

CFP TECHNICAL ASSISTANCE BULLETIN



AIDS INSTITUTE STANDARDS FOR HIV/AIDS CASE MANAGEMENT:

IMPLICATIONS FOR COBRA

17A-06 JUNE 2006

Background:

The AIDS Institute model for the COBRA Community Follow-up Program (CFP) has been in existence since 1990. Since its inception, many providers have had the opportunity to put this model into practice and meet the intensive needs of people living with HIV and their families. Today, improved treatment of HIV/AIDS has affected the practice of case management, and case managers must now address the complex issues facing persons who are living longer with this disease.

AIDS Institute Standards for HIV/AIDS Case Management 2006

In April 2003, the AIDS Institute (AI) convened the AI Case Management Work Group. Members were recruited from all Bureaus of the AI and represented the diverse program types offering HIV/AIDS case management across the State. The charge of the work group was to review current case management practice, clarify the definition of case management, present models of case management and establish minimum service expectations for case management programs funded or administered by the AIDS Institute.

After obtaining input from statewide provider focus groups and feedback sessions, the work group developed the AIDS Institute Standards for HIV/AIDS Case Management. The overall intent of the standards is to assist providers in understanding their case management responsibilities and those of their counterparts to

promote cooperation and coordination of case management efforts.

The AIDS Institute Standards for HIV/AIDS Case Management are available for download from the NYS Department of Health website at <http://www.nyhealth.gov/diseases/aids/standards/casemanagement/index.htm> or at www.cobracm.org. This Technical Assistance Bulletin highlights the changes affecting COBRA case management. Full descriptions of required processes and samples of forms discussed here are available at the aforementioned sites.

Implications for COBRA:

The standards describe two models of case management- Supportive Case Management and Comprehensive Case Management- and set minimum requirements for AIDS Institute – sponsored case management programs.

COBRA Case Management Programs will implement the **Comprehensive Case Management Model**. The result of this change will primarily impact the timeframes for documentation. In addition, a new Brief Intake/Assessment process is being introduced that will replace the current case management Intake form.

Program Guidance:

All of the changes outlined below are effective July 1, 2006. In-service training on the new standards needs to be arranged by supervisory staff of each agency to ensure that there is a clear understanding of the changes.

Standards must be incorporated into the agency's Community Follow-up Program Policy and Procedure Manual and be available for review during monitoring visits. (For guidance in writing Policies and Procedures see section of the AIDS Institute Standards entitled "Requirements for All Case Management Programs.")

Brief Intake/Assessment and Brief Service Plan:

- ❑ The Brief Intake/Assessment is an expansion of the original "Intake" process. It occurs at the initial meeting with a client where information is gathered to address immediate needs and initiate case management activities until a Comprehensive Assessment can be completed.
- ❑ A Brief Intake/Assessment must be completed within 15 days of referral.
- ❑ To assist in addressing the immediate or presenting problems, a Brief Service Plan is due at completion of the Intake/Brief Assessment.
- ❑ The client and the case manager should sign this plan. It is at the discretion of the agency if supervisory signoff is required.

For agencies that have a **centralized** intake process for all of their case management programs, the completed intake date is the date when the case is assigned to a COBRA Community Follow-up Program case manager.

Comprehensive Assessment and Comprehensive Service Plan:

- ❑ The timeframe for completing the Comprehensive Assessment has been extended from 45 to 60 days to allow the case manager and client time to initiate case management services, meet immediate needs, and gather complete, accurate information. The Comprehensive Assessment must be completed no later than 60 days from the date of the completed Brief Intake/Assessment.
- ❑ A Comprehensive Service Plan must be completed in conjunction with the Comprehensive Assessment.
- ❑ The Brief Service Plan may be incorporated into the Comprehensive Service Plan if client goals are still relevant and not yet attained.

Comprehensive Reassessment:

- ❑ A Comprehensive Reassessment must be completed within 180 days (6 months) of the completed Comprehensive Assessment and Service Plan and every 180 days thereafter.
- ❑ When a significant change in a client's status occurs, a new reassessment should be completed.
- ❑ Case Conferences should be held at each Reassessment. This is a minimum expectation, as case conferencing should occur whenever necessary or helpful for achieving the goals set by the client.
- ❑ A Comprehensive Service Plan is due with each complete Comprehensive Reassessment. A Service Plan may be updated between reassessments if client goals and case management activities change.

Contact Frequencies:

- ❑ For clients receiving comprehensive case management services, contact frequencies include:
 - ◆ A minimum of 3 contacts per month, at least one face to face.
 - ◆ At least four (4) face-to-face contacts with the case manager every 180 days
 - ◆ Home visits should occur at assessment/reassessment, and as needed based on the individualized needs of the client/family
- ❑ For clients on Follow-up Status, contact frequencies include:
 - ◆ A minimum of one (1) contact every 30 days
 - ◆ A minimum of three (3) face to face contacts every 180 days
 - ◆ A minimum of one (1) home visit at reassessment