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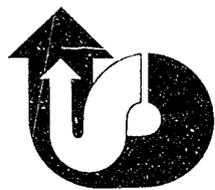
**Prepared for the Office of Juvenile Justice
and Delinquency Prevention**

YOUTH SERVICES INFORMATION SYSTEM (YSIS)

NCJRS

1978

Information



**National Office
for Social Responsibility**

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Special thanks to Victoria A. Carlyle and Rose Mary Deffinbaugh for preparing this publication.

Published by the National Office for Social Responsibility under contract number J-LEAA-088-77 to the Office of Juvenile Justice and Delinquency Prevention. The point of view and opinions presented in this publication are those of the principal investigator and not necessarily those of the Office of Juvenile Justice and Delinquency Prevention.

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Preface

The National Office for Social Responsibility has published this document because it is applicable to any human service delivery system, and because it is specifically geared to youth-oriented programs and systems. We believe that it will enhance the quality of case management and service delivery, and that it provides a means by which a service provider's accountability can be established.

The client tracking management information system, presented in this volume, was originally based on a broader system developed by Wandless Associates (see Acknowledgements below). This application has been designed so that it meets the needs of the special emphasis deinstitutionalization and diversion demonstration projects funded by the OJJDP--as well as a wide spectrum of other youth programs.

This volume not only describes the implementation of the Youth Services Information System (YSIS) through large scale as well as mini computers, but also provides detailed procedures for manual operation of the system. In addition, forms have been provided so that they can be readily adapted for project use. Project administrators will find that even though the YSIS can be applied to statewide human service delivery systems, it is specifically designed to meet the needs and facilitate the implementation of grantee projects at the community level.

For further information regarding the YSIS, please contact the National Office for Social Responsibility. We will be happy to be of assistance to programs interested in implementing this management information system.

Acknowledgements

The Youth Services Information System (YSIS) presented in this document is based on the information system developed by Wandless Associates for the Columbia Integrated Services Delivery System (ISDS). This system represents an extension of ideas and materials developed by the consultant over a four

year period. These ideas were initially tested in a first generation system (known as "CACTUS") which supported a youth services case management system for the Kansas City Youth Service Center during 1973-1975. Corrections based on actual operating experience were made and the ideas were further developed in the design of integrated social service information systems for two large cities, one of which is now operating on-line for the City of Kansas City, and for the Division of Services to Children and Youth, Kansas Department of Social and Rehabilitation Services.

In addition, the works of a number of other practitioners in the field of "human service information systems" have come to our attention since 1973. Choosing to build upon the knowledge and best ideas of others--to stand on their shoulders rather than standing on each others feet--a number of the concepts employed in the YSIS reflect the work of other organizations and firms. Grateful acknowledgment is, therefore, made to the most significant of these:

- Lawrence L. Weed, M.D., of the University of Vermont College of Medicine who introduced in the late sixties the problem oriented record. Dr. Weed's book, Medical Records, Medical Education, and Patient Care: The Problem Oriented Record as a Basic Tool (1970), in addition to providing a number of the essential concepts for the YSIS, instilled a deep ethical concern for the delivery of quality services.
- The Maine Bureau of Social Welfare's Social Services Delivery Management Information and Control System, developed as a model system for state social service agencies (1974).
- The Human Ecology Institute's series of papers on "Human Service System Development" for the Services Integration Task Force, Office of the Secretary, DHEW (1975).

Wandless Associates
HUMAN SERVICES TECHNOLOGY

Introduction

Youth service programs, more than any other kind of human services program, need an effective management information system. This is even more the case for youth service programs in special problem areas such as developmental disabilities and juvenile delinquency prevention. The special need of youth service programs is based on the fact that there is a great deal of activity which must be coordinated:

- Clients are usually multi-problemmed and, therefore, are in need of multiple services;
- There is a great deal of youth-worker interaction brought about in part by the supervisory nature of the case work services provided;
- A number of actors are involved in a case: parents, teachers, peers, providers, employers, and often police and courts;
- Many of the services a youth needs are provided on a voluntary basis and a great deal of attention must be paid to making sound referrals;
- Youth are often very active or very passive and it is necessary to monitor providers to either be sure they are keeping up with the client or to be sure they are not neglecting the client; and
- Youths continue to live their lives, even while being served, and if anything can go wrong it usually does, thus requiring frequent intervention by the case worker.

The model Youth Services Information System (YSIS) presented in this publication has been designed with the needs of youth particularly in mind and is based on substantial experience with the operation, management, and evaluation of youth service systems. It is a "model" in that it provides an example of what the information system in a youth serving program should be like but it does not require that your system be identical.

The Youth Services Information System (YSIS) is not an ideal information system but rather a realistic one. While it may

seem complex to some readers, many sophisticated components of it have been omitted in this presentation because most youth service programs do not have the time, management staff, or money to implement a highly sophisticated system. We believe that sophistication is something to be added to an information system as the future of the program becomes more stable. It is our belief that it is better for a program to have a realistic information system in operation than to be planning to install the ideal system.

The YSIS has been designed to support the planning and delivery of youth services, to maintain client-oriented case records and central files, and to generate management and client tracking reports.

The purpose of this manual is to introduce the YSIS to the youth service manager considering the design or adoption of a client record, tracking and management information system. The presentation is addressed to the non-automated user because this is the mode used by most youth service programs. The YSIS was originally designed, however, as an automated system and has been implemented elsewhere. It is our belief that there is enough information provided in this presentation to permit a youth service program to automate its system readily if it should so desire.

This presentation is organized into three parts. Part A provides an overview and general description of the YSIS, including its basic forms and reports. Part B presents the basic case management procedures for handling a client, collecting data, and delivering services. This is referred to as the Case Management Process. An Appendix to this section provides detailed instructions for the preparation of forms used by the system. Part C outlines how to manually maintain the data collected by the system and how to generate tracking and management reports for use by case managers and administrators. An Appendix to this part provides conceptual information for agencies interested in automating the system, as well as a dictionary of all data elements used in the system.

PART A

Overview and General Description

A: THE NEED FOR A BETTER CLIENT RECORD SYSTEM

There are three levels of need for a Youth Service Information System (YSIS). The first level of need is at the case management level where the agency meets its basic operational responsibilities for service delivery. At this first level of need the information system will help a case worker and agency supervisors overcome a number of weaknesses which are normally found in the delivery of social services. The following are some of these weaknesses:

- Not all of a client's significant problems are listed in the case record in a manner which permits efficient identification and organization for management and resolution.
- It is difficult to determine whether or not all services required have been planned. Often services are not planned for each significant problem and there is no record as to why they were not.
- Many of the services planned for a client are never begun, or never reported as being delivered, and the program manager has no way of knowing this until something goes wrong.
- Of the services which are initiated, many are not completed or there are no records of completion or completion status.
- A case goal and goal achievement date are not established and clients continue in service without direction or time restraints.

- Follow-through on goal maintenance after case closing does not take place or is not reported to have taken place and there is little formal feedback as to the effectiveness of services, the validity of goal outcome as reported, or the need for further support to maintain the accomplishments and investments of service.

- Case records are not maintained in a clear, systematic manner to the extent that they may readily be assumed by a worker's replacement (which may be frequent in some agencies).

The Youth Service Information System will help overcome such weaknesses (1) by reminding the case worker or administrators of actions the case worker has planned to take, (2) by permitting ready transfer of clients' records to other case workers, and (3) by permitting the case worker or manager to ask and to easily answer critical questions about any client who is receiving services such as:

- Does the client have a problem list?
- Does each problem on the list have at least one planned service?
- Have services been scheduled?
- Has a client's arrival for an appointment, or to begin a service, been confirmed?
- Have all services scheduled for completion by a certain date been completed? Satisfactorily?
- Should the client be reviewed for goal achievement or case closing?
- Is a follow-through contact due to confirm goal maintenance after case closing?

At the second level of need for a YSIS, the administrative level of operations, the YSIS will permit case managers to easily answer a number of routine but important questions which indicate the degree to which clients are receiving service coordination and are moving at a designated flow along the service pathway:

- How many and which clients have problems without planned services?
- How many and which clients have scheduled appointment dates which have not been confirmed?
- How many and which clients have service delivery reports which are overdue from providers?
- How many and which clients have overrun their planned goal achievement date?
- How many and what percentage of clients with cases closed during the period have completed service?
- What are the case closing reasons for those clients not completing service?

At the third level of need for the YSIS, the inter-agency level, the case worker becomes a case manager and is responsible for planning and insuring the delivery of services a client may need beyond those in the inventory of the agency. The YSIS can help the case manager overcome a number of weaknesses in the area of inter-agency (or system level) service coordination. These weaknesses center on the fact that most case work clients have multiple problems and that the single services provided independently of one another are not successful; that failure to receive referred services prevents clients from benefiting from a service already received.

The YSIS is designed to permit the case manager to plan,

record, and track the delivery of services offered by all agencies in the community and not just those of his/her agency, per se.

The YSIS is also designed to provide the inter-agency data necessary for system level coordination and planning. This assumes that the information system would be used by a significant number of agencies. As a large number of agencies are involved, however, the aggregate volume of data to be processed may require some form of automation. At the inter-agency level, the YSIS can help to:

- define the universe of clients and services which exist in the local community;
- identify the ratios of agency contacts to case openings by chief service request and main reason not opened;
- develop reports on units of services rendered community-wide by client goal category;
- develop reports on unmet requests for services community-wide by agency or client characteristics;
- develop community-wide unmet requests reports by reason unmet;
- identify community-wide patterns of unproductive contact and referral practices; and
- identify community-wide barriers to service types requested by age, geography, race, by agency, etc.

In addition to the above, the YSIS will also maintain a record of all services delivered for the purposes of quality of service audits and for use in ex post facto evaluations.

In summary, the support of the YSIS is needed for service delivery and coordination, audits, evaluation, advocacy, and the planning and development of new service mixes as well as the reallocation of service resources. The common building block in the information requirements outlined above is client-oriented case data.

B: SYSTEM OBJECTIVES

The YSIS has been conceived to meet the following objectives:

- Collect and maintain client-specific, problem-oriented and management-related information at the points of client contact, case opening, service planning and delivery, case closing, and follow-up after closing.
- Track client movement along the service delivery pathway.
- Provide standard procedures for recording the client's problem list and the plan of service, and for determining if services are being delivered according to plan.
- Provide standard procedures for tracking and reporting follow-through contacts after case closing.
- Provide a system of human accounting (as opposed to financial accounting) which permits aggregation into client groups, target populations, service populations, goal populations, which--along with service mixes received by clients--may be used to evaluate service outcomes and the general effectiveness of services provided.
- Include the necessary data collection procedures to permit an interface with a potential cost accounting system.

Not specifically mentioned as an objective is the need to know the physical location of youths who may be under the foster care of an agency or who are not otherwise living in their own home. This can be handled by the system and is discussed in the appendix to Part B in the instructions on the preparation of the client base data form.

C: DESIGN RESTRAINTS

The YSIS has been designed by maintaining a balance between a system which would have every feature one might desire and a system which can reasonably be implemented by agencies with modest resources of revenue and staff. In striking this balance, the system has been designed in such a way that its data base may be interfaced with other systems or sub-systems (e.g., an accounting/billing system) by agencies wishing to do so. "Interfacing" means that the type and units of data maintained in the YSIS are such that they may be readily extracted for use as input data to other systems.

The design is based on an individual client approach in which the Service Plan becomes a contract between the client and the case worker with the problems and case goal clearly stated and all services planned and scheduled. The focus is the resolution of the client's specific problems, by a specified date to achieve a specified goal, through the application of services specifically linked to the problems.

Information related to this focus is more results oriented as opposed to the more traditional social history data collected by case work agencies. The inclusion of social history data in the central files of the system has been limited to information elements most useful for making referral eligibility decisions, for management reporting, and program planning. Other information and forms such as parents' authorizations,

may be collected and kept in client folders but is not specifically provided for in the data base files. Of course any data essential to the delivery of services should be included on the YSIS data collection forms and maintained in the data base files. An example of the type of data not necessary for the data base files would be the name and address of the parents' employers. This data is usually used either in fee determination or to locate the parent or client in the future and need be maintained only in the client's folder.

D: CONCEPTUAL FRAMEWORK OF THE YSIS

Most human service programs may be viewed, from a client-oriented perspective, as serving clients in seven linear phases in which certain standard functions are performed:

- 1) Contact/Reception
 - Information rendering
 - Service requesting
- 2) Intake
 - Application for service
 - Eligibility determination
 - Case opening
- 3) Problem Determination
 - Problem listing
 - Goal setting
- 4) Service Planning
- 5) Service Delivery
- 6) Progress Assessment and Management
- 7) Closure (termination/discharge)

An eighth phase, Follow-through, after the client leaves the program, may be logically added after case closure. Any specific youth program may not use the same terminology, but a close analysis will show that all or most of these "functions" are performed.

In the design of the YSIS, it was necessary to develop a conceptual basis on which to structure client records. This structure not only permits better service and records management, but also permits agencies to incorporate more readily new data collection and reporting procedures required by new funding sources such as Title XX. Furthermore, the structure will permit the establishment of rules for the provision of services and the auditing of performance (within programs) to determine if service is delivered according to the rules. Only when performance reaches a level of excellence can the effectiveness of a program's services or strategy be evaluated.

Four concepts are central to an understanding of the YSIS. These are:

1. Case Manager
2. Problem List
3. Case Goal
4. Service Plan

1. CASE MANAGER

"Case manager," "service coordinator," and "case worker" can all describe the same function. This function, however, can have three levels of scope:

- Level 1: The worker identifies problems, sets goals, and develops a plan of service; however, within the same agency, the client may have more than one case worker, each doing something different. At this level, the worker usually functions by categorical programs (e.g., foster care worker, health service worker, etc.). This level of case work is gradually being phased out in most agencies.
- Level 2: The client has only one worker within the agency and that worker is responsible for coordinating all of the agency's direct and purchased services through that client's service plan.
- Level 3: The client's one worker has the responsibility of bringing the entire resources of the community to bear on the client's problems. That is, the worker has a responsibility for finding the services a client may need beyond the service inventory of his/her program or agency. At this level, the case worker can be conceptually viewed as having the total resources of the community as potential services for the client.

At each of these levels, the case worker may also be delivering direct services for one or more of the client's problems such as the service of "counseling." Ideally, however, the case worker will minimize personal direct services and put most of his/her energy into coordinating multi-services across functional and organizational lines to accomplish the case goal.

We believe that Level 3 case work is required for the proper delivery of youth services. For ease of describing the YSIS in this document, the Level 3 concept of case work will be assumed and the term "case manager" will be used to represent it in the remainder of this document.

The essence of the case management concept is that, regardless of the number of services or service providers specified in the client's service plan, one individual, the case manager, is responsible for ensuring that the services planned are delivered and, as a consequence, that the client's goal is achieved.

Case management involves mutual agreement with the client and parents with regard to the following elements:

- 1) identification of the problems for which the client needs assistance;
- 2) determination with the client and his/her parents of a case goal;
- 3) selection of services required to resolve problems; and,
- 4) arrangement for and monitoring of the delivery of the required services.

The case manager has a continuing responsibility to confirm planned services to ensure that the client has begun services on schedule, to monitor the progress being made toward resolution of each of the client's problems and his/her movement toward goal attainment, and to record the status of all services completed/terminated. In addition, the case manager must assess continually the client's request or need for additional services. Ideally, he/she also has responsibility for assessing the outcome of a client's services after case closing (or discharge) through the follow-through procedure, and for recommending the readmission of the client for re-programming or supportive services, if indicated.

In addition to these responsibilities, the case manager is

the primary interfacing instrument between the client and the information system. As such, he/she is responsible for recording activity related to the client and reporting it through the procedures specified for the system.

2. PROBLEM LIST

Each client's service record should contain a thoroughly documented problem list. The care with which the case manager formulates the problem list will determine the quality of the whole service record.

The problem list is essentially an approach to data organization and a method of case management often overshadowed by the case goal and service plan. The service plan and service provision records simply reveal the extent to which each problem is being addressed. The goal is simply where the client will be, in terms of his/her psycho-social condition, when all problems have been resolved or controlled.

THE EFFECTIVENESS OF EVEN THE MOST COMPREHENSIVE SERVICE PLAN IS RELATED DIRECTLY TO THE PRECISION AND INTEGRITY WITH WHICH THE CLIENT'S PROBLEMS ARE DEFINED.

Youth service programs, which deliver more technical services, may wish to maintain a problem list composed of active and inactive elements; the former being those for which the client requires services and which, therefore, will be managed; the latter being previous, significant difficulties of the client which may recur (e.g., drug abuse), and, therefore, should be initially noted.

3. CASE GOAL

All clients served by the program should have a case goal and a planned goal achievement date established. The case goal is what psycho-social condition the case manager plans to achieve in a client's life by a certain date. At that time the case can be closed or a new, further goal established.

The purpose of the case goal and goal date is to direct action and to provide a time-frame to that action. All too often, clients languish in programs because workers have not thought through what they should do. The goal setting process encourages a case manager to make decisions and to plan appropriately. It provides a broad means of evaluating case management efforts and client progress. Goals should be mutually agreed upon by the client and parents and the case manager. All too often, the parents--who have the natural and legal responsibility for the child--are only marginally involved in the goal setting process or in the service planning. Many times, too, the parents should receive services as part of the service plan.

We do not know all of the types of goals which might be set for the young people served by the many different types of youth service programs, but the following are some examples:

- Family Life: The client achieves independent living.
- Family Life: Strengthened family life--client living at home.
- Health: Client maintaining proper hygiene and dietary habits.
- Psychological: Client has "viable role" and is successful in it.
- Educational: Client is attending full-time school.
- Educational: Client is at grade-level in alternative school.

Stopping delinquent behavior, of course, is the overall goal

of most cases, but it is too general to be useful in planning services. Goals should be expressed as specific psycho-social conditions that must be achieved to stop the client's undesirable behavior.

The relationship between the client's goal and the client's problem list is a simple one. As viewed from the goal perspective, the problem list contains a list of problems which must be overcome in order for the client to achieve or maintain his goal. These problems are regarded as "barriers" or obstacles which prevent a client from achieving or maintaining a desired goal state. Removal or control of these problems is the objective of the services delivered.

From the problem list perspective, the goal may be viewed as the degree of personal sufficiency or the psycho-social condition of the client after all of his/her problems are resolved. As each problem is resolved the result can be viewed as having achieved an objective which leads to full goal attainment.

4. SERVICE PLAN

A client's service record will really consist of a set of plans for each problem on the problem list; i.e., all of the services and activities necessary to further diagnose or resolve the problem. "Service plan" is simply a convenient term to refer to all of the client's sets of plans; i.e., a list of all of the services planned for all of the client's problems.

The service plan consists of the initial plans for the management, or further diagnosis, of each problem on the list--keyed by code to the relevant problem on the problem list. Each active problem on the list should have its own set of

planned services so that an experienced reviewer would be able to assess, at a glance, whether the problem has a complete and reasonable set of services planned.

The service plan is a unifying and coordinating device in that any and all services which a client receives must first be entered in the client's service plan. This must be done before a service can be requested, authorized, ordered, delivered, or approved for payment. Before any service can be entered into the service plan, of course, there must first be a problem to which it can be linked.

Ideally, the service plan should place the client at the center of the community's human services systems permitting the entry of a needed service regardless of the source of payment or providing organization. This allows for and encourages the mixing of client services, the costs of which may be paid for from several different fund accounts or agencies. The services entered into the plan may be traced to the funding source(s) on the one hand and to the client, the reason for the service, its outcome, and the responsible worker on the other hand.

Only one individual, the case manager, can enter services into the client's service plan. This single point of responsibility further strengthens the unifying and coordinating characteristics of the service plan.

Services may be added to each problem's set of services at any time, so that the service plan is not a static record. Each service in the plan subsequently results in request, authorization, scheduling, delivery, and accounting data reported to the YSIS. Actions which the client or his/her parents should take should also be included in the plan, e.g., "hold a family conference every Friday night," "jog three miles a day," etc.

SECTION A-2: GENERAL SYSTEM DESCRIPTION

A: DATA COLLECTION

The data required by the YSIS is collected on client-oriented forms primarily created by the case manager and subsequently sent to the agency data processing clerk for batching and forwarding to a central records unit. If the agency is processing its own data, then the data processing clerk and the central records unit are essentially the same entity--except in the case of multisite agencies forwarding data to a central office.

Much of the data entered will cause the generation of turnaround documents for return to the appropriate case manager so that he/she will always have a current paper record, in aggregate form, of most of the data in the central files.

The following is a list of the data collection forms used in the YSIS. A copy and explanation of each of these forms is included at the end of this Section:

- Client Base Data Form (YSIS-1)--
which collects data regarding:
 - * client identification information,
 - * characteristic information,
 - * contact information, including presenting requests,
 - * case action information such as "open," "close," etc.,
 - * eligibility determination information, and
 - * household members information.

- Client Data Base Supplement (YSIS-1A)--
which collects offense data and unique agency data elements.
- Service Planning Form (YSIS-2)--
which collects special problem area codes, the problem list, goal data, and the initial service plan.
- Service Order Document (YSIS-3)--
which collects service order/authorization and confirmation information. This form puts the service plan into action by ordering planned services.
- Service Delivery Report (YSIS-4)--
which collects reports on the delivery of services ordered by the Service Order Document.
- Problem List/Goal Data Sheet (YSIS-5)--
which is a turnaround form that is generated by the central records unit upon receipt of the Service Planning Form, and is sent to the case manager (see next paragraph).
- Client Service History Sheet (YSIS-6)--
which is sent to the case manager each time a service action is taken, and reflects that action (e.g., service ordered, appointment scheduled, units delivered, service completion status, etc.).

The case manager uses the Problem List/Case Data Sheet to report changes in problems, goals, goal attainment dates, and follow-through contacts. The central records unit will post the changes to the master ledger (the master Problem List/Goal Data Sheet) and return a photocopy of the updated record to the case manager for use in making the next update. When a case is closed, the case manager also sends an updated Problem List/Goal Data Sheet showing final data on problems, goal attainment, and follow-through contacts planned, if any.

