

PROCEDURE

Series:	Operating Procedures	COA:CM 7, 10.07 CFOP:
Procedure Name:	Intensive Case Management and On Call Procedure	
Procedure Number:	OP BC 1018	
Reviewed Date:	N/A	
Revision #/Date:	11/19/2012, 6/26/2017, 5/7/2021, 5/30/2023	
Effective Date:	08/28/2003	
Applicable to:	Brevard C.A.R.E.S. Employees	

SUBJECT:: Employees after hours on call and intensive case management protocols for families served at Brevard C.A.R.E.S.

PURPOSE: This operating procedure outlines Brevard C.A.R.E.S. protocol for after-hours assistance for all families receiving services through Brevard C.A.R.E.S. and the agency’s intensive case management protocol. This procedure clarifies the protocols and steps to be taken by the Brevard C.A.R.E.S. staff to ensure prompt quality access to services, and integrity and confidentiality for families to the services offered by Brevard C.A.R.E.S. The proper application of this procedure ensures that Brevard C.A.R.E.S. meets its commitment to ensure continuity of care for families using the strength based wraparound principles of care.

PROCEDURE

Brevard C.A.R.E.S. provides on call support to families 24/7. Crisis response services are available through the Brevard Family Partnership provider network. Services provided and/or referred to include: assessments, evaluations, after school care, camps, certified behavior analysts, child care, clinical consultations, crisis intervention, Dialectal Behavioral Therapy, domestic violence advocacy, domestic violence services, educational stabilization, family therapy, flexible funding, housing and employment assistance, intensive family services, individual therapy, mentor services, outreach to families, parenting groups, parent support and advocacy, post adoption support, respite, relative and non-relative support, social skills building groups, specialized after school programs, substance abuse counseling, therapeutic groups, mentoring and trauma/recovery services.

The procedure is designed to provide the following for all families being served through after hours support:

- a. Ensures that information has been elicited for all team members and potential team members about immediate crisis or potential crisis in the Crisis and Safety Plan.
- b. Ensures that if immediate response is necessary, the team has formulated a response for immediate intervention and or stabilization which may include Mobile Response Team.

- c. Ensures that the team has prioritized according to seriousness and as to the likelihood of occurrence and created an effective and well specified crisis prevention and response plan that is consistent with the wraparound principles. A more pro-active safety plan may also have been created.
- d. Ensures that the Care Coordinator has guided the team in a discussion of serious risk identified that included safety needs or concerns and potential crisis situations, as well as antecedents and associated strategies for preventing each potential type of crisis.
- e. Ensures that the team has a plan of how to maintain the safety of all family members and of other issues that could potentially go wrong, followed by a process of prioritization based on seriousness and likelihood of occurrence.
- f. Past crises and the outcomes of strategies used to manage the family should be considered as an important source of information in current and subsequent crisis/safety planning.
- g. Ensures that each specific member's role and responsibilities is clarified on the team along with the means of contacting members in the event of a crisis. The plan should include creative and open-ended manners about strategies for meeting needs in a time of crisis that generates multiple options.
- h. Ensures that this information is documented in the written crisis plan and is made available in the Brevard C.A.R.E.S. database and is revisited and updated to respond to the successes and/or the need for new strategies and that all parties are informed of their individual role.
- i. The team will follow steps outlined in the Crisis and Safety Plan for resolution. If the family still identifies there is an unresolved risk or safety issue and if assistance is needed from the Brevard C.A.R.E.S. on call Care Coordinator including accessing the Mobile Response Team, families can access the Brevard C.A.R.E.S. after Hours number by calling 321-449-6403.
- j. Brevard C.A.R.E.S provides an on-call cell phone which is rotated amongst Coordinators. Each on call shift extends from 5:00pm weekly through 8:00am daily Monday through Friday and then 5:00pm Friday through 8:00am Monday on the weekends. There are Two Tiers that will respond to on call requests from families. The First Tier consists of all Care Coordinators who shall serve as the first responders and the Second Tier consists of the Supervisor. The on-call Care Coordinator can provide authorization to use the Mobile Response Team (MRT) by calling the MRT on call number at 321-213-0315.
- k. Each Coordinator will be required to rotate on call duties in weekly shifts spanning from Monday through Sunday. Care Coordinators will be paid \$100.00 per day on agency approved holidays. Each Care Coordinator is responsible for making arrangements to cover their assigned shift if there are circumstances in which they will not be available for the shift. The on-call schedule is made available to all staff the month prior.
- l. The after-hour number that is provided to all families being served allows families to directly contact the on call Brevard C.A.R.E.S. Coordinator. The on-call Coordinator will access the Mindshare or FSFN data base if necessary, to solicit additional information regarding a family including the Strengths Discovery, most recent Care Plan and/or Crisis and Safety Plan. If additional information is needed from the Coordinator assigned to the family, the on call Brevard C.A.R.E.S. Coordinator may contact the Coordinator assigned to the specific family on their work cell phone (and for any case in which a Coordinator has

