

Case Management Quality Assurance Evaluation Tool

(HELENA INDUSTRIES CASE MGT.) (Region 4) FY 2009

AT THE AGENCY:	CASE MANAGER:	1	2	3	4	5	6	7	8
	Criteria Reference:								
Case Manager attendance at Incident Management Committee meetings for previous 12 months (+ = 90% to 100% attendance of scheduled meetings; - = Less than 90% attendance)	DDP Incident Mgmt Policy								
Caseload average size per FTE (prorated for less than full time employees, 2 files for Case Management Supervisor). (+ = Individual Case Manager has caseload of 35 or below; or Corporation's average CM caseload is 35 or less; - = Corporation's average CM caseload exceeds 35)	Contract			35		35.6	36	36	
Case Manager Qualifications (+ = Exceeds Standard qualifications; BA or BS in Social Work or related field + 1 year experience, or 5 years DD-like experience; - = Standard qualifications not met)	Contract, ARM 37.86.3606			BS + <1 yr exp		BS +2yrs	5 yr exp.	BA + <1yr exp.	
Case Manager Experience (Review once per individual Case Manager, Not Applicable if reviewed in a previous year) (+ = More than 1 year DD experience upon hire; or 1 yr DD exp. upon hire, or 40 hrs of DDP approved training within 3 months of hire; - =Standard qualifications not met)	Contract, ARM 37.86.3606			20 hrs within 1 mo of hire		2 Yrs	7yrs (incl 5 above)	20 hrs within 1 mo of hire	
Case Manager New Hire Training (+ = Documentation of PSP training with 30 days of hire, 1 st available MONA training; - = Standard not met)	Contract			Mona 5/28/09, PSP not yet scheduled		1 st Available	Within 30 days	Mona 5/28/09, PSP not yet scheduled	
Case Manager Annual Training, Includes Abuse Prevention and MONA Recertification annually (Refer to Case Management Training List) (+ = More than 20 hours/year of DDP approved training; or = 20 hours/year of DDP approved training; - = less than 20 hours/year of DDP approved training)	Contract, Waiver, ARM 37.86.3606			NA, new hire		27.5	31	NA, new hire	
<p>Comments: SPT and CM have been employed by Helena Industries Case Management for approximately 1 month. Both of these individuals have degrees, but less than 1 yer of DD experience. Both are working on meeting the qualification standard by acquiring 40 hours of training within 3 months of hire. Both individuals have 20 hours of training within 1 month of hire.</p>									

INDIVIDUAL CONSUMER FILES: Review 10 % sample per Case Manager. If available, review equal number of files of individuals receiving Case Mgmt only, and of individuals receiving Residential and/or Day/Work services for a total of 4 files per FTE for the average caseload of 35. Pro-rate for part-time Case Managers and Case Mgmt Supervisor.	CONSUMER:	CM 1.1	CM 1.2	DDS 1.1	DDS 1.2	CM 2.1	CM 2.2	DDS 2.1	DDS 2.2	CM 3.1	CM 3.2	DDS 3.1	DDS 3.2	CM 4.1	DDS 4.1	DDS 4.2	DDS 4.3	CM 5.1	CM 5.2	DDS 5.1	DDS 5.2	CM 6.1	CM 6.2	DDS 6.1	DDS 6.2	CM 7.1	CM 7.2	DDS 7.1	DDS 7.2	CM 8.1	DDS 8.1	
Referral for DD Case Management	Contract, CM Handbook, Referral Manual;	na	na	na	na	+	na	na	na	na	na	na	na	+	na	na	Na									Na	na	Na	Na	na	na	
+ = Initial contact with 6-10 working days from date of referral; - = Initial contact in excess of 10 working days from date of referral																																
Request for DDP Eligibility (Complete referral includes recent psychological with standard IQ scores, adaptive assessment or documentation of coordination with QIS to complete Vineland II, cover letter requesting eligibility.)	Contract, CM Handbook, Referral Manual	na	na	na	na	+	na	na	na	na	na	na	na	+	Ja	na	Na	Na									Na	na	Na	Na	+	na
+ = Complete eligibility information submitted to QIS, - = Incomplete referral information																																
Initial Referral for Services (Gather information throughout the year using the Referral File Checklist)	Referral Manual, ARM 37.86.3605	na	na	na	+	na	na	na	+	+	na	na	na	Na	na	Na	Na									Na	na	Na	Na	+	na	
+ = Complete Referral Packet submitted to QIS; - = Referral Packet returned to CM for additional information																																
Referral Updates (Gather information throughout the year using the Referral File Checklist, also reference Case Notes and Plan of Care)	Referral Manual, CM Handbook	na	+	+	na	na	na	na	na	na	+	na	+	Na	na	Na	Na									+	na	na	na	+	na	
+ = Annual Update (365 days or less); - = Update exceeds 365 days																																
Facilitate Consumer Choice (provider selection and enrollment)	Contract, Waiver	+	+	+	+	+	na	- >2 days	- >3 days	+	+	+	+	Na	+	+	+									na	na	+	- >6 days	na	+	
+ = Completed Waiver 5 with 365 days of previous Waiver 5, documentation of follow-up if needed; - = Signed Waiver 5 exceeds 365 days of previous Waiver 5, lack of needed follow-up																																
Inform Consumer/Guardian of Available Waiver Services	Waiver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+									+	+	+	+	+	+	
+ = Evidence of definition of waiver services made available to Consumer/Guardian; - = Lack of documentation available.																																