DATA COLLECTION PROCESS

The following narrative describes, in general, how the data collection forms are generated during the service coordination process:

- Contact: Upon entering the youth service agency, the client will first be seen by a receptionist who will determine the nature of the client's contact. If requesting service, he/she will be sent to an intake specialist or directly to a case manager.
- Intake: Intake or registration information will then be collected on the Client Base Data Form (YSIS-1) and reviewed. If eligible and interested in service, the worker will offer to help the client and the case will be opened. One copy of the YSIS-1 form with intake data will be sent to the data processing clerk for forwarding to the central records unit.
- Problem Determination and Service Planning: The case manager will assist the client in problem determination and goal selection and the planning of services required to resolve his/her problems and achieve the case goal. This information will be recorded on the Service Planning Form (YSIS-2).
- Service Delivery: As the case manager makes decisions to implement the service plan (i.e., provider selection, appointment scheduling, etc.), he/she completes a Service Order Document (YSIS-3) for each service planned. Two copies are sent to the provider. On the appointment date, the provider returns a copy to the case manager, reporting the client's arrival (or nonarrival) for the appointment and the intake outcome. The case manager reviews this copy and forwards it to the data processing clerk. At the end of the delivery of a specific service ordered--or at the end of each month for a longer term service--the provider will complete a

Service Delivery Report (YSIS-4) and forward it to the case manager who accepts it and forwards a copy to the data processing clerk. In the case of a noncollaborating service provider (or direct services provided by the case manager), the case manager prepares the Service Delivery Form. The Service Delivery Form reports the units of service delivered, dates of delivery, and the completion status.

- Closure: When all the services for a particular case have been terminated, the system will list the case on an exception report indicating that a closing review is due. If the goal date arrives before closing has taken place, the system will list the case as a goal date "overrun." The case manager will review such cases and, if indicated, will close the case by updating his/her second copy of the Client Base Data Form (YSIS-1) to show the case closed and sending it to the data processing clerk. Along with this form the case manager will forward an updated Problem List/Goal Data Sheet, reflecting current problem resolution status, goal achievement data, and follow-through plans. He/she will also submit any Service Delivery Reports necessary to terminate any active services. The system will not permit a case to be closed until all service orders and the problem list have been properly updated.

All during the case management process, the system will produce exception reports notifying case managers of overdue case actions and service activities. These reports are discussed in Section C, below.

B: EXPLANATION AND PRESENTATION OF DATA COLLECTION FORMS

This section presents the major forms used in the Youth Services Information System. The formats are suggested but not essential for efficient operation of the system. The data elements included on each form, however, are considered to be important. While it will probably be necessary to add new data elements, care should be taken in eliminating or changing the recommended data elements. They are useful in making referral decisions, providing community-level planning data, and in evaluation analysis. For ease in presentation, explanations of the forms are given first, followed by the YSIS forms.

CLIENT BASE DATA FORM (YSIS-1)

This form, on the following page, is used to report each contact at an agency; to record basic information on contacts applying for services (including household characteristics); and to record the following information subsequent to acceptance of the application:

- case opening and closing decisions;
- updating the information collected about a client at the time of application; and
- identifying household members receiving services.

When used to report only a contact, the form will also report the chief service request of the contact, the contact's referral source, the reason the contact did not result in case opening, and the agency to which the client was referred, if any.

The form collects data in five sections. The top left portion, IDENTIFYING INFORMATION, collects client identification data and geographic information. If the action only involves information and referral assistance, the year of birth, sex, and race items need be completed. A contact will be identified by entering the word "CONTACT" in the name field (Item 1). Then, the only remaining section which needs to be completed is the CONTACT AND CASE ACTION section, showing the case action as "NOT OPEN," the Chief Service Request, and the date.

If the result of a contact is an application for service, then the CHARACTERISTIC INFORMATION and HOUSEHOLD INFORMATION sections should also be completed. If the applicant is found to be not eligible, then enter "not eligible" under Item 38 and check Item 37 (NOT OPEN). When the form is completed, send the original copy to data processing and keep the carbon copy in the worker's client folder. Instructions for completing this form and specific descriptions of each data item on the form are presented in Part B, Basic Case Management Procedures.

CLIENT BASE DATA FORM

YSIS-1

IDENTIFYING INFORMATION										CONTACT & CASE ACTION				
1 NAME First Middle Initial Last					9 CLIENT I.D. NO.					31 APPREHENDING AGENCY (If any) Name: _____ Dist: _____ ID # _____ Patrolman _____				
2 RESIDENCE STREET					10 MAILING STREET					32 DATE OF APPREHENSION		PLACE		
3 RESIDENCE CITY					11 MAILING CITY					33 INTAKE DATE/TIME		34 INTAKE AGENCY/SITE #		
4 STATE	5 COUNTY	6 CENSUS	7 SCHOOL DIST.	8 CONG. DIST.	12 STATE	13 ZIP CODE	14 PHONE		35 REFERRAL AGENCY C <input type="checkbox"/> Court F <input type="checkbox"/> Family NAME/SITE ID # P <input type="checkbox"/> Police E <input type="checkbox"/> Self S <input type="checkbox"/> School O <input type="checkbox"/> Other					
15 DATE RES BEGAN Month/Year		16 BIRTHDATE Month/Day/Year		17 SEX M <input type="checkbox"/> F <input type="checkbox"/>	18 RACE B <input type="checkbox"/> Black W <input type="checkbox"/> White A <input type="checkbox"/> Indian O <input type="checkbox"/> Other		19 HISPANIC SURNAME M <input type="checkbox"/> Mex. O <input type="checkbox"/> Other N <input type="checkbox"/> No		20 MARITAL STATUS D <input type="checkbox"/> Divorced S <input type="checkbox"/> Single M <input type="checkbox"/> Married W <input type="checkbox"/> Widowed P <input type="checkbox"/> Separated X <input type="checkbox"/> Unknown					
CHARACTERISTIC INFORMATION										37 CASE ACTION O <input type="checkbox"/> Open N <input type="checkbox"/> Not Open C <input type="checkbox"/> Close DATE: _____		38 REASON NOT OPENED <input type="checkbox"/>		
50 RELATIONSHIP TO THE HEAD OF HOUSEHOLD B <input type="checkbox"/> Brother or Sister C <input type="checkbox"/> Child D <input type="checkbox"/> Foster Child E <input type="checkbox"/> Grandchild G <input type="checkbox"/> Grandparent H <input type="checkbox"/> Head of Household L <input type="checkbox"/> Shelter Child			51 CLIENT TYPE 1 <input type="checkbox"/> Adult 2 <input type="checkbox"/> Child M <input type="checkbox"/> Uncle or Aunt N <input type="checkbox"/> Niece or Nephew P <input type="checkbox"/> Parent R <input type="checkbox"/> Other Related S <input type="checkbox"/> Spouse X <input type="checkbox"/> Other Non Related Z <input type="checkbox"/> Step Relative			52 FAMILY STRUCTURE AA <input type="checkbox"/> Adult Living Alone AI <input type="checkbox"/> Adult in Institution AD <input type="checkbox"/> Adult Living with Others CC <input type="checkbox"/> Couple with Children CO <input type="checkbox"/> Children Only CP <input type="checkbox"/> Couple Only FC <input type="checkbox"/> Father Only with Children MC <input type="checkbox"/> Mother Only with Children RS <input type="checkbox"/> Parental Rights Severed			# of Children <input type="text"/>		39 REASON CLOSED <input type="checkbox"/>		40 CASE MANAGEMENT AGENCY: NAME/ID#	
53 LIVING ARRANGEMENT		54 EDUCATION A <input type="checkbox"/> At Grade B <input type="checkbox"/> Below Grade C <input type="checkbox"/> Completed O <input type="checkbox"/> Above Grade P <input type="checkbox"/> Pre School N <input type="checkbox"/> Not Attending			55 HOUSEHOLD INCOME SOURCE A <input type="checkbox"/> SSIA G <input type="checkbox"/> Gen. Relief Asst. B <input type="checkbox"/> SSIB I <input type="checkbox"/> Investments C <input type="checkbox"/> Child Suppt. S <input type="checkbox"/> Social Security D <input type="checkbox"/> SSID V <input type="checkbox"/> Veterans Benefits P <input type="checkbox"/> State Supp. Pay E <input type="checkbox"/> Employment F <input type="checkbox"/> AFDC O <input type="checkbox"/> Other			42 LEGAL STATUS 0 <input type="checkbox"/> Parents with Full Rights 1 <input type="checkbox"/> Guardian of State 2 <input type="checkbox"/> Other Guardian 3 <input type="checkbox"/> Other:		43 CUSTODY STATUS 0 <input type="checkbox"/> Home 1 <input type="checkbox"/> Temporary Shelter 2 <input type="checkbox"/> Foster Care 3 <input type="checkbox"/> Detention 4 <input type="checkbox"/> Other		44 REFERRAL PROBLEM 1 <input type="checkbox"/> Del 2 <input type="checkbox"/> Runaway 3 <input type="checkbox"/> Truant 4 <input type="checkbox"/> Beyond Cont 5 <input type="checkbox"/> Alcohol 6 <input type="checkbox"/> Other		
56 FARM FAMILY M <input type="checkbox"/> Migrant Season O <input type="checkbox"/> Other N <input type="checkbox"/> No		57 ECONOMIC STATUS D <input type="checkbox"/> Disadvantaged P <input type="checkbox"/> Poor N <input type="checkbox"/> Neither		58 GRADE COMPLETED <input type="text"/>		59 EMPLOYMENT STATUS E <input type="checkbox"/> Employed U <input type="checkbox"/> Underempl. O <input type="checkbox"/> Unemployed N <input type="checkbox"/> Not in Labor Force		60 HSHD. GROSS MO. INCOME \$ <input type="text"/>						
HOUSEHOLD INFORMATION														
70 NAME First Middle Initial Last			71 RESIDENT ADDRESS			72 BIRTH DATE	73 REL	74 ED ST	75 EMPLOY	76 MO. INCOME	77 SRCE/ DEP	78 REC. SERV.		
CLIENT														
A Head of Household Only						Mo/Day/Yr						Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
B Father												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
C Mother												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
D Others												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
E												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
F												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
G												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
H												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		
J												Y <input type="checkbox"/> Yes N <input type="checkbox"/> No		

RUN DATE

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.



This form, on the following page, is used to record the client's initial Problem List, special presenting areas (problem indicators), case goal data, initial service requests, and case review and reminder dates. This form is also used to record subsequently planned services and further case review and reminder dates.

When initially completed, form YSIS-2 is used to create the master Problem List/Goal Data Sheet (ledger card) and the master Client Service History Record (ledger card). Subsequent copies of this form will add additionally planned services to the master Client Service History Record. Information about service ordering and delivery, problem or goal changes, however, will be entered via other forms.

Each problem listed and given a status (Item 11) of 'I' (Identified) must have at least one service planned. No service may be planned more than once at the same time for the same problem (even if different providers are anticipated).

This form will cause the central records unit to generate two printouts: (1) the client Problem List/Goal Data Sheet and (2) the Client Service History Sheet. The former sheet is a printed summary record of all problems entered, their status, and final outcome; of all goals entered, their status, and final attainment; and of all follow-through actions (after case closing) planned or taken. This form is completed by the case manager only. A worker formally becomes the case manager of a record via the Client Base Data Form (YSIS-1) when designated in Item 11.

This four copy form, on page 14, is used to implement services requested on the Service Planning Form. A Service Order Document is to be completed by the case manager for each service entered on the Service Planning Form. If the service request involves the purchase of service or the obligation of services in the agency's controlled inventory of services, then the order must be officially "authorized" by designated personnel (e.g., accounting clerk, budgeting officer, etc.).

Two copies of the form are sent to the service provider/vendor and one is returned to the case manager by the provider to confirm the outcome of a referral (e.g., "no show," "accepted," etc.).

The case manager may send the service provider/vendor a second copy of the form with the SERVICE TERMINATION/REJECTION portion completed to terminate services early, i.e., prior to the full delivery of all units requested.

The shaded client/agency/worker identification area at the top of the form is used for internal data processing purposes.

As Service Order Documents are submitted to the information system, data will be reflected on the Client Service History Sheet. If they are not entered on time, their absence will be noted on the Unplanned, Unscheduled and Overdue Services report (No. 07). (See subsection C: Reports, below.)

No services planned should be ordered for longer than six months. If a service is needed for a longer period the present order should be renewed via a new Service Order Document.



SERVICE ORDER DOCUMENT

YSIS-3

AGENCY TYPE ID #	UNIT	WORKER ID NUMBER	CLASS
1 2	3 4	5 6	7

ROUTING INFORMATION

8 To Provider Agency CONTACT: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____	9 From Requesting Agency CASE MGR: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____
--	---

CLIENT IDENTIFICATION

10 Primary Client: NAME: _____ ADDRESS: _____ BILLING ID #: _____	11 Service Recipient (If other than Primary) NAME: _____ PHONE: _____ ID #: _____
--	--

SERVICE ORDER/REQUEST

12 SERV. CODE: _____	13 SERV. TYPE: _____	14 TYPE UNITS: _____	QTY: _____
15 APPOINTMENT DATE: _____		Time: _____ AM PM	

SERVICE CONFIRMATION

16 Was Service Initiated?

Y Yes, on _____

N No, because _____

Prov. Signature: _____

SERVICE STATUS

SERVICE TERMINATION/REJECTION

17 REASON: _____

18 SERVICE STATUS CODE: _____ DATE: _____

20 OFFICIAL NOTICE:
 The service authorized by this order will expire on _____. No service should be rendered past this date.

C. M. Signature: _____

ACCOUNTING INFORMATION

CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE 1	PROBLEM 2	3 SERVICE REQUESTED Letter Code	4 DATE PLANNED	5 PROVIDER AGENCY Type II	Unit	MOD 6
1 A B C D E F G H J 2			m o d a y r			

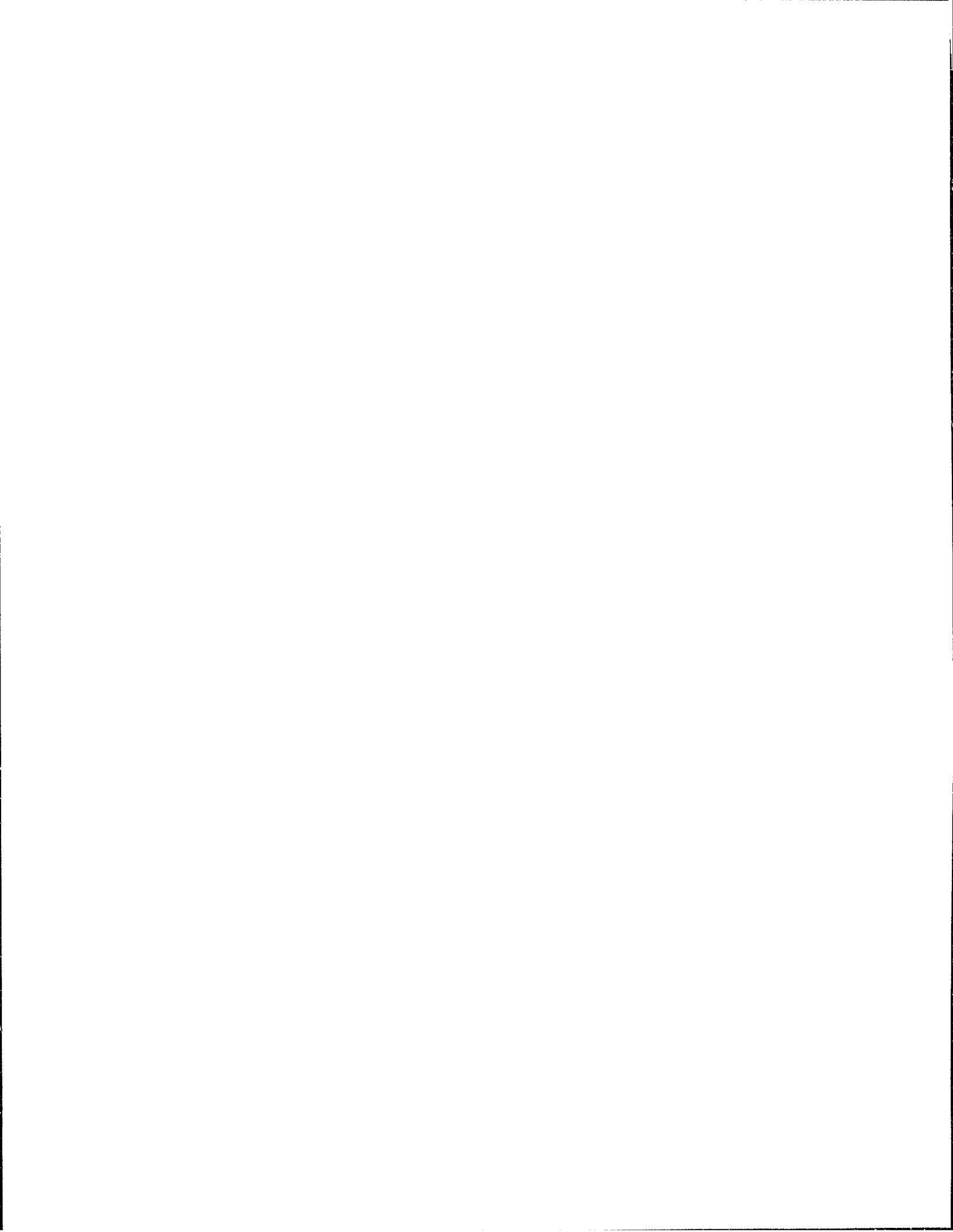
7 UNITS	8 RATE	9 FROM	THRU	10 STAFF PROVIDER ID	11 FUND CODE

I hereby certify the client indicated above is eligible for services and authorize the provision of the services listed

12 SERVICE WORKER'S SIGNATURE	13 DATE OF ACTION	14 AUTH WORKER ID	15 APPOINTMENT DATE

16 FEE ESTIMATE	17 CLIENT SHARE	18 SHARE SOURCE	19 THIRD PARTY ID

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.



A Service Delivery Report, as shown on page 16, is to be completed and submitted to the data processing unit by the case manager for every client for every Service Order Document previously issued, i.e., for every service authorized and delivered, including the delivery of case management as a service.

Service Delivery Reports should be pre-distributed to all major providers of service. The forms can then be completed and submitted to the case manager as required.

Essentially, the Service Delivery Report is an update report to the Service Order Document. The ACCOUNTING INFORMATION portion of the Service Delivery Report is an exact duplication of the accounting information on the Service Order Document to ensure that the report is updating the correct order record (i.e., to guarantee a perfect match of the report to the authorization). This, of course, would be done away with by the use of a unique Service Order Document number which would be entered on all Service Delivery Reports.

The case manager will receive a monthly Service Delivery Report from provider agencies for each service delivered to the client in the previous monthly accounting period. A Report will also be submitted immediately upon completion or early termination of a service order/request.

For providers not participating in the case management reporting effort, the case manager will have to determine the service activity during the previous month and prepare the Service Delivery Report in place of the provider. The case manager can also use this Report to record all case management contacts with and in behalf of the client. Upon submission to the central records unit, data from the Report will be posted to the master Client Service History Sheet. The shaded client/agency/worker identification area at the top of the form is for internal data processing purposes of the case management agency.

This sheet, as shown on page 17, provides the case manager with a summary display of a client's current problem list, goal history, and follow-up record. It is used by the case manager to update a client's problem list, goal data, and follow-up records. The central records unit uses this sheet as a master ledger card to which all of the above data are posted; a photocopy is then made and sent to the case manager.

The Client Problem List/Goal Data Sheet identifies the client and his/her case manager, displays the current case status, and lists all special presenting areas entered via the Service Planning Form. It presents a goal change history and outcome conditions and current goal conditions in chronological order for the current case opening.

The form also presents a complete problem list and indicates the status of all problems entered via the Service Planning Form, the dates added to the list, and the dates problems are removed/controlled (I= Identified, C= Controlled, R= Removed, N= Not Appropriate, and X= Inactive). For example, when a problem is resolved, the worker would change the problem status from 'I' to 'R' and enter the date removed as MM/DD/YY.

After an update action, the Sheet is then returned to data processing and entered on the master ledger sheet for the subject client. This results in a new photocopy being generated which reflects the update, and is sent to the case manager.

The Sheet presents a record of the results of follow-through contacts and shows the date the report of contact was entered, the client's "current" condition of personal or social functioning, and whether or not the client has maintained the goal condition he/she had at the time of case closing. (In successful instances, the current condition at follow-through will be identical to the goal condition at the time of case closing.)