- not been assigned). If the Coordinator is unavailable or if additional assistance is needed, the Brevard C.A.R.E.S Coordinator will contact the assigned 2nd Tier assigned supervisor.
- m. If necessary, the on-call Coordinator will review, reinforce and/or modify the Crisis and/or Safety Plan for the specified family, contact safety providers, collaborate with DCF/law enforcement if applicable, and any other necessary task to ensure child safety until the following business day, to include an in person response to the family's home/location.
 - n. The on-call Coordinator will provide an email summary to the assigned Care Coordinator and supervisor by 10am the following business day to provide all necessary details and information of the situation.
 - o. If the 2nd Tier Supervisor needs additional assistance the Director of Diversion and Prevention will be contacted.
 - p. The Director of Diversion and Prevention will be available at all times as the 3rd Tier on Call. The Executive Director will be notified at all times under all of the following circumstances by the 2nd Tier on Call.
 - 1. Client Death- This includes a person whose life terminates due to, or allegedly due to, an accident, act of abuse, neglect or other incident occurring while in the presence of an employee, in a Brevard Family Partnership or Brevard C.A.R.E.S. operated or contracted facility or service center, or when a death review is required to the Child Death Review Procedures.
 - 2. Serious injury, or serious illness of a child- This is defined as a medical condition of a client requiring medical treatment by a licensed health care professional sustained or allegedly sustained due to an accident, act of abuse, neglect or other incident occurring while in the presence of an employee, in a Brevard Family Partnership or Brevard C.A.R.E.S facility or service center.
 - 3. Potential Media Coverage- Any incident that may result in negative media coverage.

On Call Assistance for Brevard Family Partnership/Department of Children and Families

In the event that BFP is unable to find placement for a child/children within four hours from the time of removal by a DCF CPI, Brevard C.A.R.E.S. on call staff will be contacted to assist.

- 1. The Care Coordinator on call will receive a call from BFP Out of Home Care staff requesting assistance, at least 30 minutes prior to when assistance is required to start. The on-call Care Coordinator will then notify the 2nd Tier Supervisor to advise that assistance has been requested.
- 2. 2nd Tier Supervisor will contact BFP staff to gather all relevant details.

3. 2nd Tier Supervisor will use the provided list of staff who have volunteered to be contacted in this event and will begin contacting staff to respond. If no one on the list is immediately able/willing to respond, then the on-call care coordinator will be dispatched.
4. The staff that respond will be compensated via a stipend of \$35/hour for the time that they worked.
5. 2nd Tier Supervisor will email the Director of Prevention and Diversion to notify that staff was deployed for a response. Brevard C.A.R.E.S. will continue to provide assistance until placement is located. At the supervisor's discretion, if the situation lasts an extended period, alternate staff members may be contacted to relieve original staff. If the situation lasts through 8am the following business day, the Director will work with staff to develop an alternate plan to continue assistance through alternate C.A.R.E.S. staff as needed.

Brevard C.A.R.E.S. Director of Diversion and Prevention and Executive Director Responsibilities

- a. The assigned 2nd Tier Supervisor shall be readily available to provide technical assistance to the on call Coordinator for crisis and emergency situations that are received on Brevard C.A.R.E.S. families after hours..
- b. The Supervisor will contact the 3rd Tier Brevard C.A.R.E.S. Director of Diversion and Prevention or designee if additional assistance is needed.
- c. The Brevard C.A.R.E.S. Executive Director may contact the Brevard Family Partnership President and Chief Executive Officer if deemed necessary and appropriate.
- d. All on-call activity must be reported by the assigned on call staff to the relevant and responsible parties the following business day.

Intensive Case Management: Employee Workloads and Caseload Sizes

The Family Support Services Supervisor is responsible for all assignments to the Brevard C.A.R.E.S. program and for ensuring that each staff member has a balanced caseload of low, moderate, and high-risk cases. Family Support Services Supervisor manages the flow of intake into the program and evaluates case distribution and assesses the workforce to ensure caseloads remain within Intensive Case Management, Coordinator and Case Management Council on Accreditation standards and evenly distributed to the greatest extent possible.

This is achieved in multiple ways. When new referrals are received, case assignments are made in part based on the family's geographic location. There are teams of Family Partners and Coordinators assigned to the North, Central and South parts of the county. Families are assigned a risk level upon entry (Low, Moderate or High Risk) with risk level driving family contact times (refer to BC OP 1005). Cases are assigned incrementally on a staggered basis to the greatest extent possible, however, it should be noted that the agency is not permitted to place families on a waiting list. The Family Support Services Supervisor monitors and subsequently balances each employee's workload electronically through the PSAM and FSFN as well as through individual



supervision and the case review process. All employee workloads support the achievement of client outcomes, are regularly reviewed, and are based on an assessment of each staff member's qualifications, competencies, and experience of the staff member. This includes the level of supervision needed based on employee experience, tenure, the work, and time required to accomplish assigned tasks and job responsibilities and service volume while accounting for assessed levels of needs of current families served and new referrals. It should be noted also that referrals to Brevard C.A.R.E.S. fluctuate as do staff caseloads based on influx and trends. The average recommended caseload for intensive case management (defined as having an active safety or present danger plan) is 15. Data on caseload size and risk level of each family is reviewed on an ongoing basis and aggregated monthly for review.

BY DIRECTION OF THE PRESIDENT AND
CHIEF EXECUTIVE OFFICER:

A handwritten signature in blue ink that reads "Philip J. ScarPELLI".

PHILIP J. SCARPELLI
President and Chief Executive Officer
Brevard Family Partnership / Family of Agencies

APPROVAL DATE: 7/1/23