- <https://www.hudexchange.info/homelessness-assistance/>
 - CoC/ESG rules
 - Coordinated Entry resources
 - Grantee information for your CoC and community
- www.usich.gov – United States Interagency Council on Homelessness
 - Tools (H1 Assessment Tool, Federal Resource guides and Fact Sheets)



Case Management Series

- 2/15/2018 - [A Collaborative Approach to Ending Homelessness: Finding Your Role](#)
- 3/1/2018 - [Introduction to Working with Special Populations](#)
- 3/15/2018 - [A Trauma-Informed Approach](#)
- 4/5/2018 - [How to Work with Difficult Cases](#)
- 4/26/2018 - [Self-Care for Human Service Workers](#)