SERVICE DELIVERY REPORT

AGENCY
TYPE ID #

UNIT

WORKER ID NUMBER

CLASS

1	2	3	4	5	6	7	

ROUTING INFORMATION

<p>8 To Provider Agency</p> <p>CONTACT: _____</p> <p>AGENCY: _____</p> <p>ADDRESS: _____</p> <p>CITY: _____</p> <p>PHONE: _____</p>	<p>9 From Requesting Agency</p> <p>CASE MGR: _____</p> <p>AGENCY: _____</p> <p>ADDRESS: _____</p> <p>CITY: _____</p> <p>PHONE: _____</p>
---	--

CLIENT IDENTIFICATION

<p>10 Primary Client:</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>BILLING ID #: _____</p>	<p>11 Service Recipient (If other than Primary)</p> <p>NAME: _____</p> <p>PHONE: _____</p> <p>12 ID #: _____</p>
---	--

SERVICE DELIVERED

SERVICE TYPE DELIVERED: _____

13

REPORT DATE: _____	DELIVERY PERIOD--Initiated: _____ Thru: _____	=UNITS DELIV: _____	SERVICE STATUS: <input type="checkbox"/>
14	15	16	17

SERVICE STATUS: Continuing: _____ Completed: _____ Early Termination: _____

13

TOTAL CHARGE: \$ _____

19

EVENT REPORTING

20 Event Date	21 Time A/P	22 Hrs/Min	23 Mode	24 Who (I/F/O)	25 = Units	26 Attendance				
						Mon	Tue	Wed	Thu	Fri
_____	_____	_____	PTL	I F O	_____					
_____	_____	_____	PTL	I F O	_____					
_____	_____	_____	PTL	I F O	_____					
_____	_____	_____	PTL	I F O	_____					
_____	_____	_____	PTL	I F O	_____					

ACCOUNTING INFORMATION

CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE	2 PROBLEM	3 SERVICE REQUESTED Letter Code	4 DATE PLANNED	5 PROVIDER AGENCY Type ID #	Unit	MOI)
1 A B C D E F G H J 2			m o d a y r			6

SERVICE AUTHORIZATION

7 UNITS	8 RATE	9 FROM	THRU	10 STAFF PROVIDER ID	11 FUND CODE

12 SERVICE WORKER'S SIGNATURE

13 DATE OF ACTION

14 AUTH WORKER ID

15 APPOINTMENT DATE

CLIENT PROBLEM LIST/GOAL DATA SHEET
(YSIS-5)

Case Mgr Agency # _____
 Case Mgr Agency Name _____
 Case Mgr Name/ID # _____

Client # _____
 DOB: _____ Sex: _____

CASE STATUS

Date Opened: _____ Date Closed: _____ Reason: ____/____

SPECIAL PRESENTING AREAS

Date Entered	Code	Description	Date Entered	Code	Description

GOAL DATA

Entered	Goal Cond	Goal Date	Outcome Code	Cond at Outcome	Outcome Date	Comments

PROBLEM LIST

Date Entered	Status	Date Resolved	Code	Description
1				
2				
3				
4				
5				
6				
7				
8				
9				

FOLLOW-THROUGH DATA

Date Due	Date Entered	Cond	Goal Maint.	Comments

PREP DATE: _____

Case Management
Agency # _____

Client # _____

Case Management
Agency Name _____

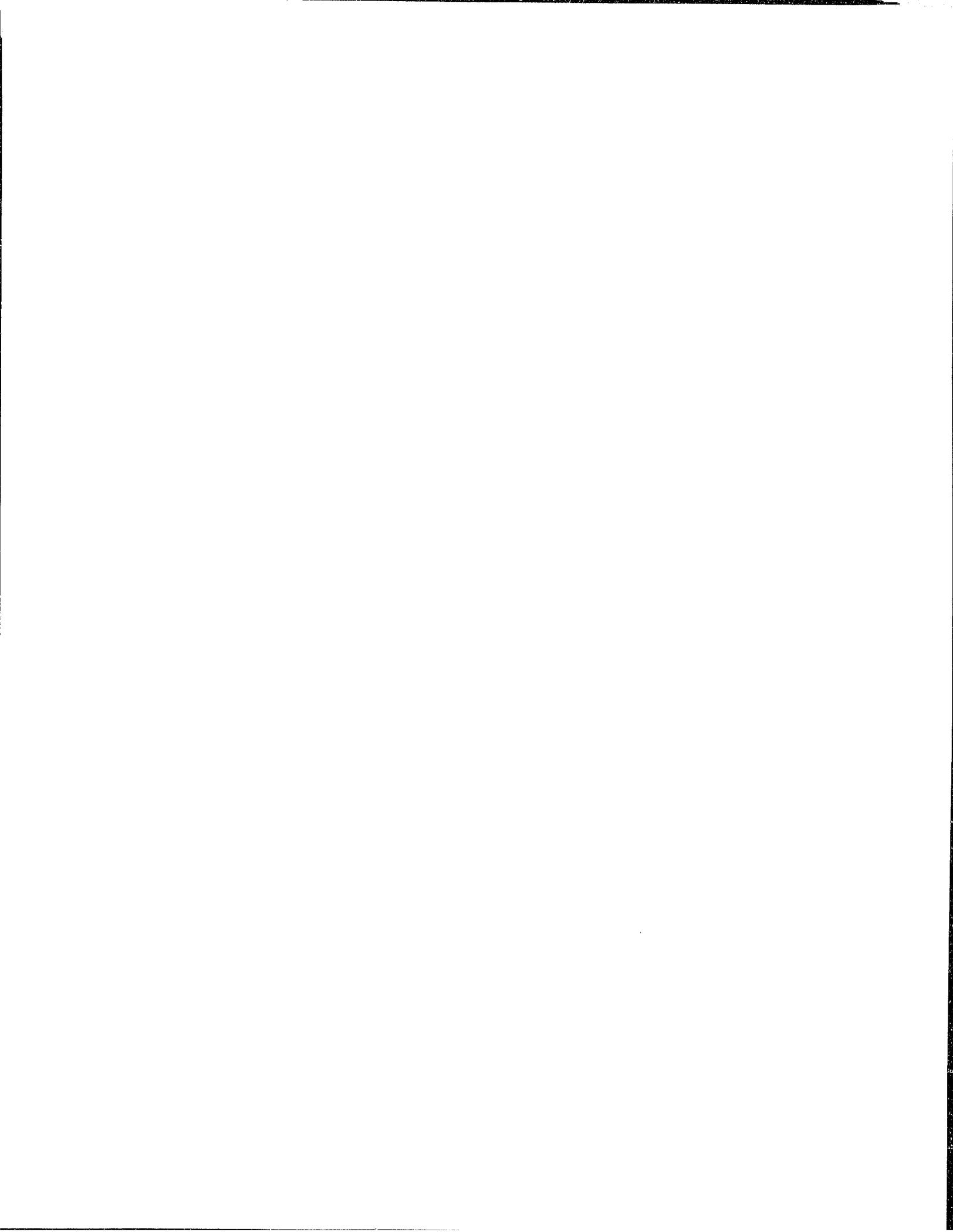
CLIENT SERVICE HISTORY SHEET
(YSIS - 6)

DOB: _____ Sex _____

Case Manager
Name/ID # _____

PROBLEM		SERVICE		UNITS REQ	UNITS DEL	DATE PLANNED	DATE APT	DATE CONF	DATE COMP	STATUS
#	CODE	CODE	DESCRIPTION							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							
			Provider #: Provider Name:							

PREP. DATE: _____



This Sheet, on the facing page, is used to provide the case manager with a summary display of a client's service history. It is prepared by the central records unit and sent to the case manager. It is used as a master ledger card to which all service information is posted as it is reported. The copy sent to the case manager is a photocopy of the ledger each time it is updated. (Reports to be posted may be gathered until the end of the week, so that only a weekly photocopy is made and returned to the case manager.)

The Client Service History Sheet identifies the client and his/her case manager and indicates the code of the problem for which the service is planned, the type of service (SERV CODE) requested, the number of units requested (UNITS REQ),

and the date planned (DATE PLANNED). When units have been scheduled and authorized via the Service Order Document, the Sheet will reflect the date of the client's appointment to arrive for service (DATE APT). The confirmation date (DATE CONF) will confirm the fact that the client arrived for an appointment. When the confirmation date appears, the STATUS column will have a two-digit code, either showing service status as begun or terminated for some reason at the time of confirmation (e.g., Not Eligible). As service is delivered and reported, the Sheet will reflect the UNITS DEL, and DATE COMP which will be the last day of the accounting period, unless the service is terminated. In such a case it will be the termination date and the STATUS code will show a termination status. Normally, when service has been completed as requested, the number of UNITS DEL will equal the number of UNITS REQ (Planned). All services listed are linked to a particular problem code.

C: REPORTS

The data collected by the system permit reports which provide analysis of complex relationships among goals, problems, services mix, costs, client types, and outcomes, and, in addition, reports which provide caseload activity in the current period, and quarterly and year-to-date summaries.

With a manual information system, of course, the user is limited as to the number and complexity of reports which can be generated by the number of staff available to do such work and time parameters.

Exactly which reports are produced depends in great measure on the unique management needs of the agency using the system and the agency's annual operation plan. (Ideally, reporting should always compare actual against planned performance.)

The following reports are listed as illustrations of the capacity of the YSIS to generate useful reports manually. Some agencies may wish to generate additional reports or modify the reports presented by changing data elements or formats.

The reports indicated here are primarily directed toward two purposes: (1) controlling client flow, including execution of service plans at the service coordination (or case work level) and administrative levels and (2) program analysis, planning, and management control.

The following is a list and brief explanation of the reports presented at the end of this subsection:

Report No. 01--Analysis of Contacts and Openings by Referral Problem: (See Page 21)

- provides a record of all contacts between the agency and prospective clients, showing the number of contacts by Referral Problem, the number and percent of contacts for whom cases were opened, and the number of contacts for whom cases were not opened by "Reason Not Opened." The report also shows the same information for total contacts. Some agencies may wish to generate a similar report by "Referral Source."

Report No. 02A--Client Characteristics at Case Opening:

- provides key characteristics of each client for whom a case is opened and summarizes the characteristics for all cases opened during a given period. The characteristics included in the report are illustrative, and a number of other characteristics could be substituted or added to a larger report sheet. (See Page 22)

Report No. 02B--Client Characteristics at Case Closing:

- is the same as Report 02A in format, except that it contains client characteristics for all cases closed. These two reports could be used together to create an additional report to present the characteristics of the total client population of an agency at the beginning or end of any given period. (See Page 23)

Report No. 03--Case Manager's List of Cases Opened:

- provides a listing of cases opened during the period by the case manager with related service data: date opened, presenting problem, goal area, etc. This report also presents the individual case manager's case load during the period: cases continued from last reporting period, cases opened, cases closed (from Report No. 04), and cases continued to the next period. This case load data is also transferred to Report No. 05, Agency Case Load Report. (See Page 24)

Report No. 04--Analysis of Case Closings: (See Page 25)

- analyzes each case the case manager closes during the period by goal achieved, goal not achieved, or closed without completing service (and the reason for not completing service). The data are then totaled to

compute a success ratio (of successful to unsuccessful closings). The total number of cases closed reported on this form is entered on Report No. 03 in the "Case Load" section.

Report No. 05--Agency Case Load Report: (See Page 26)

- presents by case manager within an agency or program the case load at the opening of the report period, new assignments (cases opened), closings, and case load at the end of the period. The work load of all case managers is summed for the total number of cases in the agency or program at the end of the reporting period. This report permits analysis of case load, case flow, and new assignments.

Report No. 06--Cases Requiring Review: (See Page 27)

- is produced for each case manager to alert him/her to close, replan, or take other action on a case. The report contains the identifying information of cases which need to be reviewed and the type of review to be taken--indicated by an asterisk in the appropriate action column(s).

Report No. 07--Unplanned, Unscheduled, or Overdue Services:

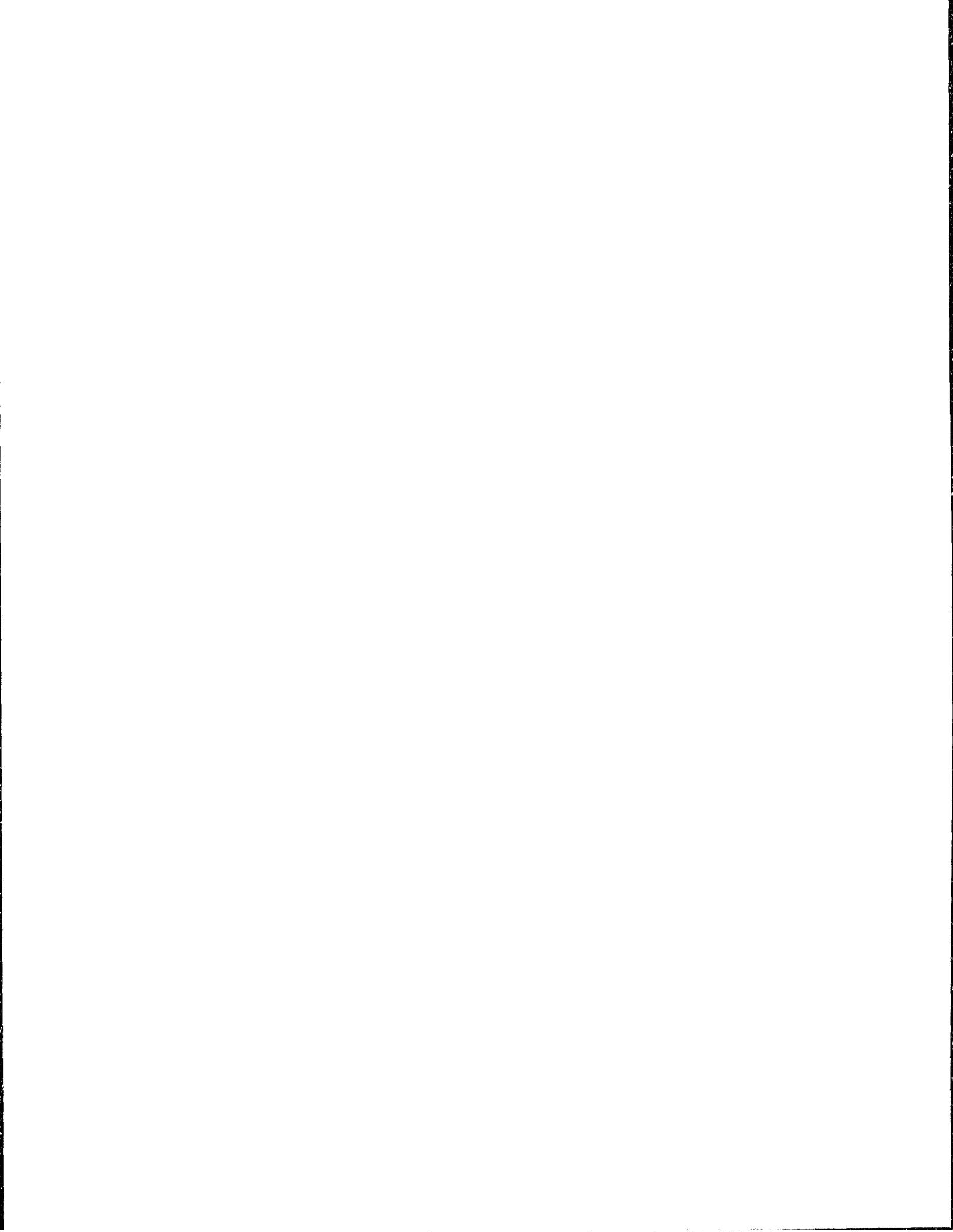
- notifies each case manager of problems without services planned, services planned which are late in being scheduled or rendered, services exceeding units ordered, etc. Each entry on the report is identified with a specific client. (See Page 28)

Report No. 08--Service Cost Allocation Report: (See Page 29)

- summarizes the number of units of each type of service delivered, clients served, and dollars expended. If an agency produces such a report for all services the agency delivers during the month, it will have a comprehensive picture of its service activity for analysis and planning purposes.

Report No. 09--Social Service Invoice: (See Page 30)

- identifies each client served and the type(s) and unit(s) of service delivered. The report can be used to create invoices for other third party payees.



The YSIS can be used by a single agency or a system of agencies. Agencies could have one program operating from one site or multiple programs operating from several sites.

The type of agency or service system the YSIS is used to support will influence significantly the organization of the files to be maintained. Within a single agency, with one program, operating from one site, most files would be organized by case manager and by client. In a multi-agency system, with a multi-program structure, the files would be organized by agency, by program type, by site, by case manager, by client in descending order.

The presentation of the manual operation of the YSIS would be far too complicated if it were to address all of the possible system/agency/program/site structures which could use the system. In the following presentation, therefore, it is assumed that the YSIS will support several agencies, each offering a single youth service program of case management and each operating from only one site. This structure has been chosen for presentation because it is the one most likely for potential manual users of the YSIS. It is assumed that most agencies/service systems with more complex structures would have the resources to automate part or all of the system. The files described below, then, will be organized by agency, by case manager, and by client.

It is also assumed that all agencies will forward data collection forms to a central records unit for processing. The central records unit will establish the necessary records and files. If properly maintained, the data in these files will be ready for the processing of the appropriate outputs (reports, etc.). The following files should be maintained by the central records unit:

Problem/Goal/Service History File

- This file contains a Problem List/Goal Data Sheet and

a Client Service History Sheet on each open case. A record is created in this file when the initial Service Planning Form (YSIS-2) is filed along with the Client Base Data Form (YSIS-1) and Supplement (YSIS-1A) opening the case. This file is used to maintain all case action, goal, problem and service data in summary form. It is organized by agency/case manager/client.

Client Follow-Up File

- This file contains the Problem List/Goal Data Sheet on all closed cases for which follow-through contacts are planned.

Client Master ID Record File

- This file contains an identification card on every client for whom a case has been opened in a particular agency. Each time the agency reopens the case, it is posted to this card. It is organized by agency, by client last name.

Client File

- This file contains the client's folder which includes a copy of all data collection forms (source documents) generated by the case. It contains the folders of open cases only. It is organized by agency/client.

Closed Case File

- This file contains the folders of all clients whose cases have been closed. In addition to data collection forms, the client's folder (when in this file) contains the Client Service History Sheet and (after the follow-through period) the Goal Data/Problem List Sheet. It is organized by agency/client/case opening date.

- This file contains Client Base Data Forms (YSIS-1) for all contacts which did not result in a case opening. Organized by agency/month/date of contact, forms are destroyed after being on file over 90 days.

Monthly Report File

- This is a temporary work file to maintain report work sheets while they are being posted during the month. At the beginning of each month, each report to be generated at the end of, or during, the month has a blank report tally form placed in this file. As client forms are processed, the appropriate report worksheet is pulled from this file and posted with information from the forms. At the end of the reporting period, the work sheets are pulled, totaled, and a final report form is typed. A new set of work sheets for the file is then prepared for the next month. The file is organized by agency/report type. The prior month's work sheets are maintained for 30 days and then discarded.

Monthly Social Service Invoice File

- This file is similar to the Monthly Report File in use, but contains the work sheets for Report No. 09, Social Service Invoice, only. The reports in this file are organized by agency/third party payee. The file could also be organized by case manager (within agency).

In addition to the above files, the central records unit should consider maintaining various files which contain historical master copies of all reports generated. Related information to be maintained would be a master data dictionary of all data elements used in the system as well as a Problem/Service dictionary of all problem and service codes used in the YSIS.

Part C, Manual Operation of the Youth Services Information System, provides information for operating the YSIS on a manual basis. With this information, an agency can decide whether it would be best to adapt the processing approach suggested or to develop new approaches reflecting a substantially different agency approach to processing. There are, of course, a number of other approaches to processing which could be developed.

In regard to data collection forms, agencies should try to use the model forms because they include all of the recommended data elements. The formats of the forms, however, could be changed and/or additional data elements added. Agencies of course may use additional data collection forms to meet their unique needs (e.g., personal financial statements of clients, formal application documents, more detailed social histories, etc.).

In regard to report formats, agencies should do a very careful analysis of their reporting needs before determining the final reports and/or formats needed. Many other types of reports can be generated from the data maintained in the system.

The YSIS has been designed to permit automation, and agencies which are considering automation should explore the option seriously. Mini-computers have brought the cost of automated systems within the economic reach of the private and smaller public agencies.

PART B

Basic Case Management Procedures

The Case Management procedures and data collection instructions which are presented in the following pages of Part B combine to form a unified service delivery and information system. The very process of service delivery generates the data needed by the information system, and the information system, in turn, generates the data needed by case managers in the process of service delivery to provide more coordinated and comprehensive service. The information system has five primary features:

- 1) It is client-oriented in that its design focusses on the individual client and his/her service record and that the data generated by this focus forms the primary data base of the system.
- 2) Even though the general approach to service delivery can be said to be goal-oriented, each service provided to a client must be oriented to a specific problem and the key to effective case outcome is how well the case manager can identify the client's problems and organize them for solution.
- 3) The central coordinating mechanism is the service plan; no service may be requested or delivered for a client without first being entered in the service plan.
- 4) It is planning-oriented in that the information collected is used to build, at an aggregate level, a history of service gaps; patterns of contacts and referral sources; and profiles of clients, their problem mixes, goals, and goal outcomes.

- 5) It is self-policing in that exception reporting is based on missing data and overdue procedural events; therefore, missing data suggest overdue procedural events, which in turn signal missing data.

The following sections of Part B cover the basic procedures of the information system and present detailed explanations of the data collection instruments and definitions of data elements of the system. The procedures are outlined according to the phases of services along the client "pathway" through the case management process.

The appendix to Part B presents the basic data collection forms and detailed instructions for their preparation and use.

ORGANIZATION OF CASE MANAGEMENT PROCEDURES

The procedures are organized according to client movement along the case management "pathway" which begins with "Contact" and ends with "Follow-Through." (See Figure 1 on page 35.) The procedures may be located according to the following section numbers:

- 1.0--2.0 Contact and Intake
- 3.0 Problem Determination and Goal Setting
- 4.0 Service Plan Development
- 5.0 Service Delivery
- 6.0 Progress Assessment and Management
- 7.0 Closure
- 8.0 Follow-Through

INDEX TO PROCEDURES WITHIN SECTIONS

- 1.0 Contact
- 1.1 Refer Out
- 1.2 Internal Service Provision
- 2.0 Application for Service

- 2.1 Information and Referral Services
- 2.2 Client Identification
- 2.3 Assign ID Number
- 2.4 Retrieve Previous Record (Prior Client)
- 2.5 Present Client
- 2.6 Eligibility Determination
- 2.7 Formally Assign Case Manager
- 3.1 Problem Identification
- 3.2 Formulate the Problem List
- 3.3 Establish the Client's Goal Condition
- 3.4 Identify and Record Special Presenting Areas
- 3.5 Complete Problem Identification
- 4.1 Request a Service for Each Problem
- 4.2 Send Service Planning Form to Data Processing Clerk
- 4.3 Ordering Services
- 4.4 Scheduling/Authorize Service
 - 4.4.1 Authorize
 - 4.4.2 Early Termination/Rejection
- 4.5 Distribution of Service Order
- 4.6 Complete Service Ordering
- 5.0 Prepare Service Delivery Report
 - 5.1 Services Provided by Others
 - 5.2 Services Provided by Case Manager
 - 5.3 Review the Client Service History Data Sheet
 - 5.4 Short Cut Reporting and Updating
- 6.1 Manage the Problem List
- 6.2 Goal Management
 - 6.2.1 Highest Goal Achieved--Maintenance Case
 - 6.2.2 Highest Goal Achieved--Close Case
 - 6.2.3 Goal Achieved--New Goal Established
 - 6.2.4 Goal Change (Without Achievement)
- 6.3 Tracking Procedures
- 6.4 Planning New Services
- 6.5 General Instructions for Updating the Client's Data Base
- 7.1 Update Client Problem List--Goal History Sheet
- 7.2 Notification of Service Providers of Case Closing
- 7.3 Close Case
- 8.1 Follow-Through Procedure

SECTION B 1-2: CONTACT AND INTAKE PROCEDURES

CASE MANAGEMENT PROCEDURES

Page ____ of ____

Procedure No. : 1.0--2.0
 Subject : CONTACT AND INTAKE
 Date Issued :
 Supersedes No. : New

Distribution :

INTRODUCTION

Overview

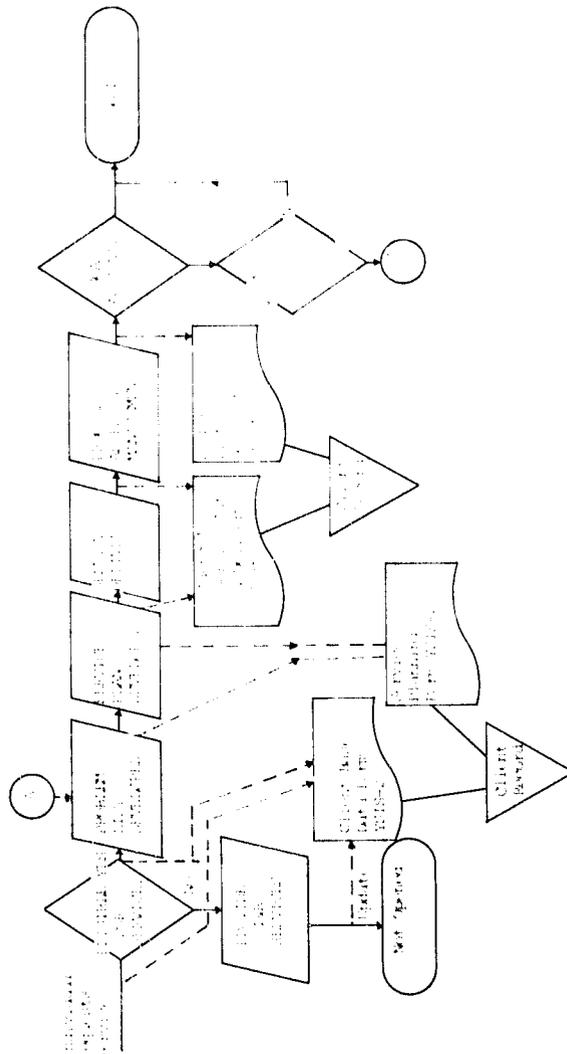
Individuals will arrive at your agency under a number of circumstances: (1) as a new referral (from police, court intake, a self referral, etc.), (2) as an existing client of your agency returning for an appointment, or (3) seeking only information and referral services.

