

Green Apple Counseling

1500 10th Ave S. Ste 200 Great Falls MT, 59405 Phone: 406-866-0350

POLICY: CASE MANAGEMENT

PURPOSE: To provide guidance and expectations for adult and child targeted case management.

SERVICES:

- Case management services assure healthy outcomes by assisting recipients to access needed services and by coordinating between all agencies and providers responsible for service delivery.
- Case Manager's responsibility:
 - is to advocate for the client in involuntary commitment proceedings
 - Resolve conflicts between client and other agencies
 - Advocate for services inside or outside of Green Apple, whatever is in the best interest of the client
 - Mediate between mental health provider and clients
 - Maintain confidentiality
 - Contact advocacy organizations in behalf of client.
- Case Management Services will be outside the office, at least, 50% of the time and at the convenience of the client.
- Case management" means the process of planning and coordinating care and services to meet individual needs of a client and to assist the client in obtaining necessary medical, social, nutritional, educational, and other services.
 - Case management includes assessment, case plan development, monitoring, and service coordination. Case management provides coordination among agencies and providers in the planning and delivery of services.
- A case management plan sets goals for meeting a client's needs and where appropriate the needs of the client's caregivers and identifies the means for

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implementing those goals with emphasis on the self-sufficiency of the client and caregivers in obtaining services.

- Case management services are available to persons who are determined by the department as those on Medicaid with:
 - high risk pregnant women
 - adults with severe disabling mental illness
 - persons age 16 and over with developmental disabilities
 - youth with serious emotional disturbance
 - children at risk for abuse and neglect
 - children with special health care needs.
- Case management services will be offered but is not required to continue with other services at Green Apple.
 - The availability of targeted case management services may not be made contingent upon a client's willingness to receive other services.
 - A client suspended or excluded from other programs or services provided by the mental health center may not be restricted or suspended from targeted case management services solely due to the action involving the other program or services.
- Case management will be independent of other services for the client.
- Each client will have a Plan of Care that contains the following:
 - designation of the case management service provider
 - Treatment Team members
 - specification of roles and responsibilities each case management service provider is to undertake
- Targeted case management services for youth with SED must be supported by narrative documentation in accordance with ARM 37.85.414 record keeping requirements.

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- Case management plans for youth with SED must be completed within the first 21 days of admission to targeted case management services and updated at least every 90 days or whenever there is a significant change to the youth's condition. The case management plan must:
 - use the standardized assessment tool approved by the department to determine the appropriate level of service intensity needed by the youth and the youth's family or caregivers
 - incorporate standardized assessment tool findings into the plan
 - support continued benefits from TCM reflected in youth service planning
 - reflect the least restrictive and appropriate level of care
 - identify the strengths of the youth and the youth's family or caregivers
 - include a crisis response plan
 - include a plan for each youth age 16 1/2 and older to transition to adult mental health services; and
 - include a discharge and transition plan from targeted case management services.
- Upon admission to TCM services and prior to all treatment team meetings of TCM services, the targeted case manager shall meet face-to-face with the client or client's family or caregivers to complete a family treatment team meeting preparation checklist and questionnaire. If the meeting cannot be accomplished face-to-face, the targeted case manager shall document in the client's file the reason for conducting the meeting through phone contact or telehealth. The checklist and questionnaire must contain and document the following components:
 - explanation of the purpose of the treatment meeting and documentation of the client's family or caregivers understanding
 - identification of natural supports in the youth's life

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- a notice to the client/client's family that the treatment plan shall be delivered at times and in locations that are flexible, accessible, and convenient to the client.
- evaluation with the client or client's family or caregivers to identify and address risks and safety concerns at home and in the school and in the community; and
- evaluation with the client or client's family or caregivers to identify strengths that can be used as the basis of the treatment plan in the areas of school, vocational, family, social, and community functioning as well as towards meeting developmental skills and abilities.
- Individual treatment plans and those participating in treatment team meetings must:
 - use language that is understandable to the youth and the youth's family or caregivers and, where necessary, translate clinical terminology including but not limited to diagnoses and acronyms into language that is understandable; and
 - actively seek to understand and demonstrate respect for the unique and diverse backgrounds of the youth and the youth's family or caregivers including but not limited to roles, values, beliefs, races, ethnicities, sexual orientations, gender expressions, gender identities, languages, traditions, communities, and cultures.
- individual treatment plans must include:
 - identification of natural supports or treatment goals intended to develop natural supports; and
 - a crisis plan that identifies safety concerns, potential crises, triggers, de-escalation and coping strategies, actionable stabilization steps, prevention measures, and identified supports of the youth and the youth's family or caregivers.

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- Targeted case management providers shall share measurable outcomes with client and/or family with the youth and the youth's family or caregiver baseline and updated outcome measurements including measurements of the youth's emotional and behavioral functioning, living situation, school outcomes, risk of harm to self or others, substance use, and progress toward individualized goals.
- Targeted case management providers shall meet with the client and/or family at least every 90 days for the purpose of sharing this information.

Discharge from Targeted Case management:

- a client must be discharged from targeted case management services when treatment plan goals have been met,
- when the client no longer desires targeted case management,
- when the client no longer meets the criteria for entry into targeted case management services.