CFP TECHNICAL ASSISTANCE BULLETIN
FOLLOW-UP STATUS
05B-08 FEBRUARY 2008

INTRODUCTION/BACKGROUND:

Follow-up Status within the Community Follow-up Program (CFP) is designed to allow providers to continue to serve existing clients and their families who no longer require intensive case management services, but still require a level of case management for on-going support, assistance and advocacy to continue to access needed services and maintain health and independence. The goals of Follow-up Status case management remain consistent with the CFP's goals of self-sufficiency and independent functioning of the family unit.

The CFP Program Standards and Regulations, Request for Qualifications (RFQ 3/95), allows for the provision of less intensive case management (Follow-up Status) for stabilized clients with whom a case management (CM) relationship had been established and who may not currently require as intensive personal contact with case management staff. Follow-up Status may also be used for clients who are lost to follow-up while continued attempts are made to locate them and/or re-engage them in services.

Providers have made use of Follow-up Status, and have developed an internal policy and procedure on utilization of this status. While this option has been available to agencies, it has not been widely used. This technical assistance bulletin provides standards and guidance to promote uniformity in Follow-up Status implementation by clarifying client criteria and caseload parameters. By better defining Follow-up Status and providing guidance, it is anticipated that more programs will choose to make increased use of the status and more clients will benefit from the continuation of services, thereby averting premature discharges and re-entries to the program.

Many individuals are responding favorably to triple combination therapies (HAART). Also, with the implementation of Welfare Reform, some individuals are preparing to enter or return to the work force. Clients are presenting with new and different case management needs. Many clients do not require intensive CM but instead may need assistance in the proper management of medications or require CM and advocacy to ensure benefits are not lost prematurely if they choose to return to work. Clients are requesting that their cases be kept open longer and programs are hesitant to discharge clients prematurely, since stability and crisis situations tend to be cyclical.

These are important CM needs that the CFP is able to address through expansion of Follow-up Status caseloads. The ability to expand non-intensive case loads will also reduce the burden on grant funded case management programs whose caseloads have increased significantly with no commensurate increase in grant support.

STANDARDS & GUIDANCE:

The following are criteria for a client to be **moved** to Follow-up Status (admission criteria to the program remain the same):

Client Criteria:

1. Service Plan reflects maintenance or life enhancing goals; client and family stability for at least 90 days

AND

2. Basic needs are met, including:

- Medical health is stable

- Housing is stable, permanent, with no major deficiencies
- Ability to access transportation independently
- Support systems are adequate
- No outstanding children or parenting needs
- No outstanding domestic violence issues
- Substance use issues addressed or client is stable
- Mental health is addressed or client is stable
- Entitlements/benefits are in place
- No outstanding legal issues
- Client is unwilling to engage.

AND

3. The Client is able to function independently physically and emotionally on a daily basis;

OR:

4. Clients who have been non-adherent with services or are lost to follow-up for up to a 6 month period. *The purpose of designation as a Follow-up Status client in this case is to make aggressive follow-up attempts (with supporting documentation) to try to* **re-engage** *the individual in services.*

Determination of a change to Follow-up Status should only be made if there has been a recent reassessment including a home visit and case conference(s) with other providers. Also, a service plan must still be developed to identify the goals to be worked on in conjunction with a client. These documents will be reviewed at monitoring visits to assure that agencies are in full compliance with this policy.

Clients who are in Follow-up Status can be brought back into "Intensive Status" if they experience a crisis period or require more intensive services. Follow-up Status may **ONLY** be used for clients that have been on intensive status (i.e. clients should not be directly enrolled into this status).

PROGRAM CRITERIA:

Case Load Ratio and Case Load Maximum:

The Follow-up Status caseload limits ensure that the primary focus of the CFP remains on the intensive need clients. Since the philosophy of the program remains the same and the focus of services and outreach needs to remain for those requiring intensive services, **the total agency/site caseload percentage cannot exceed: 75% intensive/25% Follow-up Status.** (Ex. For a program case load of 200, the result of using a 75/25 ratio would be 150 intensive clients and 50 clients in Follow-up Status.)

To allow maximum flexibility, follow-up cases may be distributed across teams/case managers or targeted to specific teams/case managers. The 75/25 ratio does not need to be maintained for assignment of cases to all teams/case managers. Program Directors have the responsibility to ensure appropriate case mix and quality services. A number of factors should be considered when determining appropriate caseload distribution including:

- Staff capability or team/case manager strengths and weaknesses.
- Client population (extremely intensive clients or a population with a high number of collaterals may dictate a lower number of intensive need clients on a caseload).
- Geographic area to be served (rural areas may need to carry a lower number of clients overall due to extensive travel times).
- The level of supervision and QA review available to the team/case manager.
- Whenever possible, the client should continue with the same team/case manager when moved to follow-up status.
- Potential impact on billing.
- Each program should review the level of work needed to continue services for follow-up status clients, keeping in mind the

number and frequency of required contacts and the continued requirement for 180-day reassessments and service plans. It is important to note that caseload distribution/adjustment takes place over a period of time and may change frequently as clients move in or out of follow-up status.

Duration of Status:

The current policy is to allow a limit of one reassessment cycle on Follow-up Status. In limited cases where there are extenuating circumstances and written justification provided, an extension may be granted. Duration of Follow-up Status should be monitored by the Program Director and all extensions require documentation and approval of the Program Director. Documentation re: extension/justification must be on file and will be reviewed at program monitorings.

Program Standards Defined:

Contact Frequency:

- Minimum of one contact every 30 days
- Minimum of one face-to-face contact every 90 days
- Minimum of one home visit every 180 days

Reassessment/Service Plan Development Expectations:

- Reassessments must be conducted every 180 days.
- Service plans must be developed in conjunction with the reassessment.

Reassessments are important to ensure timely intervention when the client & family are not stable and may need more intensive case management. At reassessment if there are no case management needs, plans should be made to discharge a client to a more appropriate level of service (i.e. non-intensive grant funded case management or no CM if they prefer or are operating independently).

PROCESS:

If an agency chooses to implement an expansion of Follow-up Status, they need to complete the following:

1) Complete the *Request to Modify/Expand CFP to Incorporate Follow-up Status* form as part of the annual work plan package, or at any time when a decision to utilize Follow-up Status is made. The program will need to identify the time frame for implementation and how it will impact overall case load as well as expected percentages/ rates of Intensive clients: Follow-up Status clients.

2) The program must have a policy for utilizing Follow-up Status consistent with this guidance. A form, such as the *Follow-up Status Designation/Approval* form, must be used for each client transfer to follow-up status-justifying the transfer and containing the case manager and supervisor's signature. The form should be kept in the client's chart. The system to track client in this status should also be clarified within the policy statement.

3) Approval from your program manager to implement the Follow-up Status policy is performance based. A program will need to demonstrate that they are sufficiently stable for Follow-up Status program approval; otherwise the Case Management Section reserves the right to disapprove the request to allow an increased number of clients to the program until such time as the program is prepared to support a work plan modification.

4) Continued approval for use of Follow-up Status is based on review of your annual work plan and AIDS Institute programmatic reviews.