	CONSUMER:	CM 1.1	CM 1.2	DDS 1.1	DDS 1.2	CM 2.1	CM 2.2	DDS 2.1	DDS 2.2	CM 3.1	CM 3.2	DDS 3.1	DDS 3.2	CM 4.1	DDS 4.1	DDS 4.2	DDS 4.3	CM 5.1	CM 5.2	DDS 5.1	DDS 5.2	CM 6.1	CM 6.2	DDS 6.1	DDS 6.2	CM 7.1	CM 7.2	DDS 7.1	DDS 7.2	CM 8.1	DDS 8.1
Assess and Assure Training in Abuse, Neglect & Exploitation Reporting is provided as needed	Contract	+	+	+	+	+	+	+	+	+	+	+	+	*	+	+	+									+	+	+	+	+	+
+=Pre-Plan of Care information documents individual's ability to recognize and report A/N/E & training, as needed, addressed in Plan of Care; -=No documentation of assessment, or training, if needed in Plan of Care.																															
Individual Cost Plans	Contract, CM Handbook	na	na	+	+	na	na	+	+	na	na	+	+	N A	na	+	+									na	na	na	na	na	na
+=Evidence of Initial ICP development; -=Evidence of significant change in need but no follow-up by CM to ICP																															
Initial Plan of Care (ISP or PSP)	PSP Manual, ARM 37.86.3605 & 37.86.3606	na	+	na	na	- in process	na	na	na	+	+	na	na	+	na	na	na									na	na	na	na	na	na
+=Initial Plan of Care developed within 30 days of enrollment of services; -=Plan of Care exceeds 30 days, or is not based on documented needs																															
Annual Plan of Care (ISP— individual receiving Case Management only)	ARM 37.86.3305, Case Management Handbook	+	na	na	na	na	+	na	na	na	na	na	na	N A	na	na	na									- > 22 days	+	na	na	na	na
+=ISP developed within 365 days of previous plan with goals for referral/access of needed services; -=ISP development exceeds 365 days from previous plan, does not address identified needs.																															
Coordination for Annual Plan of Care (PSP)	PSP Manual; PSP Implementation Policy	na	na	+	+	na	na	+	+	na	na	+	+	N A	+	+	+									na	na	+	+	na	+
+=TCM assures Pre-Plan of Care information gathering and dissemination meets timelines; -=Timelines exceeded for info gathering & dissemination																															
Annual Plan of Care (PSP)	PSP Manual, ARM 37.86.3605 & 37.86.3606	na	na	+	+	na	na	+	- > 3 4 days	na	na	- > 5 days	+	N A	+	+	+									na	na	+	- > 6 days	na	+
+=Plan developed within 365 days of previous plan, follow-up required per PSP Checklist addressed within 30 days; -=Plan date exceeds of 365 days from previous plan, no follow-up to areas identified on PSP Checklist																															
Plan of Care Supporting Documents (Interview with Individual/People Who Know Individual Best/Support Staff, Personal Finance, Risk Factors for Health & Safety, Health & Safety)	PSP Manual; PSP Implementation Policy	N a	N a	+	+	+	na	+	+	na	na	+	+	N A	+	+	+									na	na	+	+	na	+

