

3.50 CASE MANAGEMENT SERVICES

3.501 Case Management (Child/Adolescent)

Description of Services: Case management entails the accessing, linking, coordinating, and monitoring of psychosocial services from myriad systems (e.g., mental health, physical health, social, and educational) to enable children/adolescents to participate fully in their family and community. Instrumental to this coordination is the development of a culturally specific individualized care plan which reflects the child/adolescent's strengths and self-identified goals, obtaining individualized services, facilitating linkages to community-based resources (see Community Support Services); advocating for the child/adolescent's and family's needs, desires, and rights, and reviewing the progress made (including positive and adverse outcomes).

As an integral part of case management, discharge / transition services are arranged or coordinated by Care/Case Managers as a child/adolescent is preparing for discharge and transition from one level of care to another. These services are designed to support the attainment of consumer-defined goals (e.g., stable living arrangement; quality relationships; employment, vocational training or school attendance). Care/Case Managers may assist with the following:

- During the discharge process, work with discharge planners to ensure that the necessary paperwork is completed, follow-up appointments are made, and the necessary supports are in place;
- Work with child/adolescent to identify sources of prior and current support (e.g., family, friends, colleagues);
- Consult with provider concerning treatment modalities that assist child/adolescent with reestablishing prior or establishing new community supports;
- Coordinate with educational services;
- Identify sources of community support for families (e.g., local Alliance for the Mentally Ill, Federation of Families for Children's Mental Health) and facilitate their involvement with these agencies;
- Identify resources to meet other needs, such as transportation, day care, food, clothing, housing); and
- Provide services on a frequent and regular basis in order to assist child/adolescent in a variety of ways to gain access to needed resources such as medical, social, educational and other services through natural supports, generic community resources and specialized mental health treatment, rehabilitation and support services.

Criteria

Admission Criteria

All of the following criteria are necessary for a child/adolescent's admission to this level of care:

1. A DSM-IV-TR Axis I diagnosis or a treatable behavioral condition related to an Axis II diagnosis;
2. Child/adolescent and family or guardian require assistance with obtaining or coordinating necessary treatment, rehabilitation, and social services without which they would likely require more intensive services or a higher level of care;
3. History of multiple hospitalizations or recent inpatient stay
4. Child/Adolescent at-risk for out-of-home placement or returning from out-of-home placement and who is in need of service from more than one human services agency, and
5. Does not require a more intensive level of care.

Psychosocial, Occupational, and Cultural and Linguistic Factors	<i>These factors, as detailed in the Introduction, may change the risk assessment and should be considered when making level of care decisions.</i>
Exclusion Criteria	<p><i>Any of the following criteria are sufficient for exclusion from this level of care:</i></p> <ol style="list-style-type: none"> 1. Severity of illness requires higher level of intervention; or 2. Family refuses service and child/adolescent continues to live within family context.
Continued Stay Criteria	<p><i>The following criterion must be met for continued treatment at this level of care:</i></p> <ol style="list-style-type: none"> 1. Child/Adolescent continues to meet admission criteria at this level of care. 2. Unless contraindicated, family, guardian, and/or custodian is actively involved in the treatment as required by the treatment plan, or there are active efforts being made and documented to involve them.
Discharge Criteria	<p><i>Any of the following criteria are sufficient for discharge from this level of care:</i></p> <ol style="list-style-type: none"> 1. Child/adolescent no longer requires program services; 2. Family and/or child/adolescent are non-participatory with program; or 3. Goals of case management have been substantially met.