



IRC San Diego

Case Management: The Basics

The basics: Case management is defined as a systematic process to respond to an individual's needs in a timely manner that is appropriate for the client's age, gender, culture and developmental stage. In the case management process, a trained and supervised caseworker collaboratively assesses the needs, strengths and wishes of the client, and when appropriate, the client's family members. Caseworkers may provide direct support or refer to other services available in the context. Caseworkers arrange, coordinate, monitor, evaluate and advocate for multiple services to be provided to the client to meet their specific, and often complex, needs. A comprehensive case management approach requires coordination and referral options among and between service providers in order to ensure a protective and holistic response. International Rescue Committee (IRC) adheres to a Strengths Based and Trauma-Informed approach to all services including case management, recognizing the agency and self-determination of our clients, as well as recognizing clients as the expert in their own experiences and needs.

Case management entails:

- ✓ The creation of a professional relationship with a client in which there are clearly defined roles, responsibilities, and boundaries aimed at building upon client strengths and resources to achieve the client's goals. The professional relationship includes:
 - Providing services within scope of service and during business hours
 - Securing permission from client(s) via a signed Authorization to Release Information to share or obtain information regarding the client(s) as is necessary for service provision.
 - Closing case when complete or no longer appropriate to client needs
- ✓ **Intake:** Determining a person's eligibility to access case management through a particular program
 - Do they meet program/donor requirements (e.g live in San Diego, meet certain demographic requirements, etc.)
 - Do the issues with which they need assistance fall under the program's "scope of work" (i.e. what the program is funded/contracted to do) **IF YES, the next step is:**
- ✓ **Assessment:** Learning about a client(s)' resources, needs, challenges/barriers and priorities
- ✓ **Case Planning:** Making a plan (at IRC this is the Individual Support Plan, or ISP) in collaboration with the client(s) that includes
 - Goals to address each identified client need that the program can address
 - Objectives to be completed to progress toward the goal, including the person(s) to whom each objective is assigned and timelines as appropriate to the objective, e.g.
 - Additional internal services
 - External services
 - External resources
 - Internal resources

- ✓ **Implementation of ISP:** on-going follow-up with and connecting the client to resources through referrals to partner organizations and providing direct interventions such as legal orientation and psychosocial support.
- ✓ **Case Closure:** Client ends services because they have met their established goals, have disengaged from services, have requested that their case be closed, or have moved outside of the service area.

Key components of case management are:

- ✓ **Secure permission** from client(s) via a signed Authorization to Release Information to speak with other persons or entities on behalf of the client(s). Client may provide or rescind permission at any time during a case. Permission is automatically discontinued at case closure.
 - a. All entities identified in the ISP
 - b. Only share information as necessary for service provision
 - c. Only in the context of service provision – only sharing the minimum information required
 - d. Things related to HIPAA, agency and other confidentiality and privacy protections
- ✓ **Keeping professional boundaries at all times**
 - e. Maintaining a professional relationship
 - f. Providing services within scope of service and during business hours
 - g. Closing case when complete or no longer appropriate to client needs

Case management is NOT:

- ✓ Crisis intervention or emergency response (clients are, however, provided safety and emergency planning and related information as part of initiating a case.)
- ✓ Typically “24 hour” - case management is provided during the business hours of the agency unless otherwise specified (IRC San Diego is M-F 8:30-5)
- ✓ Conducting any services outside of the scope of work
- ✓ Blurring the lines of service provider and friend (i.e professional vs social); e.g.:
 - Not providing personal contact information
 - Not connecting on social media
 - Not doing “extra” for the “one client who really needs it” e.g. buying lunch, phone, clothing, other items with personal money
- ✓ Talking with other service providers (or anyone else) about anything other than what is necessary to continue to provide, facilitate, care & services (e.g. no updates “because they really like the client and want to know what happened”)

RESOURCES ON TRAUMA-INFORMED CARE

SAMHSA-HRSA Center for Integrated Health Solutions - Trauma.

<https://www.integration.samhsa.gov/clinical-practice/trauma>

SAMHSA’s concept of trauma and guidance for a trauma-informed approach. SAMHSA’s trauma and justice strategic initiative. <https://store.samhsa.gov/system/files/sma14-4884.pdf>