If your agency also provides direct services in addition to case management, a contact might be the client of another case management agency sent to receive some of those other services.

Since the individual carrying out the reception functions may not be the case manager, these instructions are addressed to agency staff in general.

The basic functions performed in these phases are to:

- List the contact's primary presenting problem and chief service requests.



- Refer out contacts who have inappropriately contacted the agency.
- Identify the individual to the YSIS.
- Direct clients who are reporting for a specific service of the agency, or already assigned to a case manager, to the appropriate worker or unit.
- Identify new clients and send them to a case manager or crisis counselor.

Detailed Instructions for Data Collection

Detailed instructions for the completion of forms may be found in the Part B Appendix. To fully understand the following procedures, it would be helpful to be familiar with the following forms which are described in the Appendix:

- Client Base Data Form (YSIS-1)
- Client Base Data Supplemental Form (YSIS-1A)

PROCEDURES

1.0 Contact

- Greet the youth and determine his/her service needs. Using the Client Base Data Form, record the presenting problem and chief service request using the appropriate codes from your Resource Directory. If the contact was referred enter the type and identification number of the referring agency.

1.1 Refer Out

- If the contact has inappropriately contacted your

agency, refer him/her to the appropriate agency via telephone confirmation. Complete the Client Base Data Form by entering the contact's year of birth (not full date) in Item 16, check the NOT OPENED box in Item 37 (Case Action), and enter the code for either INFORMATION ONLY or REFERRED OUT in Item 38 (Reason Not Opened). In Item 34, enter your agency's identification code, in Item 36 your intake worker name and number, and in Item 33 the date of contact.

Put the form in an I&R tally folder (which will be sent to the data processing clerk at the end of the day).

1.2 Internal Service

- Some case management agencies may provide specialized services in addition to case management. The contact may be applying for such services, per se, or may have been sent by a case manager in another agency for such specialized services. Such contacts may bypass the case management process. If your agency has such a procedure it should be noted here:

2.0 Intake for Service

- If the youth is in need of your program's services, he/she and the parents should be interviewed to gather

the information necessary for completing the Client Base Data Form. Pending the outcome of the interview, all four sections on the front of the form should be completed.

The Client Base Data Supplemental Form should also be completed with the exception of offense history. Offense history data should be made available only for evaluation purposes under conditions controlled by the court.

2.1 Information and Referral Services

- In the process of the intake (or application) interview, it may be obvious that the youth and his/her family need information or referral service. If so, information should be provided about the community's primary human service agencies and how to use them. Information which may enable some youths to solve their problems may also be provided. If the youth's needs are met by this counseling, only the CONTACT/CASE ACTION portion of the Client Base Data Form need be completed, using the same procedure as in the REFER OUT section, above.

2.2 Client Identification

- If the results of the interview are that the youth will receive services, an identification check should be made to see if the youth is a previous or present case management client of the agency. If a previous client, go to procedure 2.4, below.
- If a present client, go to procedure 2.5. below.
- You can determine the previous or present status of the

applicant by checking for an index card with his/her name in your agency's Client Master File.

- If the client's name is not in the file, assume that he/she is a new client and assign a unique identification number by following procedure 2.3.

2.3 Assign ID Number

- Each client must have a unique identification number assigned by the agency. The number may be based on any system the agency wishes.
- Some agencies have a policy of assigning a client a confidential number known only to the agency. If a computerized information system is used, this means that such agencies will not keep the client's name in the computer file; therefore, a cross index between the identification number in the computer file and the client's name must be maintained in the agency. This can be done on the index card in the Client Master File.
- Give the client's Client Base Data Form (YSIS-1) to your agency's client identification number control clerk for assignment of the confidential number (entered in Item 9 on the form). (The copy of the Client's Base Data Form going to computer entry will be minus the client's name and address.) Upon assignment of the identification number, go to procedure 2.4.

The control clerk will create a Master Record Identification Card which will be filed alphabetically by LAST NAME. The card will have a format similar to

the following:

DOE, John H.	DATE OF BIRTH	ID# 454 02 0800	
	<u>DATE OPEN</u>	<u>DATE CLOSED</u>	<u>REASON CLOSED</u> <u>CASE MANAGER</u>
1.	11-25-76	3-10-77	COURT JURISD. J. Good, 0158
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

(This portion of the card could also include other information such as address, other family members, etc.)

This card will essentially be used to identify previous and current clients (open or closed cases) as part of the intake procedure. The case manager will not need to use the card file because he/she will have a client folder indexed by ID Number. The client's name and address, and other household members will of course be in the folder on the Client Base Data Form (YSIS-1). On reports bearing only the client's ID Number, the case manager will learn to quickly identify the client without going to the folder file each time.

2.4 Retrieve Previous Records

- If a prior client, the case manager may wish to retrieve the youth's past Problem List and service record. The worker may then call a brief staffing/reopening conference, including the client's past case manager, if possible, to determine the appropriate course to take. If it is believed that further

service will not offer hope of success, the youth and parents will be so informed and action will be terminated with a "NOT OPENED" action indicating the reason.

- If further service promises success, go to 2.6.

2.5 Present Client

- If a youth has a current case manager, determine if he/she is present for an appointment with the case manager. If not there is a problem which must be resolved. A brief staff meeting should be held to determine if the client is dissatisfied with the present case manager, if he/she is not aware that a case manager has been assigned, etc.

- If the client is not satisfied with the present case manager go to point 2.7 and assign a new case manager. If he/she is satisfied, proceed to Procedure W. 6.0 where the case manager will review problems/goals.

2.6 Eligibility Determination

- Certain youth service agencies may require clients to meet certain eligibility criteria for receiving service (or certain kinds of services). If the client is not required to meet an eligibility test, go to procedure 2.7. Otherwise, determine the client's eligibility using established criteria.

- If the applicant is not eligible, notify him/her and the parents and arrange referral to an agency where he/she may be served. Discontinue action on the case and report the outcome, using Procedure No. 2.1, above, except enter the code for 'NOT ELIGIBLE' in

Item 38 (REASON NOT OPENED).

- If the youth is eligible and desires case management, go to procedure 2.7. If the applicant refuses case management, use procedure 2.7, except enter the code for 'CLIENT REFUSED' in Item 38 (REASON NOT OPENED).

2.7 Formally Assign Case Manager

- Formally assign the case manager by completing the following items on the Client Base Data Form:
 - Item 37, CASE ACTION: Mark 'O' for CASE OPEN
 - DATE : Enter date on which case opened
 - Item 41, CASE MANAGER NAME/ID : Enter the name and identification number of the case manager
- Complete the remaining items on the Client Base Data Form and go to Procedure No. 3.0 (next).

CASE MANAGEMENT PROCEDURES

Page ____ of ____

Procedure No. : 3.0
Subject : PROBLEM DETERMINATION AND GOAL SETTING
Date Issued :
Supersedes No. : New

Distribution :

INTRODUCTION

Overview

The basic functions performed in this phase are:

- Collect needed client data not supplied in previous phases.
- Immediate identification of emergency problems.
- Assist the client in the identification of his/her problems and in the formulation of a service goal state (i.e., which level of social functioning he/she wishes to be in upon completion of the service).
- Establish the client's planned goal achievement date.
- Identify problems which must be resolved to reach the client's goal and for which services will be planned.

The procedures of the Problem Determination phase are

concerned more with the reporting of the findings than with the process of arriving at them. That is, the procedures of this phase cannot address the process by which the professional in a youth service agency will formulate or identify the client's problems.

To get a clear picture of the client's problems a number of social service agencies conduct a social study. Some agencies, depending on their particular structure, may offer psychological examinations as well as an interview between a staff psychiatrist and client. The social study may cover the developmental history of each of the family members, the development of the family as an entity, and the current relationships and interactions among family members. Whether the case management agency or another agency offers such services, it is intended that the case manager her/himself would not perform such functions. Rather, it is expected that the case manager would request such services through the Service Plan and refining the Problem List as such diagnostic services reveal more specific problems. The case manager should be watchful for signs of learning disabilities, mental retardation or substance abuse. The case manager should also be watchful for the youth's need of a "viable role."

The procedures presented below outline the general process for collecting the required problem and goal information through a client interview and assembling the data on the Problem List section of the Service Planning Form (YSIS-2).

Detailed Instructions for Data Collection

Detailed instructions for the completion of forms may be found in the Part B Appendix. To fully understand the following procedures, it would be helpful to the case manager to be familiar with the detailed instructions for the following form:

- Service Planning Form (YSIS-2)

Background Information

Please review the conceptual discussion of the problem list and goal model in Part A Section 1.

PROCEDURES

3.1 Problem Identification

- During the intake interview, both the youth and the agency agreed that there was a problem, that the youth would like to have the case management help of the agency, and that the agency felt it could be of help. The case was then opened.
- During the problem identification interview, the case manager gains a clearer picture of the problem(s) for the creation of a problem list.

3.2 Formulate The Problem List

With a copy of the Service Planning Form in front of you, as you talk with the client:

- Discuss thoroughly with the client and analyze other available information about the client; write a brief narrative description of each of the problems on the "comments/notes" line.
- After all problems have been listed, enter the present date in "Date of Transaction" field on the upper right. This will be recorded in the central records as the recording date for each problem.
- To the left of the problem list is a box for reporting the "Status" of each problem (Item 11). For each problem listed, indicate the status by entering one of the following codes:

* X= Inactive. The problem is considered "inactive" and a solution is not being planned (e.g., a significant problem resolved in the past but which should be noted for its possible influence during service provision).

* N= Not Appropriate. This problem will not receive services at this time either because of the wishes of the client or his/her level of functioning.

* I= Identified as a barrier to goal achievement. The problem will remain in the 'I' status until services have been successfully applied to it. (When the problem is no longer a barrier, the status will be updated to either a 'C' (now controlled) or 'R' (removed).)

- "Problem Codes" (Item 10) should be entered immediately after the client interview is completed. Using the problem code section of your Resource Directory, classify the narrative problems on the list and enter the most appropriate four digit code for each problem.

3.3 Establish The Client's Goal Condition

- The goal should be the goal mutually arrived at between the case manager and the client, except in the case of a protective services goal. Using the goal table for Item 14 (see detailed instructions), enter the 3-digit code which best describes the level of personal and social functioning at which the client will be when services have been successfully completed, when a new higher goal will be established, or when goal maintenance begins.
- Enter the future date by which it has been agreed that the client will have reached his/her goal. This date should not be more than six months away.

3.4 Identify and Record Special Presenting Areas (Optional)

- Some agencies may wish to record certain behavior indicators, test scores, etc. as part of the problem identification process, e.g., "aggression," "fighting," "truancy," etc.
- Such indicators should be entered in Item 12, Special Presenting Areas. See detailed instructions for specific instructions in this regard.

3.5 Complete Problem Identification

- The problem identification phase of the interview should now be completed. At this point, the worker should move to the service planning phase. This may happen immediately or a second interview may be scheduled pending the establishment of further information. When ready for the service planning phase, go to Procedure No. 4.0.

CASE MANAGEMENT PROCEDURES

Page ___ of ___

Procedure No. : 4.0

Subject : SERVICE PLAN DEVELOPMENT

Date Issued :

Supersedes No.: New

Distribution :

INTRODUCTION

Overview

The basic function of this phase is the development of an initial plan for the resolution of each problem/barrier on the client's problem list which has a status of 'I'. The plans may include development of further information such as a professional assessment or diagnostic work-ups as well as the education of the client or his/her family about his/her problems. In preparing the plans, the case manager will:

- List the direct services, purchase services, or referral services (no charge) required to resolve each problem.
- Identify a provider for each service on a tentative basis.
- Review the plan with the client and obtain his/her approval of the plan.
- Arrange and schedule each service planned.

Detailed Instructions for Data Collection

During this phase, three types of reports will be completed and entered into the client's records: (1) the "Service Requests" portion of the Service Planning Form, (2) the Service Order Document, and (3) Authorization to Release Confidential Information.

Detailed instructions for the completion of these forms may be found in the Appendix to Part B. To understand fully the following procedures, it will be helpful if the case manager is familiar with the detailed instructions for the following forms:

- Service Planning Form (YSIS-2)
- Service Order Document (YSIS-3)
- Authorization to Release Confidential Information (YSIS-7)

Background Information

Please review the conceptual discussion of the service plan in Part B, Section 1.

PROCEDURES

The service planning process is carried out in two steps: (1) all service requests are entered in the "Service Requests" section of the Service Planning Form; (2) the implementation or ordering of each service is carried out by the preparation of a Service Order Document for each service request entered.

It should be noted that each service requested should be linked to a specific problem from the problem list section of the Service Planning Form. No problem code should be placed in Item 19 which does not also appear in Item 10 on the Problem List.

4.1 Request A Service For Each Problem

- Select the first problem for the list with a status of 'I' and enter the code in Item 19 on the first line.
- In the "Comments/Suggestions/Notes" section of the first line, write in the service required and possible a potential provider.
- If the client is receiving the service--as opposed to another member of his/her family--circle a '2' in Item 18 (1=adult, 2=child). If any member of the family is participating in the service or receiving the service independently, circle the member's identification letter. (The identification letter of the household members may be found on the Client Base Data Form at the bottom section.)
- Enter the code for the type of service requested and, if appropriate, a special letter designator. Service codes may be found in the service code section of your Service Directory. See the Part B Appendix for detailed instructions in completing Items 20 and 21.
- Enter the number of units requested. See the Part B Appendix for detailed instructions in completing Item 22.
- Select the second problem from the list with a status of 'I' and repeat the above process until services have been requested for all problems with a status of 'I'.
- More than one service. If more than one service is to be used in addressing a specific problem, go to the next line, enter the same problem code and enter the new service code.
- As many services as desired may be entered (using even a second form if necessary) but the same service may not be requested more than once. Requests for different amounts of the same service (i.e., identical service

codes)--even if for different problems--should be combined into one request and entered on one line.

4.2 Send Service Planning Form to Data Processing Clerk

- Upon completion of the Service Planning Form, the second copy should be sent immediately to your agency's data processing clerk.

4.3 Ordering Services

For each service requested you must now select a service provider and order the service. Use the Service Order Document to record your service order (or use a similar form established for this purpose by your agency). With the Service Order Document handy, for the first service request on your Service Plan, carry out the following steps:

- The shaded portion at the top of the Service Order Document contains fields which identify your client, agency, and the case manager. DO NOT enter these numbers on the original (which goes to the case manager). After the form has been completed tear off the original page and complete the shaded portion which is used for data processing purposes.



CONTINUED

1 OF 3

- If the service requested is to be provided directly by your agency, write "DIRECT" on the 'AGENCY' line of Item 8. If other than the case manager, enter the name of the internal staff member on the 'CONTACT' line.
- If service is to be purchased from contract vendors, use your agency's "Vendor Directory" and enter the required information in Item 8. Complete all of the required information in Item 9.
- If the service is to be provided to your agency on a voluntary basis (no charge) or on an other than contract/vendor basis, carry out the following steps.

If provider is in your agency's Resource Directory:

- Turn to the provider's description page and extract the information you need to complete Item 8. Also enter the provider's identification number in Item 5 in the 'ACCOUNTING INFORMATION' section.
- Also review eligibility requirements, hours, fees, etc. so as to avoid making an improper referral.
- Then go to procedure 4.4, SCHEDULE/AUTHORIZE SERVICE.

If provider is not in the Resource Directory:

- Obtain an identification number for the provider and recommend its inclusion in the Resource Directory. Notify the central records unit (CRU) staff by telephone that you have identified and plan to use a provider not in the Resource Directory.
- Request that an identification number be created and assigned to the provider. This should be done immediately and given to you over the telephone. You will

be contacted later by staff for further information about the provider.

- When the number has been assigned, complete Items 8, 9, and 5. Then go to Procedure 4.4, SCHEDULE/AUTHORIZE SERVICE.

If provider cannot be found:

- Prepare a YSIS System Development Memorandum to report this "gap" in the community's human service system and send it to the CRU staff. See Appendix Part B for detailed procedures on completing this Memorandum.
- The "gap" in service is also reported to the information system's files: In Item 25 on the Service Order Document, there is a 2-character 'SERVICE STATUS' box. Enter the code '2J' ('NO PROVIDER AVAILABLE') in the box.
- If an alternative service is desired, create a new Service Request (by adding another line to the Service Planning Form); if not, address the next service request in the plan and begin ordering again. The above is a very simple procedure once learned by the case manager.

4.4 Scheduling/Authorize Service

Contact the provider by telephone and arrange the referral by appointment. Be certain to gather at least the following information in your discussion:

- CONTACT (Item 8) - The name of the provider's worker the client is to contact for service upon arrival.
- APPOINTMENT--DATE/TIME (Item 24) - The date and time at which the client is to arrive for his/her

intake interview or to begin service at the provider agency.

Complete the SERVICE ORDER/REQUEST portion of the Service Order Document by entering the service information from the Service Planning Form. Then drop down to the ACCOUNTING INFORMATION portion of the form by transferring the information for Items 1, 2, 3, and 4 from the Service Planning Form. Item 5, 'AGENCY', is the number of the provider agency. Item 6, 'MOD', requires a 1-digit code indicating the method of service delivery:

- D = Direct provision by your agency
- P = Purchase from a private agency
- S = Purchase from a state government agency
- N = Purchase from a non-state government agency
(e.g., a city agency)
- V = Provided without charge by any agency

4.4.1 - If the 'MOD' is other than a 'V', your agency may require you to have the service officially authorized; in some cases the case manager may be able to make such authorizations. Items 7 through 14 in the ACCOUNTING INFORMATION portion of the form are the official record of service authorization and constitute a formal order of service to the vendor.

- Item 7, 'UNITS', should correspond to the number of units in the SERVICE ORDER/REQUEST portion in Item 23, 'QTY' (Quantity of Units).
- The official in your agency who has authority to approve the service should complete Items 11 through 14.

- Complete this portion of the form by entering the APPOINTMENT--Date (Item 24) in the SERVICE ORDER/REQUEST portion in the field for Item 15, 'APPOINTMENT DATE'. (The transfer of the date from Item 24 down to Item 15 is for data processing convenience.)

- Ignore Items 16-19 which are reserved for future use; they will be used for billing third party payers.

4.4.2 The SERVICE TERMINATION/REJECTION portion of the form (shaded in gray) is not completed unless the service is to be terminated by the case manager before the authorized number of service units has been provided to the client. (If an appointment has been made but the service was not authorized, this portion could be used as a courtesy to notify the provider that the appointment has been cancelled; a telephone call, however, might be more appropriate.)

For use as a SERVICE TERMINATION notice:

- In Item 29, 'OFFICIAL NOTICE' enter the date beyond which services will no longer be provided on the two file copies of the form (the case manager's file copy and the copy returned by the service provider when service was confirmed).
- Forward the file copy to the service provider and keep the returned copy in the case file. Prepare a Service Delivery Report to notify the data processing clerk of the termination of the service. (See Procedure 5.0 below.)

For use as an authorization REJECTION notice:

- When a request for a purchase of service authorization

is not authorized, the reason will be indicated in Item 26; enter the appropriate code for the reason in Item 27, SERVICE STATUS CODE. (See detailed instructions in Appendix I for code table.) Enter the date of rejection in Item 28.

- Retain the file copy but send the copy which would normally go to the service provider to the data processing clerk to close out the service request.
- Plan a new service; depending on the REJECTION reason, you may have to find a 'V' service (without charge). Of course, if you cannot find an appropriate service you may have to close the case.

4.5 Distribution of Service Order

- When all sections of the form are completed, the original and the first copy are sent to the service provider; the second copy will be sent to the data processing clerk; and the third copy is retained in the case manager's copy of the client's file folder.
- The SERVICE CONFIRMATION portion of the form will be completed by the service provider on the day of the appointment and the first copy returned to the case manager for retention in the local file. The case manager completes the STATUS box in Item 25 of the SERVICE CONFIRMATION portion of the form on the 1st, 2nd, and 3rd copies and sends the second copy to the data processing clerk. If the service was not confirmed (e.g., a client 'NO SHOW'), this will close the service order.
- In the case of a non-confirmed service, the client will have to be contacted and a new service planned, if appropriate.

- In the event a provider fails to return a SERVICE CONFIRMATION report, the case manager should follow through to obtain information on service delivery, update the SERVICE CONFIRMATION portion of the form him/herself, and forward the second copy to the data processing clerk.

4.6 Complete Service Ordering

- Repeat the above procedures for each service request on the Service Planning Form and for any new service request as it is added.
- The client will then move into the Service Delivery phase. Go to Procedure No. 5.0, Service Delivery.

CASE MANAGEMENT PROCEDURES

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Procedure No. : 5.0
 Subject : SERVICE DELIVERY
 Date Issued :
 Supersedes No.: New

Distribution:

INTRODUCTION

Overview

The basic functions performed during this phase are:

- Monitor service delivery to insure that services are being scheduled and rendered as planned and on schedule.
- Report on service delivery.

Detailed Instructions for Data Collection

The primary data collection form considered in the procedure is the Service Delivery Report (YSIS-4).

In addition, Report No. 07, Unplanned, Unscheduled, and Overdue Services, generated by the information system will aid the case manager in tracking service delivery.

Detailed instructions for completion of the form and use of the reports may be found in the Appendix to Part B. To understand fully the following procedure, it would be helpful

if the case manager is familiar with these instructions.

PROCEDURES

In previous procedures, it has been shown how services are requested, ordered for delivery, and confirmed. The subject of this procedure is the reporting of such services.

The responsibility for monitoring and reporting the delivery of planned services is solely that of the case manager. In the cases of direct and purchase of service providers, there is an equal responsibility on their part to keep the case manager informed by providing him/her with Service Delivery Reports. However, acceptance of these reports and seeing that they get to the data processing clerk is the case manager's duty.

In the case of services provided to a client by voluntary agencies, the case manager may probably have to prepare the Service Delivery Reports after a visit (or telephone contact) with either the provider or the client.

A Service Delivery Report (YSIS-4) is to be completed and submitted to the Data Processing Clerk by the case manager for every client for every service authorized and delivered, including the provision of case management as a service.

Pre-positioned stocks of Service Delivery Forms should be delivered to all providers of service. The form can then be completed and submitted as required (no less than monthly).

5.1 Services Provided by Others

- From participating provider agencies, the case manager will receive a monthly Service Delivery

Report (2 copies) for each service delivered to the client during the previous monthly accounting period.

the appropriate code in Item 17, SERVICE STATUS (if the provider has not already done so), to terminate the service:

- He/she will also receive a Service Delivery Report immediately upon completion or early termination of a service order/request.
- For providers not participating in the service reporting effort, the case manager will have to determine the service activity during the previous month and prepare the Service Delivery Report in place of the provider.
- Essentially, the Service Delivery Report is an update report to the Service Order Document. The ACCOUNTING INFORMATION portion of the Service Delivery Report is an exact duplication of the accounting information on the Service Order Document to ensure that the report is updating the correct order record (i.e., to guarantee a perfect match of report to order).
- The SERVICE DELIVERED portion of the Service Delivery Report indicates the period during which the service was delivered, the actual number of units delivered, the service status ("continuing"), and the charges for the service (if any).

- * 6X = Service completed, According to plan, Satisfactory
- * 6Y = Service completed, According to plan, Unsatisfactory
- * 6Z = Service completed, According to plan, Further service indicated

If the status is '6Z' a new service request can be made.

Against his/her knowledge of the status of each of the client's problems and progress toward the case goal, the case manager reviews the Service Delivery Report as follows:

- Determine if early terminations or inadequate delivery of units indicates the need for greater coordination with the provider and the client, the need for a new service plan, or the closing of the case (or other appropriate action).
- Determine if services should be continued as planned.
- After the above review is completed, the case manager writes the date of his/her review over the provider's report date (Item 14 in the SERVICE DELIVERED portion) and enters his/her initials below the SERVICE STATUS (Item 17) box, indicating approval of the report.
- One copy of the report is then sent to the data processing clerk and the other is placed in the client's folder and attached to the appropriate Service Order Document.

- Compares the report with the latest copy of the Client Service History Record (discussed below) to determine if the authorized number of service units have been delivered. If so, he/she can enter

5.2 Services Provided by Case Manager

- The case manager will also prepare a Service Delivery

Report for services he/she provides. However, the case manager (and any other provider of direct services within the case management agency) also does "EVENT REPORTING."

- "Event reporting" is a method of reporting all service contacts during a period, either to accumulate a periodic total figure for services provided or for management analysis purposes.
- For each specific type of service which the case manager is providing directly to the client--including case management services--the case manager will maintain an event log on a separate Service Delivery Report. For example, in addition to a Service Delivery Report for Case Management, the service provider might also have provided crisis intervention counseling, tutoring, etc. In such cases, both of these should be in the service plan and reported on separate Service Delivery Reports. (It is recommended, as noted elsewhere, that case managers avoid the direct provision of such services as tutoring because it reduces their effectiveness as managers.)

A case manager will prepare the Service Delivery Reports as follows:

- Complete the client, agency, and worker identification information at the top of the Service Delivery Report.
- Simply write "Case Manager" in the Provider Agency CONTACT field in the ROUTING INFORMATION portion of the form.
- In the EVENT REPORTING portion of the form, record each contact with the client or others in regard to case management services. (Ignore the shaded area

"Attendance").

- When all event lines have been used, total the number of units and enter the number in Item 16 ('# UNITS DELIV'), above.
- Complete the above section of the SERVICE DELIVERED portion:
 - * For Service Type Delivered, enter "Case Management," or title of any other direct service which you provided.
 - * Enter the date the report is being completed.
 - * For Delivery Period, in the "Initiated" field enter the first "Event Date." In the "Thru" field enter the last "Event Date" listed.
 - * If the service is continuing, enter either a '2S' ('SERVICE CONTINUING, SATISFACTORY') or a '2U' ('SERVICE CONTINUING, UNSATISFACTORY') in the 'SERVICE STATUS' box. If the service is not continuing, use the appropriate service termination code.
 - * Leave other fields in this portion blank.
 - * Complete Items 1 through 6 in the ACCOUNTING INFORMATION portion. Also complete Item 10 ('STAFF PROVIDER ID') by entering your own number.
- Send one copy of the report to the data processing clerk and retain the other in the client's folder.

5.3 Review the Client Service History Data Sheet

A Client Service History Data Sheet is created for each client for whom the case manager has planned services (refer to the Appendix of Part B for exhibit). This sheet is computer generated in automated systems or prepared by the data processing clerk in manual systems.

This sheet will first list the Service Code, Units Requested

and the Request Date (all from the Service Planning Form) for each service planned for the client. This sheet should be reviewed for the following:

- Look at the Appointment Date ('APT DATE') column, to see if a date has been entered. There should be a date in that field within two days of the Request Date. If the APT DATE column is blank, this means that Service Order Document has not been prepared and is overdue.
- If there is an APT DATE and the 'PREP DATE' of the sheet is two or more days greater than the APT DATE, then there should be a date in the CONFIRM DATE column. If not, the CONFIRMATION copy of the Service Order Document has not been returned to the case manager.
- If a Service Delivery Report is being reviewed for acceptance (as outlined in paragraph 6 of Procedure 5.1, above), look at the "DATE COMP" and "UNIT DEL" columns. Comparing the units in the 'UNIT DEL' column with the units in the 'UNITS REQ' column, you can determine whether or not a Service Delivery Report is in order.

5.4 Short Cut Reporting and Updating (Automated Systems)

For voluntary services in the client's plan for which neither authorization nor accounting documentation are needed, the case manager may report them without completing a Service Order Document or a Service Delivery Form by using the following procedure:

- The extreme left column on the Client Service History Data Sheet is an "updating" function ('FN') column.

By placing a 'U' in this column, data can be entered in blank fields in most of the other columns. For example, a confirmation date may be entered. Errors in data appearing on this sheet may also be corrected by entering a 'C' in the function column and the correct data in the appropriate field(s) for the service on that particular line.

- When an update has been made, send the original of the sheet to the data processing clerk. When the changes are entered into the computer file a new Client Service History Data Sheet will be generated and returned to the case manager.
- The function codes to use are:
 - * C= Correct or change existing data appearing on the sheet.
 - * U= Update the client record by adding service delivery information to blank fields.
 - * D= Delete the information in a certain data field.
- NOTE: A mistaken service code ('SERV CODE' column) can neither be deleted nor corrected. In such an instance, the service must be terminated. This can be done by entering code '8V' in the SV or ST (Service Status) column. This is a "void" code.
- More detailed information on the Client Service History Data Sheet is presented in the Appendix of Part B.

For Progress Assessment and Management Procedures, please refer to Procedure No. 6.0.

CASE MANAGEMENT PROCEDURES

Page ____ of ____

Procedure No. : 6.0

Subject : PROGRESS ASSESSMENT AND MANAGEMENT

Date Issued :

Supersedes No.: New

Distribution:

INTRODUCTION

Overview

Most of the Progress Assessment and Management process takes place while service delivery is in progress.

The basic functions performed during this phase are:

- Management of the Problem List: updating the Problem List as new problems are identified and active problems are resolved.
- Plan new services as necessary to bring about resolution of all problems being managed.
- Set new case goals as existing goals are achieved or changed.
- Determine when the closing of a case is appropriate; ideally a closing will occur when:

* (a) all service steps have been completed,

- * (b) all active problems have been resolved satisfactorily, and
- * (c) the planned goal condition has been attained.

PROCEDURES

6.1 Manage the Problem List

- As a client's problems are resolved, new problems identified, or problems coded as "inactive" ('X') or "not appropriate" ('N') become active, it is the responsibility of the case manager to update the client's Problem List accordingly.
- The Service Planning Form (Problem List segment) is used only to create the initial Problem List (in Procedure No. 3.0). All of the updating of that list as required by this procedure is accomplished through the use of the Client Problem-Goal History Sheet. After the case manager has entered the initial Problem List via the Service Planning Form the information system will generate a Client Problem-Goal History Sheet which will be forwarded to the case manager. All updates of the Problem List will be written on the Problem List segment of the sheet in red and one copy forwarded to the Data Processing Clerk. The Data Processing Clerk will update the client's record and return a current sheet to the case manager.
- The Problem List section of this sheet presents all problems initially entered on the Service Plan Form and the status of all problems (I= identified; C= controlled; R= removed; N= not appropriate for service; and X= inactive). When a problem is resolved the worker changes the status from "I" to "R" and enters the date removed (Month/Day/Year).

6.2 Goal Management

There are three occasions requiring goal management activities:

- 1) Goal Achievement, which occurs (a) when the current condition of the client is the same as the goal condition (i.e., current conditions and goal condition codes are equal), (b) all problems are coded either R-removed or C-controlled, and all services not required for a 'C' coded barrier have a service status indication termination (i.e., a 2-digit code beginning with '4', '6', or '8').
- 2) Goal change (without achievement).
- 3) Goal date change.

Any three of the goal activities should be reported by completing a line in the "GOAL DATA" segment of the Client Problem List-Goal History Sheet. The goal information entered on the Service Planning Form at the time of case opening will be the first line to appear. Using this sheet, goal attainment should be reported as follows:

6.2.1 Highest Goal Achieved--Maintenance Case

- If the goal achieved is the highest that can be established but some service must continue to control a problem which is a barrier (e.g., a child has returned to school but continued tutoring is required to maintain that goal condition):

- * Enter the following code in the Outcome Code

Column to indicate that the client is an open service recipient: 02 - GOAL ACHIEVED-MAINTENANCE REQUIRED.

- * Change the Goal Date to equal the farthest "thru date" of any service planned, but not exceeding six months.

6.2.2 Highest Goal Achieved--Close Case

- If the goal achieved is the highest which can be established but no further services are needed (and all services are terminated):

- * Enter the code for the goal condition achieved.
 - * Enter the following outcome code: 51 - GOAL ACHIEVED.
 - * Enter the Outcome (Achievement) Date.
 - * Update the Client Base Data Form to close the case by:
 - checking the "close" box in Item 37 and,
 - entering the appropriate CLOSING REASON in box 39: 'GA' = SERVICE COMPLETED--GOAL ACHIEVED.

6.2.3 Goal Achieved--New Goal Established

- If the goal is achieved but a new goal is to be established:

- * Enter the code for the goal condition achieved.
 - * Enter the following outcome code: '01' = GOAL ACHIEVED--NEW GOAL ESTABLISHED
 - * Enter the outcome (achievement) date.
 - * The new goal and goal achievement date can only be entered in Items 14 and 15 and a new Service

Planning Form (YSIS-2). (This is because each new Goal requires a new Service Plan.)

- The Problem List, however, remains and new problems are simply added to the list (all problems under the previous goal(s) should be in either an R or C status).

6.2.4 Goal Change (Without Achievement)

- A goal change can come about for a number of reasons such as a re-evaluation of a client's case and needs, the lack of appropriate resources in the community (e.g., no jobs), failure to reach the previous goal by the arrival of the goal date.
- In such instances, the same procedure as that in 6.2.3 should be used--except that the outcome codes should be one of the following:
 - * 03 Goal Change--Re-evaluation
 - * 04 Goal Change--Lack of Appropriate Resources
 - * 05 Goal Change--Other Reason

6.3 Tracking Procedures

- Report No. 06, "Cases Requiring Review," is one of the case manager's basic tracking tools. This report will list cases requiring some type of action on the part of the case manager such as:
 - 1) GOAL DATE OVER RUN. Indicates that the client's goal achievement date has been passed without appropriate action being taken.
 - 2) GOAL DATE ARRIVES. Ten days prior to the

estimated goal date, the client will be listed and an asterisk will appear in this column to remind the case manager to review the case and progress toward goal achievement.

- 3) PROBLEMS UNRESOLVED. Ten days to goal date and problems still have a status of "I" as opposed to resolved ('R') or controlled ('C').
- 4) ALL SERVICES RENDERED. If a case is still open and all the service requested by the Service Plan have been rendered and terminated, the client will be listed and an asterisk will appear in this column.
- 5) FOLLOW-THRU CONTACT DUE. Will remind case manager to make a follow-through contact after case closing indicating if client's goal condition has been maintained.
- 6) FOLLOW-THRU CONTACT OVERDUE. Indicates that a follow-through contact report is overdue.

6.4 Planning New Services

- As progress is assessed, new problems identified, etc., it may be necessary to plan new services. New services can be requested only by means of the Service Planning Form. (The Client Service History Data Sheet cannot be used to add services. These services should be entered using the same procedures outlined in 4.1.)

6.5 General Instructions for Updating the Client's Data Base

- The information in the Client's Data Base (e.g., "Educational Status") is first created during the Intake Phase with the entry of the Client Base Data Form (YSIS-1).
- From time to time, the information in this data base will change and require updating. Updating is accomplished by entering data in the appropriate field on the Client Base Data Form (YSIS-1). When the first form was completed and sent to data processing, an automated information system would generate a new two copy "turnaround" form which is in duplicate format of the form submitted reflecting all of the information entered into the computer, edited and accepted from the initial copy. (In a manual system, the case manager will make a photocopy of the form, enter the update in red ink and send it to the data processing clerk. If any data are to be deleted, e.g., a household member, enter a '#' in the appropriate space, and return the updated form to the processing clerk.)

Special Presenting Area Codes may be added at any time by completing a new Service Planning Form.

CASE MANAGEMENT PROCEDURES

Page ___ of ___

Procedure No. : 7.0
Subject : CLOSURE
Date Issued :
Supersedes No.: New

Distribution:

INTRODUCTION

Overview

The basic functions of this phase are:

- Entry of the final closing data via the Client Base Data Form (YSIS-1).
- Update of the goal and problem data on the Client Problem List-Goal History Sheet.
- Notification of all providers of "early termination" of service orders, if any.

PROCEDURE

A case can be closed when a goal has been reached, when a client becomes ineligible for service, and during the delivery of service for a number of reasons (e.g., loss of contact with the client).

In closing a case, the following steps should be taken:

7.1 Update Client Problem List-Goal History Sheet

- Enter the most recent goal data and problem resolution information on the Client Problem List-Goal History Sheet as outlined in Procedures 6.1 and 6.2.2. Also, in the "Follow-Through Data" section enter the dates on which follow-through contacts will be made, e.g., thirty and ninety days after closing.

7.2 Notification of Service Providers

- Review the Client Service History Sheet to note any services which may still be active. Update the Sheet, terminating any services still active (use Procedure 5.4). Notify all providers of the services of the "early termination" action by sending each a copy of a Service Order Document with the EARLY TERMINATION portion completed (use Procedure 4.5).

7.3 Close Case

- Update the Client Base Data Form (YSIS-1) by checking the 'Z' = CLOSE box in Item 36 (CASE ACTION), entering the effective date of closure in Item 37, and the reason for closing in Item 39. Send the updated form to the data processing clerk.

CASE MANAGEMENT PROCEDURES

Page ___ of ___

Procedure No. : 8.0
Subject : FOLLOW-THROUGH
Date Issued :
Supersedes No.: New

Distribution:

INTRODUCTION

Overview

Many agencies may not have the case management resources to conduct follow-through on every case or may assign such a function to an evaluation group which may only conduct sample follow-through procedures.

The basic functions in this phase take place after the case has been closed. They include:

- Carrying out contacts with clients who have completed service with goal achieved to determine the current level of personal and social functioning and whether they have maintained the goal condition they were in at the time of case closing.
- Enter follow-through data required by the information system.

PROCEDURES

8.1 Thirty days and ninety days (or whatever periods chosen) after case closing, a Client Problem List-Goal Data Sheet will be generated with a FOLLOW-THROUGH DATA section at the bottom and sent to the case manager. The case manager will make a contact to determine if the client has maintained his/her goal condition. If not, the case manager will determine the client's present condition. He/she will then record the following on the Client Problem List-Goal Data Sheet and return it to the data processing clerk:

- DATE ENTERED - Enter the date of the contact.

- COND - Enter the current condition of the client using the code table in Item 13 (INITIAL CONDITION) on the Service Planning Form.

- GOAL MAINT - Enter a 'Y' (for Yes) or an 'N' (for No) to indicate whether or not the client has maintained the goal condition he/she had at the time of case closing. If higher, also enter a 'Y'.

- If the client cannot be located, enter an 'X'.

Appendix PART B

This Appendix includes instructions for the completion or use of the following forms:

PART B: APPENDIX/YSIS-1
Page ___ of ___

- Client Base Data Form, YSIS-1
- Service Planning Form, YSIS-2
- Service Order Document, YSIS-3
- Service Delivery Report, YSIS-4
- Client's Consent to Release Confidential Information, YSIS-7
- System Development Memorandum, YSIS-8

DESCRIPTION

This form is used to report each contact at an agency, to record basic information on contacts applying for services, including household characteristics, and the following data subsequent to case opening:

- Case opening and closing.
- Updating the base information collected on a client at the time of application.
- Identifying household members receiving services.

When used only to report a contact, the form will also report the chief problem and service request of the contact, the contact's referral source, the reason the contact did not result in a case opening, and the agency to which the contact was referred (if any).

In an automated record system when a case is opened, the initial preparation of this form is used to create a computerized record for the client.

This form collects data in five sections. At the top, IDENTIFYING INFORMATION collects client identification data and geographic information. If the action only involves information and referral assistance, only the year of birth, sex, and race items need be completed. Then the only remaining section which needs to be completed is the CONTACT section. A contact will be identified only by entering the word "CONTACT" in the name field (Item 1).

Agencies should feel free to change the codes used for various data elements to meet their unique program needs.

CLIENT BASE DATA FORM

YSIS-1

IDENTIFYING INFORMATION										CONTACT & CASE ACTION				
1 NAME First Middle Initial Last					9 CLIENT I.D. NO.					31 APPREHENDING AGENCY (If any) Name: _____ Dist: _____ ID # _____ Patrolman _____				
2 RESIDENCE STREET					10 MAILING STREET					32 DATE OF APPREHENSION		PLACE		
3 RESIDENCE CITY					11 MAILING CITY					33 INTAKE DATE/TIME		34 INTAKE AGENCY/SITE #		
4 STATE	5 COUNTY	6 CENSUS	7 SCHOOL DIST.	8 CONG. DIST.	12 STATE	13 ZIP CODE	14 PHONE			35 REFERRAL AGENCY <input type="checkbox"/> Court <input type="checkbox"/> Family <input type="checkbox"/> Police <input type="checkbox"/> Self <input type="checkbox"/> School <input type="checkbox"/> Other NAME/SITE ID# _____				
15 DATE RES BEGAN Month/Year	16 BIRTHDATE Month/Day/Year	17 SEX M <input type="checkbox"/> F <input type="checkbox"/>	18 RACE B <input type="checkbox"/> Black W <input type="checkbox"/> White A <input type="checkbox"/> Indian O <input type="checkbox"/> Other	19 SPANISH SURNAME M <input type="checkbox"/> Mex. O <input type="checkbox"/> Other N <input type="checkbox"/> No	20 MARITAL STATUS D <input type="checkbox"/> Divorced S <input type="checkbox"/> Single M <input type="checkbox"/> Married W <input type="checkbox"/> Widowed P <input type="checkbox"/> Separated X <input type="checkbox"/> Unknown			36 INTAKE WORKER: NAME/ID#			37 CASE ACTION <input type="checkbox"/> Open <input type="checkbox"/> Not Open <input type="checkbox"/> Close DATE: _____		38 REASON NOT OPENED <input type="checkbox"/> _____ 39 REASON CLOSED <input type="checkbox"/> _____	
CHARACTERISTIC INFORMATION										40 CASE MANAGEMENT AGENCY: NAME/ID#				
50 RELATIONSHIP TO THE HEAD OF HOUSEHOLD B <input type="checkbox"/> Brother or Sister C <input type="checkbox"/> Child D <input type="checkbox"/> Foster Child E <input type="checkbox"/> Grandchild G <input type="checkbox"/> Grandparent H <input type="checkbox"/> Head of Household L <input type="checkbox"/> Shelter Child			51 CLIENT TYPE 1 <input type="checkbox"/> Adult 2 <input type="checkbox"/> Child M <input type="checkbox"/> Uncle or Aunt N <input type="checkbox"/> Niece or Nephew P <input type="checkbox"/> Parent R <input type="checkbox"/> Other Related S <input type="checkbox"/> Spouse X <input type="checkbox"/> Other Non Related Z <input type="checkbox"/> Step Relative			52 FAMILY STRUCTURE AA <input type="checkbox"/> Adult Living Alone AI <input type="checkbox"/> Adult in Institution AD <input type="checkbox"/> Adult Living with Others CC <input type="checkbox"/> Couple with Children CO <input type="checkbox"/> Children Only CP <input type="checkbox"/> Couple Only FC <input type="checkbox"/> Father Only with Children MC <input type="checkbox"/> Mother Only with Children RS <input type="checkbox"/> Parental Rights Severed			# of Children <input type="checkbox"/> _____		41 CASE MANAGER: NAME/ID#			
53 LIVING ARRANGEMENT		54 EDUCATION A <input type="checkbox"/> At Grade B <input type="checkbox"/> Below Grade C <input type="checkbox"/> Completed O <input type="checkbox"/> Above Grade P <input type="checkbox"/> Pre School N <input type="checkbox"/> Not Attending			55 HOUSEHOLD INCOME SOURCE A <input type="checkbox"/> SSIA G <input type="checkbox"/> Gen. Relief Asst. B <input type="checkbox"/> SSIB I <input type="checkbox"/> Investments C <input type="checkbox"/> Child Suppt. S <input type="checkbox"/> Social Security D <input type="checkbox"/> SSID V <input type="checkbox"/> Veterans Benefits P <input type="checkbox"/> State Supp. Pay E <input type="checkbox"/> Employment F <input type="checkbox"/> AFDC O <input type="checkbox"/> Other			42 LEGAL STATUS 0 <input type="checkbox"/> Parents with Full Rights 1 <input type="checkbox"/> Guardian of State 2 <input type="checkbox"/> Other Guardian 3 <input type="checkbox"/> Other: _____						
56 FARM FAMILY M <input type="checkbox"/> Migrant Season O <input type="checkbox"/> Other N <input type="checkbox"/> No		57 ECONOMIC STATUS D <input type="checkbox"/> Disadvantaged P <input type="checkbox"/> Poor N <input type="checkbox"/> Neither		58 GRADE COMPLETED <input type="checkbox"/> _____ 61 RESERVED		59 EMPLOYMENT STATUS E <input type="checkbox"/> Employed U <input type="checkbox"/> Underempl. O <input type="checkbox"/> Unemployed N <input type="checkbox"/> Not in Labor Force		60 HSHD. GROSS MO. INCOME \$ _____		43 CUSTODY STATUS 0 <input type="checkbox"/> Home 1 <input type="checkbox"/> Temporary Shelter 2 <input type="checkbox"/> Foster Care 3 <input type="checkbox"/> Detention 4 <input type="checkbox"/> Other		44 REFERRAL PROBLEM 1 <input type="checkbox"/> Del 2 <input type="checkbox"/> Runaway 3 <input type="checkbox"/> Truant 4 <input type="checkbox"/> Beyond Cont 5 <input type="checkbox"/> Alcohol 6 <input type="checkbox"/> Other		
HOUSEHOLD INFORMATION														
70 NAME First Middle Initial Last				71 RESIDENT ADDRESS				72 BIRTH DATE	73 REL	74 ED ST	75 EMPLOY	76 MO. INCOME	77 SRCE/DEP	78 REC. SERV.
CLIENT														
A Head of Household Only								Mo/Day/Yr						Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
B Father														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
C Mother														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
D Others														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
E														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
F														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
G														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
H														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No
J														Y <input type="checkbox"/> Yes N <input type="checkbox"/> No

RUN DATE

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.



If the result of a contact is an application of service, then the CHARACTERISTIC INFORMATION and HOUSEHOLD INFORMATION sections should also be completed. The HOUSEHOLD INFORMATION section does not have to be completed prior to the eligibility determination, but its completion can save time in completing possible eligibility determination fields.

At this point, the case is still not open. After the client is notified that he/she is eligible, he/she will meet with the case manager who will then open the case (CASE ACTION, Item 37) by sending the form to the data processing clerk. In most instances, eligibility determination and case opening will take place in the same visit.

PROCEDURE

When completing this form, print as legibly as possible. When completing an item which contains a code, check the appropriate code. When completing items not containing a pre-printed code value, enter the information at the bottom of the space provided.

When the form is completed, send the third copy to the data processing clerk and maintain the original and second copy until case closing, updating them and sending one to the data processing clerk.

Instructions for completing this form and a specific description of each data item on the form are presented on the following pages.

INSTRUCTIONS FOR COMPLETING THE CLIENT BASE DATA FORM (YSIS-1)

After the name of each input item, a number (e.g., 15) appears in parentheses indicating the maximum number of characters that can be included on the input document and subsequently entered.

<u>Item No.</u>	<u>Item Identification</u>
1	NAME (25) Enter the full name of the client, first, middle, last, followed by JR, SR, III, etc., if appropriate. Do not hyphenate a last name, or do not separate. For example, enter McCall as MCCALL: O'Neil as ONEIL.
2	RESIDENCE STREET (5) Write the street address, box number, RFD route, as required, at which the client resides. In the case of a child placed out of his own home, enter the address at which he is currently residing (i.e., where he may be found and contacted).
3	RESIDENCE CITY (18) Write the name of the town in which the client resides.
4	STATE (2) Write in the 2-character code for the state in which the client resides. See next page for codes of states.

TWO-DIGIT STATE ALPHA CODES
(Table for Item No. 4)

Alabama	AL	Montana	MT
Alaska	AK	Nebraska	NE
Arizona	AZ	Nevada	NV
Arkansas	AR	New Hampshire	NH
California	CA	New Jersey	NJ
Colorado	CO	New Mexico	NM
Connecticut	CT	New York	NY
Delaware	DE	North Carolina	NC
District of Columbia	DC	North Dakota	ND
Florida	FL	Ohio	OH
Georgia	GA	Oklahoma	OK
Hawaii	HI	Oregon	OR
Idaho	ID	Pennsylvania	PA
Illinois	IL	Rhode Island	RI
Indiana	IN	South Carolina	SC
Iowa	IA	South Dakota	SD
Kansas	KS	Tennessee	TN
Kentucky	KY	Texas	TX
Louisiana	LA	Utah	UT
Maine	ME	Vermont	VT
Maryland	MD	Virginia	VA
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY
Missouri	MO	Guam	GU
		Puerto Rico	PR
		Virgin Islands	VI

Item No.

Item Identification

5

COUNTY (3)

Identify the county in which the primary client resides by entering the appropriate 3-digit code from the table of county codes.

6

CENSUS (5)

Using the Census Tract map for your area, identify the census tract in which the client lives. Enter the numeric code for that tract. If client does not live in the area, enter '99999'.

7

SCHOOL DISTRICT (3)

Enter the 3-digit code of the school district in which the primary client resides.

8

CONGRESSIONAL DISTRICT (2)

Enter the number of the Congressional District in which the primary client resides.

9

CLIENT I.D. NO. (9)

Enter the confidential identification number developed by your agency for the client.

If your agency uses less than a 9-digit number, adjust to the right.

FEDERAL INFORMATION PROCESSING CODES

(e.g., COUNTIES IN MISSOURI)

(Table for Item No. 5)

<u>CODE</u>	<u>COUNTY</u>	<u>CODE</u>	<u>COUNTY</u>	<u>CODE</u>	<u>COUNTY</u>	<u>CODE</u>	<u>COUNTY</u>
001	ADAIR	063	DE KALB	125	MARIES	187	ST FRANCOIS
003	ANDREW	065	DENT	127	MARION	189	ST LOUIS
005	ATCHISON	067	DOUGLAS	129	MERCER	193	STE GENEVIEVE
007	AUDRAIN	069	DUNKLIN	131	MILLER	195	SALINE
009	BARRY	071	FRANKLIN	133	MISSISSIPPI	197	SCHUYLER
011	BARTON	073	GASCONADE	135	MONITEAU	199	SCOTLAND
013	BATES	075	GENTRY	137	MONROE	201	SCOTT
015	BENTON	077	GREENE	139	MONTGOMERY	203	SHANNON
017	BOLLINGER	079	GRUNDY	141	MORGAN	205	SHELBY
019	BOONE	081	HARRISON	143	NEW MADRID	207	STODDARD
021	BUCHANAN	083	HENRY	145	NEWTON	209	STONE
023	BUTLER	085	HICKORY	147	MODAWAY	211	SULLIVAN
025	CALDWELL	087	HOLT	149	OREGON	213	TANEY
027	CALLAWAY	089	HOWARD	151	OSAGE	215	TEXAS
029	CAMDEN	091	HOWELL	153	OZARK	217	VERNON
031	CAPE GIRARDEAU	093	IRON	155	PEMISCOT	219	WARREN
033	CARROLL	095	JACKSON	157	PERRY	221	WASHINGTON
035	CARTER	097	JASPER	159	PETTIS	223	WAYNE
037	CASS	099	JEFFERSON	161	PHELPS	225	WEBSTER
039	CEDAR	101	JOHNSON	163	PIKE	227	WORTH
041	CHARITON	103	KNOX	165	PLATTE	229	WRIGHT
043	CHRISTIAN	105	LACLEDE	167	POLK		
045	CLARK	107	LAFAYETTE	169	PULASKI		
047	CLAY	109	LAWRENCE	171	PUTNAM		
049	CLINTON	111	LEWIS	173	RALLS		
051	COLE	113	LINCOLN	175	RANDOLPH		
053	COOPER	115	LINN	177	RAY		
055	CRAWFORD	117	LIVINGSTON	179	REYNOLDS		
057	DADE	119	MCDONALD	181	RIPLEY	510	ST LOUIS CITY
059	DALLAS	121	MACON	183	ST CHARLES		
061	DAVISS	123	MADISON	185	ST CLAIR		

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>										
10	MAILING STREET (23) If the client's mailing address is different from his residence, enter the mailing address in these next three items, using the same procedures as with the residence street. If the client is a child in foster care, you may want to enter the address of his/her foster care worker since the worker will generally receive notices of actions required in regard to the child.	15	DATE RES BEGAN (6) Enter the date when the client established residence at his current address (i.e., the address in Item 2). Use only the month and the year; e.g., enter January 15, 1976 as '01/76'.										
11	MAILING CITY (18) See Item 3.	16	BIRTHDATE (8) Enter the client's date of birth; month/day/year; e.g., enter December 25, 1955 as '12/25/1955'.										
12	MAILING STATE (2) See Item 4.	17	SEX (1) Check the appropriate box indicating the sex of the client: <table border="0"> <thead> <tr> <th><u>Code</u></th> <th><u>Sex</u></th> </tr> </thead> <tbody> <tr> <td>M</td> <td>Male</td> </tr> <tr> <td>F</td> <td>Female</td> </tr> </tbody> </table>	<u>Code</u>	<u>Sex</u>	M	Male	F	Female				
<u>Code</u>	<u>Sex</u>												
M	Male												
F	Female												
13	ZIP CODE (5) Write in the ZIP code of the client's mailing address.	18	RACE (1) Check the appropriate box indicating the race of the client: <table border="0"> <thead> <tr> <th><u>Code</u></th> <th><u>Race</u></th> </tr> </thead> <tbody> <tr> <td>B</td> <td>Black</td> </tr> <tr> <td>W</td> <td>White</td> </tr> <tr> <td>A</td> <td>American Indian</td> </tr> <tr> <td>O</td> <td>Other</td> </tr> </tbody> </table>	<u>Code</u>	<u>Race</u>	B	Black	W	White	A	American Indian	O	Other
<u>Code</u>	<u>Race</u>												
B	Black												
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O	Other												
14	PHONE (10) Write the telephone number at which the primary client may be contacted. Begin with the 3-digit area code.												

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>														
19	SPANISH SURNAME (1) Check the 'M' box, Mexican-American, if the client appears to belong to this group. If the client has a Spanish surname, but does not appear to belong to this group, check the 'O' box for 'Other'. If no Spanish surname, check the 'N' box for 'No'.	32	Agency and Patrolman. DATE AND PLACE OF APPREHENSION Indicate the date and place (census tract or ZIP code) at which the youth was apprehended by law enforcement agency, if any.														
20	MARITAL STATUS (1) Check the appropriate box indicating marital status of the client: <table border="0" style="margin-left: 40px;"> <thead> <tr> <th><u>Code</u></th> <th><u>Status</u></th> </tr> </thead> <tbody> <tr> <td>D</td> <td>Divorced: Use this code if the client is currently divorced.</td> </tr> <tr> <td>M</td> <td>Married: Use this code if the client is currently married.</td> </tr> <tr> <td>P</td> <td>Separated: Use this code if the client is currently separated from his/her spouse.</td> </tr> <tr> <td>S</td> <td>Single: Use this code if the client has never been married.</td> </tr> <tr> <td>W</td> <td>Widowed: Use this code if the client's spouse is deceased.</td> </tr> <tr> <td>X</td> <td>Unknown: Use this code if the client's marital status is unknown.</td> </tr> </tbody> </table>	<u>Code</u>	<u>Status</u>	D	Divorced: Use this code if the client is currently divorced.	M	Married: Use this code if the client is currently married.	P	Separated: Use this code if the client is currently separated from his/her spouse.	S	Single: Use this code if the client has never been married.	W	Widowed: Use this code if the client's spouse is deceased.	X	Unknown: Use this code if the client's marital status is unknown.	33	INTAKE DATE/TIME Indicate the date and time the youth appeared at the youth service program for the first contact.
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		34	INTAKE AGENCY/SITE NUMBER Enter the agency code number and site code number (if more than one intake site) of the intake agency. If intakes are done in the field use a code to indicate this.														
		35	REFERRAL AGENCY Check the box indicating type of referring agency and enter the ID and site number for that agency and name of agency.														
		36	INTAKE WORKER: NAME, ID # Enter the name and ID # of the Intake Worker.														
31	APPREHENDING AGENCY (3 + 2) Enter ID # and District number of apprehending agency, if any. Enter Name of																

Item No. Item Identification

37 CASE ACTION (1)

Check the appropriate box to indicate the action which is being authorized by this form:

<u>Code</u>	<u>Action</u>
O	Open for service.
N	Not opened for service; no further action.
C	Close the case; no further action.

After a case has been opened, you must later return to this form to close the case. To close the case, enter 'C'.

DATE (6)

Enter the effective date of the Case Action authorized in Item 37.

38 REASON NOT OPENED (2)

If the action indicated in Item 37 is NOT OPEN ('N'), enter the appropriate reason and code. If more than one code applies, use the major reason. (Each agency will devise its own codes.)

39 CLOSING REASON (2)

Write in this space only if the client was in open status ('O') and the case is now being closed ('C'). Select the most

Item No. Item Identification

appropriate code from the following table:

<u>Code</u>	<u>Reason for Closing</u>
	Service Completed
GA	SERVICE COMPLETED, GOAL ACHIEVED
NO	GOAL NOT ACHIEVED, LACK OF OPPORTUNITY
NN	GOAL NOT ACHIEVED, SERVICE NOT EFFECTIVE
NZ	GOAL NOT ACHIEVED, OTHER Service Not Completed
CL	CONTACT LOST
CD	CLIENT'S DECISION Agency Decision
AN	CLIENT NOT AMENABLE TO CM
AU	CLIENT UNCOOPERATIVE
AL	LOSS OF ELIGIBILITY
AF	FEE REQUIRED
AT	TRANSFER
AO	AGENCY DECISION, OTHER Joint Decision
JS	SERVICE NOT EFFECTIVE
JT	JOINT DECISION, TRANSFER
JO	JOINT DECISION, OTHER Unexpected Development
UI	ILLNESS
UM	MOVED OUT OF AREA
UD	DECEASED
US	STATUS CHANGE (e.g., Married; Reached Majority)
UO	UNEXPECTED DEVELOPMENT, OTHER
OE	OPENED IN ERROR

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>																														
41	<p>Enter the name and ID # of the Case Management Agency to which client is assigned. (This may or may not be the same as the intake agency.)</p> <p>CASE MANAGER: NAME, ID #</p> <p>Enter the name and ID # of the case manager assigned to the case.</p>	44	<p>REFERRAL PROBLEM</p> <p>Check the box which indicates the chief referral reason or problem.</p> <ul style="list-style-type: none"> 1 - Delinquency offense 2 - Runaway 3 - Truant 4 - Beyond control 5 - Alcohol 6 - Other 																														
42	<p>LEGAL STATUS (1)</p> <p>Check the box which indicates the client's legal status. (Local codes may differ slightly from state to state.)</p> <ul style="list-style-type: none"> 0 - Parent with full rights. 1 - Guardian of state. 2 - Other guardian. 3 - Other status. 	50	<p>RELATIONSHIP TO THE HEAD OF HOUSEHOLD (1)</p> <p>Check the box indicating the client's relationship to the head of the household.</p> <table border="1"> <thead> <tr> <th><u>Code</u></th> <th><u>Meaning</u></th> </tr> </thead> <tbody> <tr><td>B</td><td>Brother or Sister</td></tr> <tr><td>C</td><td>Child</td></tr> <tr><td>D</td><td>Foster Child</td></tr> <tr><td>E</td><td>Grandchild</td></tr> <tr><td>G</td><td>Grandparent</td></tr> <tr><td>H</td><td>Head of Household</td></tr> <tr><td>L</td><td>Shelter Child</td></tr> <tr><td>M</td><td>Uncle or Aunt</td></tr> <tr><td>N</td><td>Niece or Nephew</td></tr> <tr><td>P</td><td>Parent</td></tr> <tr><td>R</td><td>Other Related</td></tr> <tr><td>S</td><td>Spouse</td></tr> <tr><td>X</td><td>Other Non Related</td></tr> <tr><td>Z</td><td>Step Relative</td></tr> </tbody> </table>	<u>Code</u>	<u>Meaning</u>	B	Brother or Sister	C	Child	D	Foster Child	E	Grandchild	G	Grandparent	H	Head of Household	L	Shelter Child	M	Uncle or Aunt	N	Niece or Nephew	P	Parent	R	Other Related	S	Spouse	X	Other Non Related	Z	Step Relative
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S	Spouse																																
X	Other Non Related																																
Z	Step Relative																																
43	<p>CUSTODY STATUS</p> <p>Check the box which indicates the official care status of the child:</p> <ul style="list-style-type: none"> 0 - At home. 1 - At a temporary shelter. 2 - At a foster home. 3 - Detained at a police or court facility. 4 - Other care. 	52	<p>FAMILY STRUCTURE (2)</p> <p>Check box indicating the primary client's current family structure within the</p>																														

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household. If a child is in care outside of his/her family household but parental rights have not been severed, use one of the codes to describe the family structure within his/her family household.

<u>Code</u>	<u>Meaning</u>
AA	Adult Living Alone
AI	Adult in Institution
AD	Adult Living with Others
CC	Couple with Children
CO	Children Only
CP	Couple Only
FC	Father Only with Children
MC	Mother Only with Children
RS	Parental Rights Severed

53

LIVING ARRANGEMENT (2)

Enter the appropriate 2-character code indicating the client's current living arrangement:

<u>Code</u>	<u>Living Arrangement</u>
AF	Adult Foster Home
AH	Adoptive Home
BL	Boarding Home (licensed)
BU	Boarding Home (unlicensed)
CI	Correctional Institution
DC	Treatment Center for Disturbed Children
EM	Extended Medical Care Facility
FH	Foster Home
GC	Group Care, not Providing Treatment
GH	General Hospital
HM	Maternity Home for Unmarried Mothers

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<u>Code</u>	<u>Living Arrangement</u>
JD	Juvenile Court Detention Facility
IM	Intermediate Medical Care Facility
MF	Military Forces
MH	Mental Hospital
MR	Institution for Mentally Retarded
NH	Nursing Home
OF	Other Facility
OR	Other Institution
OW	Own Home
PH	Institution for Physically Handicapped
RE	Rent
RN	With Nonrelative
RT	Retirement Facility
RW	With Relative
SC	School
UK	Unknown
WW	Work Wage Home

54

EDUCATION STATUS (1)

Check box indicating the client's educational status.

<u>Code</u>	<u>Meaning</u>
A	At Grade (attending)
B	Below Grade (attending)
C	Completed School (or over school attendance age)

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<u>Code</u>	<u>Meaning</u>
N	Not Attending (but should be; school attendance age)
O	Above Grade (attending)
P	Pre-school (age 5 & under; not attending)

GRADE/AGE CHART FOR DETERMINING EDUCATIONAL STATUS

Age on First Day of School Year:

Kindergarten	age 05
First grade	age 06
Second grade	age 07
Third grade	age 08
Fourth grade	age 09
Fifth grade	age 10
Sixth grade	age 11
Seventh grade	age 12
Eighth grade	age 13
Ninth grade	age 14
Tenth grade	age 15
Eleventh grade	age 16
Twelfth grade	age 17

55 HOUSEHOLD INCOME SOURCE (1)

Check box indicating the major income source of the household. If receiving public assistance, this should be considered the major source.

<u>Code</u>	<u>Meaning</u>
A	SSI/Aged

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<u>Code</u>	<u>Meaning</u>
B	SSI/Blind
C	Child Support/Absent Parent Contribution
D	SSI/Disabled
P	State Support Payment
F	AFCD to Families
G	General Relief Assistance
I	Investments/Pension
S	Social Security
V	Veteran's Benefits
E	Employment
O	Other

56

FARM FAMILY (1)

Check box indicating the client's farm family classification:

<u>Code</u>	<u>Meaning</u>
M	Migrant or Seasonal. The Head of the family is employed in migrant or seasonal farm work.
O	Other. The family resides on an operating farm worked by members of the family.
N	No. The family is in neither of the above categories.

57

ECONOMIC STATUS (1)

Check the appropriate box indicating the client's economic status.

<u>Code</u>	<u>Economic Status</u>
D	Disadvantaged. A poor person

<u>Item No.</u>	<u>Item Identification</u>								
	<table border="1"> <thead> <tr> <th><u>Code</u></th> <th><u>Economic Status</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>who does not have suitable employment and who is 1) a school dropout, 2) a member of a minority, 3) under 22 years of age, 4) 45 years of age or 5) handicapped.</td> </tr> <tr> <td>P</td> <td>Poor. The client's family's income is below the federal poverty guidelines.</td> </tr> <tr> <td>N</td> <td>No. Not poor. The client's family is not poor.</td> </tr> </tbody> </table>	<u>Code</u>	<u>Economic Status</u>		who does not have suitable employment and who is 1) a school dropout, 2) a member of a minority, 3) under 22 years of age, 4) 45 years of age or 5) handicapped.	P	Poor. The client's family's income is below the federal poverty guidelines.	N	No. Not poor. The client's family is not poor.
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P	Poor. The client's family's income is below the federal poverty guidelines.								
N	No. Not poor. The client's family is not poor.								

58 GRADE COMPLETED (2)

Enter a 2-digit number indicating the last grade completed in school by the client at the time of application. Always enter two digits; e.g., '09' equals the ninth grade; '16' a college graduate; '17' a master's degree; '18' a doctoral degree or above.

59 EMPLOYMENT STATUS (1)

Enter the 1-digit code which indicates the client's employment status:

<u>Code</u>	<u>Employment Status</u>
E	Employed: Working and earning above the federal poverty guideline.

<u>Item No.</u>	<u>Item Identification</u>								
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O	Unemployed: The individual is (1) unemployed but not disabled, (2) looking for employment as his/her major activity and (3) is available for work.								
N	Not in labor force: Full-time student or pre-schooler; Care of family/household; disabled; retired.								

60

60 HSHD GROSS MO. INCOME (4)

In the field to the right within this item, enter the number of weeks the client has been unemployed at the time of the intake interview. If the client is employed enter 00.

Household monthly gross income means the monthly sum of income received by household members from the following sources that are identified by the U.S. Census Bureau in computing median income. (If you complete the HOUSEHOLD INFORMATION section this figure can be arrived at by summing column 76--MO. INCOME.) Round off to the nearest dollar and adjust to the right.

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- Money earnings (wages, salary, tips, bonuses, etc., before taxes).
- Net income from nonfarm self-employment or farm self-employment.
- Social Security pensions, survivor's benefits and permanent disability insurance payments prior to deductions for medical insurance; Railroad Retirement insurance checks.
- Dividends, interest, net rental income, etc.
- Public assistance or welfare payments.
- Pensions, annuities (including Veteran's pensions).
- Unemployment Compensation and Workman's (disability) Compensation.
- Alimony and child support.

HOUSEHOLD INFORMATION

This section of the form collects information on the client's household members.

CLIENT

Normally the only information entered on the client would be in Items 76 (MO. INCOME) and 77 (SRCE/DEP).

Line A "Head of Household only"

Enter the name of the head of the client's household on line A in Item 70 and enter the data requested on the head in Items

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71-A through 78-A. This would be the name of the foster family if the client has that living arrangement.

If the client is in foster care or otherwise placed out of the home, enter his/her mother's and father's names on lines B or C. If he/she lives with one or both put the head's name in A and leave either B or C blank.

Lines B-J "Household Members"

In the Household Members section (Lines B-H, and J), enter the data requested using the instructions below.

70A

NAME-HEAD OF HOUSEHOLD (25)

Enter the first name, middle initial and last name of the head of the client's household. If in foster care, the head will be that of the foster family.

70B-J

NAMES OF ADDITIONAL HOUSEHOLD MEMBERS (25)

Same as 70A. (E.g., mother, brothers, sisters, etc.)

71A-J

RESIDENT ADDRESS

Enter street and city address for members if different from client's address.

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>
72A-J	<p>BIRTH DATE</p> <p>Enter the birth date of all household members.</p>	77A-J	<p>SRCE/DEP (1+1+1+1)</p> <p>Indicate the source(s) of the member's income, if any. Use the codes from Item 55 (HOUSEHOLD INCOME SOURCE). Enter up to four codes.</p>
73B-J	<p>REL (1)</p> <p>Enter the appropriate character code indicating the relationship to the head of the household for each additional household member listed as part of the case. See Item 50 for codes.</p>	78A-J	<p>REC SERV (1)</p> <p>Check the appropriate box indicating if the member is receiving service (Service Recipient) as part of the client's service plan.</p> <p>RUN DATE</p> <p>Applicable only for automated systems.</p>
74A-J	<p>ED ST (1)</p> <p>Enter the one letter code indicating the educational status of the head of the household and of any additional household members who have been listed. See Item 54 for codes.</p>		<p>When this form is returned from the computer, the date the computer generated the turnaround will be printed here at the form bottom.</p>
75A-J	<p>EMPLOY (1)</p> <p>Enter the appropriate one character code indicating the employment status of the head of the household and of any additional household members who have been listed. See Item 59 for codes.</p>		
76A-J	<p>MO. INCOME (4)</p> <p>Enter the monthly sum of gross income received by the member from all sources. (See Item 60, above, for complete definition.)</p>		

- (no control) 1 2 3 4 5 6 (complete control)
- 0 = Parents not available

PART B: APPENDIX/YSIS-1A
Page ___ of ___

Family Police History

- Parent has prior conviction
- Brothers/sisters prior referral to court
- Brothers/sisters prior court jurisdiction
- Brothers/sisters present court jurisdiction

DESCRIPTION

Agencies may wish to collect information that cannot be included on the Client Base Data Form either because there is no room or because of special handling reasons (e.g., do not wish to have confidential offense history circulating with case managers and serving agencies, and a special need to destroy the form after evaluation analysis is completed).

Such data should be collected on this form. No format for this form has been designed because it will vary from agency to agency. However, on the next pages are data elements which should be considered for inclusion.

DATA ELEMENTS FOR DESIGNING THE CLIENT BASE DATA--SUPPLEMENTAL FORM (YSIS-1A)

Youth Demeanor

- Polite/contrite
- Polite/concerned
- Polite/indifferent
- Rude/indifferent
- Defiant

Youth Cleanliness

- Above average
- Average
- Below average

Quality/Style of Clothing

- Highly fashionable
- Above average
- Average
- Below average

LAW ENFORCEMENT DATA

Future Prediction

- Future youth unit referrals
- Not sure
- No future referrals to unit

Parental Control

- Parents have control of youth/Will take effective action

Suspected Motive

- Economic need
- For profit (resale)
- To meet illicit needs (e.g., drugs or money for drugs)
- No apparent reason (e.g., able to pay)
- Use of rec. facility (e.g., break in to use gym, pool)
- Meeting place (e.g., loafing in vacant housing)
- Excitement
- Peer acceptance
- Transient phenomenon (one time act)
- Revenge
- Malice
- Irrational
- Other
- Unknown

- Code indicating present juvenile court jurisdiction and status.

- 0 - No
- 1 - In adjudication process
- 2 - On consent probation
- 3 - Under other sentence

ARREST DATE (6)

ARREST TIME (4)

- Military time of arrest

ARREST TYPE (1)

- 1 - Probable cause
- 2 - On warrant
- 3 - Not arrested
- 4 - Other

TYPE OF PRIOR OFFENSE HISTORY CODE (3)

- Code indicating classification of youth's offense history prior to the youth's first contact with the Youth Unit during the period of the Diversion Project. (Classification scheme to be developed.)
- Might be number of offenses per year, for two years prior to referral arrest dates.

NUMBER OF OFFENSES (1)

- The number of different types of offenses for which the youth is arrested. Enter from '1' to '9'.

TYPE OF OFFENDER CODE (1)

- 0 - No prior youth unit contact
- 1 - No prior referral to court
- 2 - No prior court jurisdiction
- 3 - No prior conviction beyond consent probation

OFFENSE TYPE (4)

- Code indicating type of offense according to NCIC classification system.

OFFENSE TYPE--LITERAL (Not computerized.)

- Literal statement of the offense type.

PRESENTLY UNDER JURISDICTION OF COURT (1)

GENERAL OFFENSE CATEGORY (1)

- 1 - Accessory after the fact
- 2 - Accessory before the fact
- 3 - Aid/Abet
- 4 - Assault to commit
- 5 - Attempt to commit
- 6 - Conspiracy to commit
- 7 - Facilitation of
- 8 - Solicitation to commit
- 9 - Threaten to commit

OFFENSE TIME (4)

OFFENSE DISPOSITION (1)

Code indicating police disposition of offense as though there were no diversion program.

- 0 - Released
- 1 - Taken to court
- 2 - Referred to court on a written promise.

OTHERS INVOLVED WITH YOUTH IN OFFENSE (WHETHER OR NOT ARRESTED) (1)

Code indicating number of youths or type of relations involved in offense.

- 0 - None
- 1 - One Youth
- 2 - Two Youths
- 3 - Three Youths
- 4 - Four or more Youths
- 7 - Siblings
- 8 - Parent(s)
- 9 - Other Relative(s) (cousins, uncles)

WEAPON INVOLVED (1)

Code indicating type of weapon, if any, involved in the offense.

- 0 - None
- 1 - Hand gun
- 2 - Other fire arm
- 3 - Knife
- 4 - Other

MISSOURI UNIFORM JUVENILE REFERRAL CODE (7)

Code indicating a reclassification of the OFFENSE TYPE and GENERAL OFFENSE CATEGORY according to Missouri statutes. Also used to provide a mechanism for grouping offenses by category for statistical analysis and reports. The coding system is such that offenses may be categorized into the following groups:

- Offenses against persons
- Offenses against property
- Offenses against public morals
- Offenses associated with regulated drugs
- Offenses against public health and safety
- Offenses against admin. of justice
- Offenses against public peace
- Relating to Alcohol beverages
- Relating to Traffic
- Other offenses
- City ordinance Violations (curfew)
- Status Offenses

OFFENSE DATE (6)

TYPE PROPERTY INVOLVED (2)

Code indicating the type of property, if any, involved in the offense.

PART B: APPENDIX/YSIS-2

Page ___ of ___

- 0 - None
- 1 - Auto Sound Equipment
- 2 - Home Sound Equipment
- 3 - Sound related equipment: tapes, records, etc.
- 4 - Office equipment
- 5 - Home furnishings
- 6 - Fire arms
- 7 - Clothing
- 8 - Candy, refreshments, etc.
- 9 - Food
- 10 - Alcohol
- 11 - Narcotics and related items
- 12 - School equipment
- 13 - Personal items (watch, purse, etc.)
- 14 - Cash, checks (which may include personal items)
- 15 - Sporting Goods
- 16 - Auto equipment other than sound
- 17 - Auto tools
- 18 - Motor vehicle
- 19 - Residence
- 20 - School Buildings
- 21 - Other Buildings
- 22 - Other

DESCRIPTION

This form is used to record the client's first service record; the initial Problem List, special presenting areas (problem indicators), case goal data, initial service requests, and case review and reminder dates. This form is also used to record any new goals established, all subsequent service requests, and further case review and reminder dates.

When initially completed, this form is used to create a client service history record. Subsequent copies of this form will add service requests to that record. Information about service ordering and delivery, however, will be entered via other forms.

Each problem listed and given a status (Item 11) of 'I' (IDENTIFIED) must have at least one service requested. No service may be requested more than once at the same time for the same problem.

This form will cause the information system (either manually or by computer) to generate two printouts: (1) the "Client Problem List--Goal Data Sheet" and (2) the "Client Service History Sheet". The former sheet is a printed summary record of all problems entered, their status, and final outcome and of all goals entered, their status, and final attainment.

ESTIMATED VALUE OF GOODS (5)

Enter the estimated dollar value of property taken or amount of damage.

(End of offense record.)

SERVICE PLANNING FORM

CLIENT ID NO. <input type="text"/>	CHECK DIGIT <input type="text"/>	AGENCY TYPE ID# <input type="text"/>	UNIT <input type="text"/>	WORKER ID NUMBER <input type="text"/>	CLASS <input type="text"/>
PRIMARY CLIENT Last Name <input type="text"/> First <input type="text"/> MI <input type="text"/>				DATE OF TRANSACTION m o d a y r <input type="text"/>	

PROBLEM LIST			SPECIAL PRESENTING AREAS
PROBLEM	STATUS	COMMENTS/NOTES	AREA
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>		<input type="text"/>

GOAL DATA

GOAL CONDITION <input type="text"/>	ESTIMATED DATE OF GOAL ACHIEVEMENT <input type="text"/>
--	--

SERVICE REQUESTS				
CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE	PROBLEM	SERVICE REQ	UNITS REQUESTED	COMMENTS/SUGGESTIONS/NOTES
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.



The latter sheet is a printed record of all services requested as well as information on their ordering, authorization, confirmation, delivery, and final status. These sheets are also used to update information in the service and problem records of the client by making changes on sheet and sending to data processing clerk.

PROCEDURE

This form is completed by the case managers only. One becomes the case manager of record via the Client Base Data Form, YSIS-1. Any other worker who attempts to enter data via this form will be rejected by the information system's edit procedures.

INSTRUCTIONS FOR COMPLETING THE SERVICE PLANNING FORM (YSIS-2)

After the name of each input item below, a number (e.g., 15) appears in parentheses indicating the maximum number of characters that can be entered on the form and subsequently entered into the computer files.

<u>Item No.</u>	<u>Item Identification</u>
1-2	CLIENT ID NO. Enter the client's ID number from the most recent copy of the Application for Service (YSIS-1).
3-4-5	AGENCY Enter the identification number assigned to your agency. Item 3 is a one digit code which describes the type of agency (e.g., a Public Mental Health Facility). Item 4 is the unique identification number assigned to the agency, usually a federal tax number or vendor number. Item 5 is the number of a branch or center of a multiple site agency.
6-7	WORKER ID NUMBER (9 + 2) Enter the 9-digit code identifying the client's case manager. Item 7, CLASS, is reserved for future use.
8	CLIENT Client Name

Item No. Item Identification

9 DATE OF TRANSACTION (6)

Enter the date on which the form is prepared.
Enter as MM/DD/YY.

10 PROBLEM (4)

Enter the 4 character code for each problem on the list. Select the most appropriate codes from the Problem Definition section of your agency's Code Manual or Resource Directory.

11 STATUS (1)

Enter the appropriate 1 character code indicating the status of the problem at the time of entry.

<u>Code</u>	<u>Status</u>
X	Inactive. The problem is considered 'inactive' and a solution is not being planned at this time.
N	Not Appropriate. This problem will not receive services at this time either because of the wishes of the client or his/her level of functioning.
I	Identified. A barrier to goal achievement, the problem has been identified for action.

Item No. Item Identification

Agencies providing Title XX social services are required to report special client group codes to more specifically identify the client in terms of his/her relationship to a specific social service problem for Federal reporting purposes; e.g., Drug Abuse.

A series of 1 character alpha codes are reserved for Title XX purposes. (See table of MDFS codes on following page.)

Other agencies may wish to record certain other client characteristics such as behavior indicators; e.g., "aggression, fighting." Agencies may use the 100 through 900 series of numbers to code internal agency indicators. For example in the case of child abuse, an agency may want to develop a set of codes for the precise nature of the abuse; e.g., "fractured leg."

TABLE OF CODES FOR ITEM 12

Special Presenting Areas Used by the Missouri Division of Family Services for Title XX Reporting (adjust left when entering in Item 12).

<u>Code</u>	<u>Special Client Group</u>
A	Child Abuse

12 SPECIAL PRESENTING AREAS (3)

Definition

Code Special Client Group

This designation is to be made for any primary client involved in a report of child abuse, whether it is the person responsible for the child's care, custody or control, or the abused child.

B Child Neglect

Definition

This designation is to be made for any primary client involved in a report of child neglect, whether it is the person responsible for the child's care, custody or control, or the neglected child.

C Alcohol Abuse

Definition

A medically determined condition characterized by harmful use of alcoholic beverages to the extent that health is substantially impaired or endangered, or social or economic functioning is substantially disrupted.

D Drug Abuse

Definition

Code Special Client Group

A medically determined condition characterized by dependency on drugs, with increasing detachment from normal responsibility for personal needs and those of dependents.

E Mental Retardation/Developmentally Disabled

Definition

Mental Retardation - A medically determined condition characterized by significantly below average general functioning existing concurrently with deficiencies in intellectual functioning and adaptive behavior.

Developmental Disability - Refers to medically determined cerebral palsy, epilepsy, autism, learning disability related to brain dysfunction, or other neurological handicapping condition closely related to mental retardation or requiring similar treatment and originating before the individual attains age 18, and which has continued or can be expected to continue indefinitely.

<u>Code</u>	<u>Special Client Group</u>
F	<p>Runaway Child</p> <p><u>Definition</u></p> <p>A minor (as defined by State Law) who is reported, in accordance with the State's definition of a runaway, to have left his/her place of abode without consent of parents, guardian or other person acting in the capacity of parent.</p>
G	<p>Aged</p> <p><u>Definition</u></p> <p>An individual who is 65 years of age or older.</p>
H	<p>Blind</p> <p><u>Definition</u></p> <p>An individual who is visually impaired to the extent that it is creating difficulty in functioning.</p>
I	<p>Disabled</p> <p><u>Definition</u></p> <p>This designation applies to an</p>

<u>Code</u>	<u>Special Client Group</u>
	<p>individual incapacitated from "gainful activity" by reason of a physical or mental impairment.</p>
J	<p>Emotionally Disturbed</p> <p><u>Definition</u></p> <p>This designation applies to a youth, adult or aged individual who has been medically determined to be mentally ill/emotionally disturbed. Mentally ill/emotionally disturbed is a state of impaired mental functioning sufficient to distort the individual's capacity to meet the ordinary demands of life.</p>
K	<p>Unwed Parent</p> <p><u>Definition</u></p> <p>This designation applied to unmarried parents experiencing problems with new parenthood. This applies to both expectant parents and parents with children.</p>
L	<p>Adult Offender</p> <p><u>Definition</u></p>

Code Special Client Group

This designation applies to offenders over age 18, living in correctional institutions or in community based care facilities such as halfway houses.

M Juvenile Offender

Definition

This designation applies to adjudicated youth under age 18 currently living in residential or community based care facilities, or other community care placements under the legal custody of the juvenile court or other court designated agency.

N Vocational Rehabilitation

Definition

An individual currently participating in the Missouri Vocational Rehabilitation Program.

O Public Housing Resident

Definition

An individual who is currently residing in a public housing facility.

Code Special Client Group

P Vietnamese Refugee

Definition

An individual of Vietnamese nationality who has been "paroled" into the United States as a refugee, or granted "voluntary departure" status as a refugee and who is not a dependent of a repatriated United States citizen.

Q Cambodian Refugee

Definition

An individual of Cambodian nationality who has been "paroled" into the United States as a refugee, or granted "voluntary departure" status as a refugee, and who is not a dependent of a repatriated United States citizen.

Item No.

Item Identification

14

GOAL CONDITION (3)

Enter the 3-digit code which described the level of social functioning at which the client will be when services have been successfully completed; when a new, higher goal will be established; or when goal

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>
	maintenance begins. Select proper goal from the goal section of your agency's Code Manual or Resource Directory.		if you are requesting 20 days of child day care, enter '020'.
15	ESTIMATED DATES OF GOAL ACHIEVEMENT (6) Enter the future date by which it is expected the client will have achieved his/her goal. The date should not exceed six months. Enter as MM/DD/YY.		Complete a line (Items 18--22) for each service desired. EACH PROBLEM ON THE PROBLEM LIST SHOULD HAVE AT LEAST ONE SERVICE REQUESTED.
18	CIRCLE HOUSEHOLD MEMBERS RECEIVING THE SERVICE (9) If a household member other than the client is to receive the service planned ("service recipient"), circle the letter which identifies him/her on the Client Base Data Form.		
19	PROBLEM (4) Enter the 4-digit code for the problem from Item 10 for which you are requesting service.		
20	SERVICE REQUESTED: CODE (4) Enter the 4-character code for the service requested. Select the most appropriate code from the service code selection of the YSIS Resource Directory.		
21	UNITS REQUESTED (3) Enter the number of units requested; e.g.,		

PART B: APPENDIX/YSIS-3

Page ___ of ___

DESCRIPTION

This four-copy form is used to implement services requested on the Service Planning Form. A Service Order Document is to be completed by the case manager for each service entered on the Service Planning Form. If the service request involves the purchase of service or the obligation of services in the agency's controlled inventory of services, then the order must be officially "authorized" by designated personnel (e.g., accounting clerk, budgeting officer, etc.).

PROCEDURE

Two copies of the form are sent to the service provider/vendor and one is returned to the case manager by the provider to confirm the outcome of a referral (e.g., "no show," "accepted," etc.).

The case manager may send the service provider/vendor a second copy of the form with the SERVICE TERMINATION/REJECTION portion completed to terminate services early, i.e., prior to the full delivery of all units requested.

The shaded client/agency/worker identification area at the top of the form are used for internal data processing purposes.

As Service Order Documents are submitted to the information

system, data will be reflected on the Client Service History Sheet. If they are not entered on time, their absence will be noted on the Unplanned, Unscheduled and Overdue Services report (No. 07).

No services planned should be ordered for longer than six months. If a service is needed for a longer period, the present order should be renewed via a new Service Order Document.

SERVICE ORDER DOCUMENT

YSIS-3

AGENCY TYPE ID #	UNIT	WORKER ID NUMBER	CLASS
1 2	3 4 5	6	7

ROUTING INFORMATION

8 To Provider Agency CONTACT: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____	9 From Requesting Agency CASE MGR: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____
--	---

CLIENT IDENTIFICATION

10 Primary Client: NAME: _____ ADDRESS: _____ BILLING ID # _____	11 Service Recipient (If other than Primary) NAME: _____ PHONE: _____ ID # _____
---	---

SERVICE ORDER/REQUEST

12 SERV. CODE: _____	13 SERV. TYPE: _____	14 TYPE UNITS: _____	QTY: _____
15 APPOINTMENT--DATE: _____ Time: _____ AM PM			

SERVICE CONFIRMATION

SERVICE TERMINATION/REJECTION

16 Was Service Initiated? Y <input type="checkbox"/> Yes, on _____ N <input type="checkbox"/> No, because _____ Prov. Signature: _____	SERVICE STATUS <input type="checkbox"/> 17 REASON: _____ 18 SERVICE STATUS CODE: _____ DATE: _____ 20 OFFICIAL NOTICE: The service authorized by this order will expire on _____, No service should be rendered past this date. C. M. Signature: _____
---	---

ACCOUNTING INFORMATION

CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE 1	PROBLEM 2	3 SERVICE REQUESTED Letter Code	4 DATE PLANNED	5 PROVIDER AGENCY Type ID #	Unit	MOD 6
1 A B C D E F G H J 2			m o d a y r			
SERVICE AUTHORIZATION						
7 UNITS	8 RATE	9 FROM	THRU	10 STAFF PROVIDER ID	11 FUND CODE	
I hereby certify the client indicated above is eligible for services and authorize the provision of the services listed						
12 SERVICE WORKER'S SIGNATURE		13 DATE OF ACTION	14 AUTH WORKER ID	15 APPOINTMENT DATE		
16 FEE ESTIMATE	17 CLIENT SHARE	18 SHARE SOURCE	19 THIRD PARTY ID			

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.

INSTRUCTIONS FOR COMPLETING THE SERVICE ORDER DOCUMENT FORM
(YSIS-3)

After the name of each input item below, when a number (e.g., 15) appears in parentheses, it indicates the maximum number of characters that can be included on the form.

<u>Item No.</u>	<u>Item Identification</u>
1-2	Enter the client's 9-digit identification number.
3-5	Enter your agency identification number.
6-7	Enter the case manager's identification number.
8	Enter routing information for the provider agency: <ul style="list-style-type: none"> - Contact: The name of the worker (if known) the client is to contact upon reaching the provider agency. - Agency: The name of the provider agency (or an internal unit of your agency if service is to be provided internally). - Address: The address to which the client should go for service (as opposed to an administrative or business office address). - City: Balance of the address. - Phone: The telephone number of the CONTACT person or other person who can

<u>Item No.</u>	<u>Item Identification</u>
9	be notified if the client must cancel an appointment or who can be contacted by the case manager for service confirmation. Enter similar information for the case management agency, including the case manager's telephone number.
10	Enter the name, address, and billing identification number of the client. The billing number is the number the provider should use to bill your agency if the service is purchased. In some instances this may be the same as the client's identification number (in Item 1) but the confidentiality of the record identification number should be protected; therefore, it should not be used if it might be compromised.
11	Enter the name, phone number and any special billing identification number of the service recipient. The service recipient is a member of the client's household who is receiving a service separate from the client but as part of the client's service plan. SERVICE ORDER/REQUEST
12	SERV CODE (4) Enter the 4-character code from the client's Service Planning Form for the service being ordered.

Item No. Item Identification

13 SERV TYPE

Write out the name/title of the service being requested which corresponds to the service code in Item 12.

14 TYPE UNITS (2)

Enter the type of service units in which the service being ordered is delivered; e.g., days, visits, encounter, etc. The type of service unit should appear along with the service in the YSIS Resource Directory.

QTY (4)

Enter the number of units of service being ordered.

15 APPOINTMENT--Date (6)

Enter the date on which the client should arrive for a service intake interview or to actually begin service at the provider agency.

APPOINTMENT--Time (5)

Enter the time at which the client should arrive for the appointment; e.g., if 10:30 in the morning, enter '10:30' and circle 'AM'.

SERVICE CONFIRMATION

Item No. Item Identification

16

This portion of the form is completed by the service provider on the day of the client's appointment.

If the client arrives and is to receive service, the 'Y' box is checked and the service begin date is entered.

If the client does not arrive or is not accepted for service, the 'N' box is checked and the reason is entered.

The provider then signs this section and returns a copy of the document to the case manager.

The case manager then enters the appropriate code in the SERVICE STATUS box and sends the form to the data processing clerk. See Table for Item 18 for appropriate codes.

SERVICE TERMINATION/REJECTION

This portion of the form is not completed unless the service is not authorized by the case manager's agency or unless a service is to be terminated prior to the delivery of all of the units ordered.

17

REASON

Write in the reason why the service is terminated or rejected.

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>																
18	SERVICE STATUS CODE (2) Enter the 2-character code which best describes the reason in Item 17. Table on next page.	4	Items 12 (SERVICE REQUEST--Type) and 13 (SERVICE REQUEST--Code). DATE PLANNED (6)																
19-20	OFFICIAL NOTICE (6) If service is terminated before completion of requested units, enter the date on which service will be terminated to complete the official notice statement and sign the statement. Send a copy of the form to the provider and notify the client.	5	Copy in the DATE OF TRANSACTION (Item 9) from the Service Planning Form on which this service was requested. AGENCY (i + 9 + 2) Enter the identification number of the provider agency as listed in your agency's Resource Directory.																
	ACCOUNTING INFORMATION	6	MOD (1)																
1	CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE (1) Circle the exact character designating the household member receiving service which was circled in Item 18 on the Service Planning Form, YSIS-2.		Enter the code for the method of delivery of service from the following table.																
2	PROBLEM (4) Copy in the exact code which appears in Item 19 on the Service Planning Form, YSIS-2.		<table border="1"> <thead> <tr> <th><u>Code</u></th> <th><u>Method</u></th> </tr> </thead> <tbody> <tr> <td>D</td> <td>Direct--Provided by case manager or other professional staff</td> </tr> <tr> <td>S</td> <td>Direct--Subprofessional or volunteer staff</td> </tr> <tr> <td>V</td> <td>Voluntary agency (without charge to your agency)</td> </tr> <tr> <td>P</td> <td>Purchase--Private Agency</td> </tr> <tr> <td>G</td> <td>Purchase--State Agency</td> </tr> <tr> <td>L</td> <td>Purchase--Local government or other public agency</td> </tr> <tr> <td>C</td> <td>Client--Receives direct dollar payment for purchase</td> </tr> </tbody> </table>	<u>Code</u>	<u>Method</u>	D	Direct--Provided by case manager or other professional staff	S	Direct--Subprofessional or volunteer staff	V	Voluntary agency (without charge to your agency)	P	Purchase--Private Agency	G	Purchase--State Agency	L	Purchase--Local government or other public agency	C	Client--Receives direct dollar payment for purchase
<u>Code</u>	<u>Method</u>																		
D	Direct--Provided by case manager or other professional staff																		
S	Direct--Subprofessional or volunteer staff																		
V	Voluntary agency (without charge to your agency)																		
P	Purchase--Private Agency																		
G	Purchase--State Agency																		
L	Purchase--Local government or other public agency																		
C	Client--Receives direct dollar payment for purchase																		
3	SERVICE REQUESTED (1 + 4) Copy in the exact codes which appear in																		

TABLE OF SERVICE STATUS CODES

SERVICE STATUS CODE (2) (Items 16 and 18)

Enter the 2-character code from the following table which best describes the reason for service termination/rejection.

<u>Code</u>	<u>Service Not Begun</u>
1A	Client Not Eligible--Does Not Meet Offense Guidelines
1B	Client Not Eligible--Target Area Residence Required
1C	Client Not Eligible--Other
1D	Client Refused Service
1E	Parent(s)/Guardian Refused Service
1F	Client Not Accepted/Problem Does Not Warrant Service
1G	Client Unable to Pay Required Fee
1H	Client Unwilling to Pay Required Fee
1J	Client Not Accepted: Service Resources Depleted
1K	No Provider Available
1L	Unacceptable Waiting (for Service) Period: 0-30 Days
1M	" : 31-60 Days
1N	" : Over 60 Days
1P	Time/Location of Service Not Acceptable
1Q	Cancelled--Client No Show
1R	Cancelled--Provider Not Available for Appointment
1S	Came Under Jurisdiction of Court
1Z	Other

<u>Code</u>	<u>Service Not Begun</u>
2A	Service Active

<u>Code</u>	<u>Early Termination</u>
4A	Case is Closing (by Case Manager)
4B	Client's Eligibility Terminated
4C	Service Resources Depleted or Discontinued
4D	Poor Attendance
4E	Unacceptable Client Behavior
4F	Contact with Client Lost (Reason Unknown)
4G	Progress Unsatisfactory
4H	Unexpected Development
4J	Service No Longer Needed
4K	Client Decision--Service Not Helpful
4L	Client Decision--Service too Costly
4M	Client Decision--Other
4P	Client Came Under Jurisdiction of Court

<u>Code</u>	<u>Service Completed</u>
7X	According to Order/Request--Satisfactory
7Y	According to Order/Request--Unsatisfactory
7Z	According to Order/Request--Further Service Indicated
99	Service Request Void--Requested in Error
22	Provider's Report Not Acceptable

<u>Item No.</u>	<u>Item Identification</u>	<u>Item No.</u>	<u>Item Identification</u>
	SERVICE AUTHORIZATION	11	FUND CODE (5)
7	UNITS (3) Enter the number of units requested; e.g., if you are authorizing 20 days of child day care, enter '020'. NOTE: Units authorized could be less than those requested on the Service Planning Form (Item 22) due to budgetary or inventory limitations.		This Item to some extent duplicates the TYPE field in Item 7. However, it is a more detailed data element and permits an agency to identify the financial fund against which your agency will account for this service. The fund code used in this field will usually be a "pseudo code" for the actual account which is to be charged with the service and for the higher level classification associated with the account. In many cases, the financial fund may be a third party payer (e.g., Medicaid or Medicare). If your agency uses fund codes, instructions will appear in a table supplied by your agency.
8	RATE (3 + 2) Enter the amount of reimbursement per unit delivered at which the provider will be reimbursed in dollars and cents.	12	SERVICE WORKER'S SIGNATURE
9	FROM -- THRU (6 + 6) Enter the dates for the period during which the provider is authorized to provide the service ordered for the client. No service delivered after the THRU date will be paid for.		The worker authorizing the service should sign in this space. The worker not only certifies the client as eligible but also officially obligates or encumbers the units and funds indicated in Items 7 and 8, above.
10	STAFF PROVIDER ID (9) If the method of service delivery (MOD, Item 6) is coded either 'D' or 'S', enter the staff identification number of the staff provider.	13	DATE OF ACTION (6) Enter the date on which the signature is entered.
		14	AUTH WORKER ID (9) Enter the identification number of the

fee, the balance of which will be paid by the account indicated in the fund code (Item 11). Enter numbers indicating '00' to '99' % to express the percent of the fee paid by the client.

Item No. Item Identification

worker authorizing the service.

15 APPOINTMENT DATE (6)

Enter the appointment date as it appears in Item 15, APPOINTMENT--Date, in the SERVICE ORDER/REQUEST section above.

<u>Code</u>	<u>Share</u>
NC	Provided by another agency; without charge
PC	Provided by another agency; sliding fee charged
FC	Provided by another agency; full fee paid by client

THE FOLLOWING FIELDS ARE OPTIONAL

18

SHARE SOURCE (2)

16 FEE ESTIMATE (4)

Estimate the maximum cost of the service to the case management (controlling)--your--agency for either direct or purchased services. Round any figure to the nearest dollar. The payer of the fee will be indicated by the fund code (Item 11) or if the client is the payer then by Item 17, below.

Enter the appropriate 2-character code from the following table indicating the source of the client's share of the fee.

<u>Code</u>	<u>Source</u>
SF	Self/Family
BB	Blue Cross/Blue Shield
PC	Other Private Insurance Company
EU	Employer/Union (Special programs)
AI	Agency/Institution/Church
OT	Other Source

If service is provided without charge, enter '0000'.

19

THIRD PARTY ID (11)

17 CLIENT SHARE (2)

Enter the 2-character code from the following table which represents the client's share of the estimated fee, if any:

If all or a portion of the fee estimated in Item 16 is paid by a third party, enter the number which the third party uses as an identify number. For agencies using the

<u>Code</u>	<u>Share</u>
00-99	Direct or Purchased Services

Client/Family will pay ___ % of

FUND CODE (Item 11), the use of the third party identification number may not be necessary since the Fund Code may indirectly identify the third party.

PART B: APPENDIX/YSIS-4

Page ___ of ___

DESCRIPTION

A Service Delivery Report is to be completed and submitted to the data processing client by the case manager for every client for every Service Order Document previously issued; i.e., for every service authorized and delivered, including the delivery of case management as a service.

Service Delivery Reports should be pre-distributed to all major providers of service. The forms can then be completed and submitted to the case manager as required.

Essentially, the Service Delivery Report is an update report to the Service Order Document. The ACCOUNTING INFORMATION portion of the Service Delivery Report is an exact duplication of the accounting information on the Service Order Document to ensure that the report is up-dating the correct order record (i.e., to guarantee a perfect match of the report to the authorization). This, of course, could be done away with by the use of an unique Service Order Document number which would be entered on all Service Delivery Reports.

The case manager will receive a monthly Service Delivery Report from provider agencies for each service delivered to the client in the previous monthly accounting period. A Report will also be submitted immediately upon completion or

early termination of a service order/request.

For providers not participating in the case management reporting effort, the case manager will have to determine the service activity during the previous month and prepare the Service Delivery Report in place of the provider.

The shaded client/agency/worker identification area at the top of the form are for internal data processing purposes of the case management agency.

The case manager can also use this Report to record all case management contacts with and in behalf of the client.

Upon submission to the central records unit, data from the Report will be posted to the master Client Service History Sheet.

SERVICE DELIVERY REPORT

YSIS-4

		AGENCY TYPE ID # <input style="width: 100%;" type="text"/>	UNIT <input style="width: 100%;" type="text"/>	WORKER ID NUMBER <input style="width: 100%;" type="text"/>	CLASS <input style="width: 100%;" type="text"/>
1	2	3 4	5	6	7

ROUTING INFORMATION	
8 To Provider Agency CONTACT: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____	9 From Requesting Agency CASE MGR: _____ AGENCY: _____ ADDRESS: _____ CITY: _____ PHONE: _____

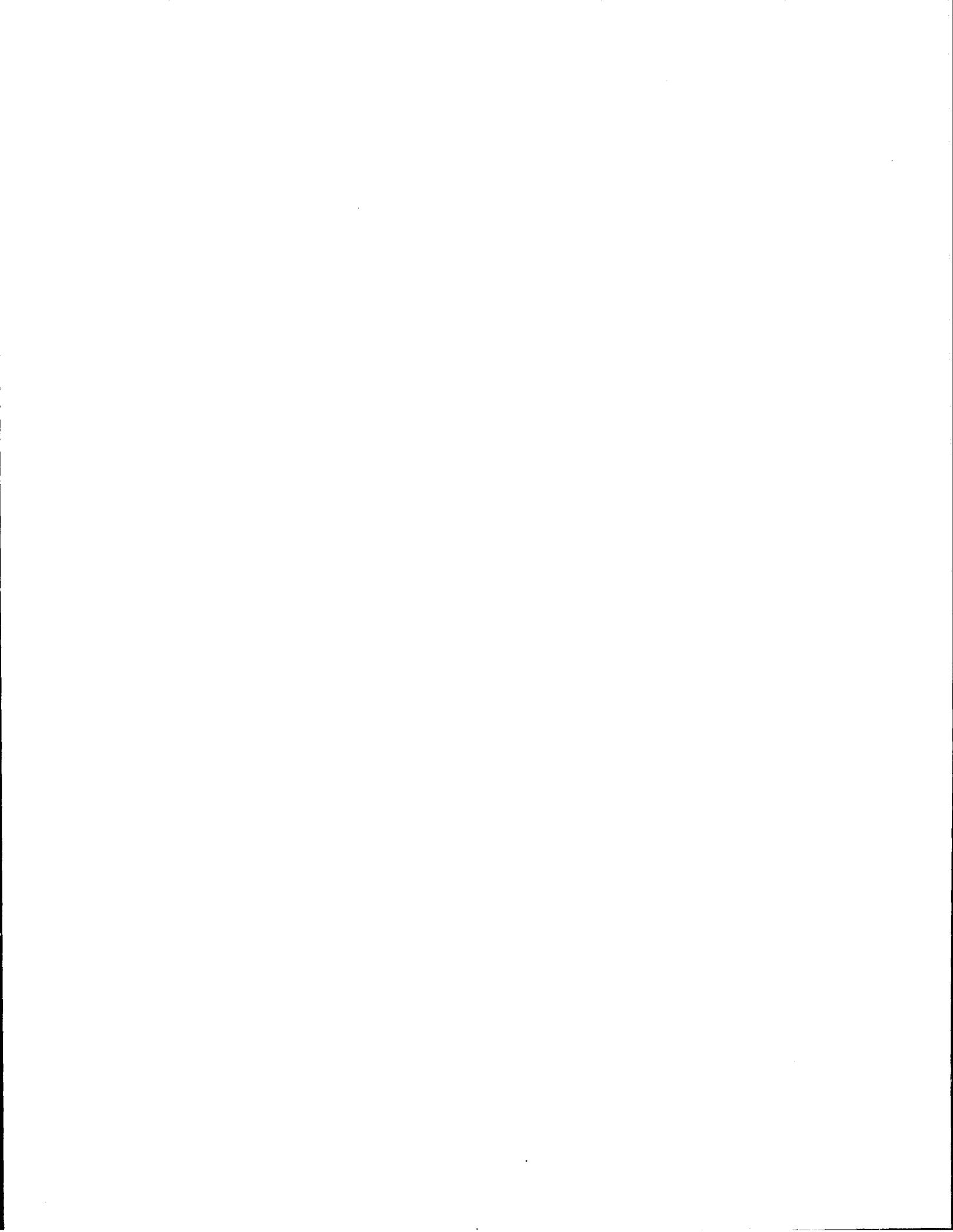
CLIENT IDENTIFICATION	
10 Primary Client: NAME: _____ ADDRESS: _____ BILLING ID #: _____	11 Service Recipient (If other than Primary) NAME: _____ PHONE: _____ 12 ID #: _____

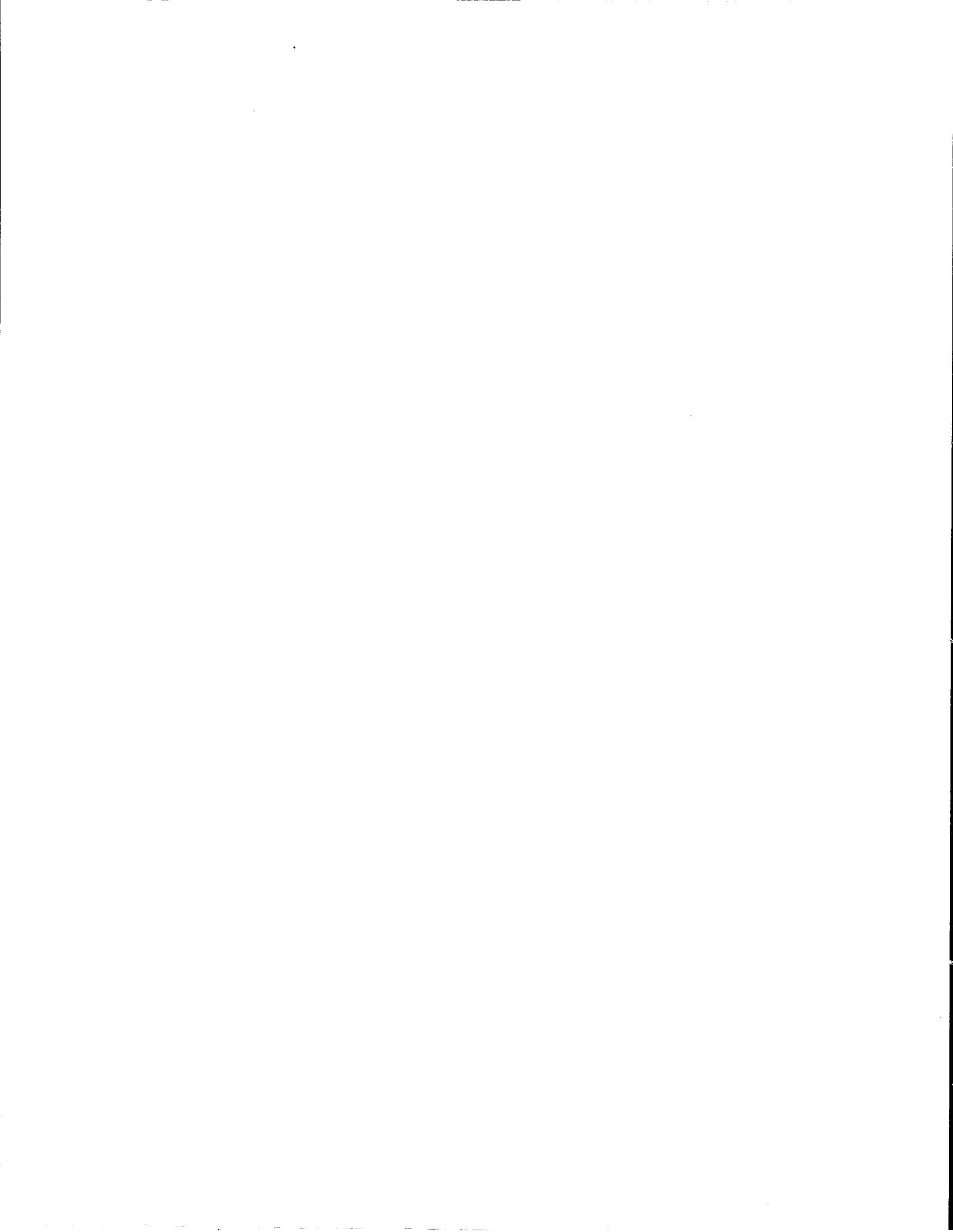
SERVICE DELIVERED			
13 SERVICE TYPE DELIVERED: _____			
14 REPORT DATE: _____	15 DELIVERY PERIOD--Initiated: _____ Thru: _____	16 #UNITS DELIV: _____	17 SERVICE STATUS: <input style="width: 20px; height: 20px;" type="checkbox"/>
18 SERVICE STATUS--Continuing: _____ Completed: _____		Early Termination: _____ TOTAL CHARGE: \$ _____	

EVENT REPORTING						26 Attendance				
20 Event Date	21 Time A/P	22 Hrs/Min	23 Mode	24 Who (I/F/O)	25 # Units	Mon	Tue	Wed	Thu	Fri
_____	_____	_____	PTL IFO	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	PTL IFO	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	PTL IFO	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	PTL IFO	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	PTL IFO	_____	_____	_____	_____	_____	_____	_____

ACCOUNTING INFORMATION						
1 CIRCLE HOUSEHOLD MEM. RECEIVING THE SERVICE <input style="width: 100%;" type="text"/>	2 PROBLEM <input style="width: 100%;" type="text"/>	3 SERVICE REQUESTED Letter Code <input style="width: 100%;" type="text"/>	4 DATE PLANNED <input style="width: 100%;" type="text"/>	5 PROVIDER AGENCY Type ID # <input style="width: 100%;" type="text"/>	Unit <input style="width: 100%;" type="text"/>	MOD 6 <input style="width: 100%;" type="text"/>
SERVICE AUTHORIZATION						
7 UNITS <input style="width: 100%;" type="text"/>	8 RATE <input style="width: 100%;" type="text"/>	9 FROM <input style="width: 100%;" type="text"/>	THRU <input style="width: 100%;" type="text"/>	10 STAFF PROVIDER ID <input style="width: 100%;" type="text"/>	11 FUND CODE <input style="width: 100%;" type="text"/>	
12 SERVICE WORKER'S SIGNATURE <input style="width: 100%;" type="text"/>		13 DATE OF ACTION <input style="width: 100%;" type="text"/>		14 AUTH WORKER ID <input style="width: 100%;" type="text"/>		15 APPOINTMENT DATE <input style="width: 100%;" type="text"/>

This form is included as an illustration and has not been approved by the Office of Management and Budgets for official use.





CONTINUED

2 OF 3

INSTRUCTIONS FOR COMPLETING THE SERVICE DELIVERY REPORT FORM
(YSIS-4)

After the name of each input item below, when a number (e.g., 15) appears in parentheses, it indicates the maximum number of characters that can be included on the form.

Item No. Item Identification

WHEN SERVICES ARE PROVIDED BY ANOTHER AGENCY

This form is used by the provider to report delivery of service to the case manager. At the same time, however, the provider may use a copy of this form to update the client's service record in the provider agency. The following instructions are from the perspective of the case manager as he/she receives the Service Delivery Report from the provider.

Upon receipt of the Service Delivery Report from the provider, the case manager will merge the document with the proper Service Order Document and complete as follows:

SHADED PORTION

For the case manager's data processing clerk, enter the following in the shaded portion at the top of the form as a key to the case management agency's client record:

1-2 Enter the client's 9-digit identification

Item No.

Item Identification

number and the 1-digit check digit.

3-5 Enter your agency's identification number.

6-7 Enter the case manager's identification number.

ROUTING INFORMATION

8-12 The routing information will have been entered by the provider agency. Match this information with that on the Service Order Document to make sure it is a correct merge of the two documents.

SERVICE DELIVERED

This section will be completed by the service provider, with the exception of Item 17 (SERVICE STATUS Box) which will be completed by the case manager after completing review. Be certain that none of the information reported is in conflict with the information in the ACCOUNTING INFORMATION section at the bottom of the form and the ACCOUNTING INFORMATION section on the Service Order Document.

13 SERVICE TYPE DELIVERED

A narrative description of the service delivered by the provider.

This description should agree completely

Item No.

Item Identification

with the SERVICE REQUESTED CODE in Item 3, below.

14 REPORT DATE (6)

This is the month, day, year date on which the service provider prepared the service delivery report.

15 DELIVERY PERIOD--Initiated (6)

The first date within the accounting period (month) on which the ordered service was delivered: month/day/year.

Thru (6)

If the service has been terminated, the date here will be the last day within the accounting period (month) on which the service was provided: month/day/year.

If the service is continuing, this will be the date of the last day of the accounting period.

16 # UNITS DELIV (3)

This is the number of service units delivered during the reporting period. This number should never exceed the number of units in Item 7, in the ACCOUNTING INFORMATION section of the Service Order Document. (Also, when added to the UNIT DEL (Units

Item No.

Item Identification

Delivered to Date) column of the Client Service History Sheet, the sum of units delivered should never exceed the number in the UNITS REQ column on the same report.)

17

SERVICE STATUS (2) Box

After reviewing the entire form, the case manager will enter a code from the Service Status Table (next page) which reflects the current status of the service as indicated by the provider in Item 18. For example, if the provider indicates that the service is "continuing" and the case manager agrees with this, he/she will enter '2A' in the field.

If the report is not acceptable to the case manager, he/she will enter the code '22' in the field to notify accounting personnel not to honor an invoice for this service from the provider until certain problems are resolved; e.g., a vendor could be billing for a service which had been terminated on an earlier date. (See next page for service status codes.)

18

SERVICE STATUS

The provider will place an 'X' after the most appropriate service status descriptor.

TABLE OF SERVICE STATUS CODES (2) (Item 17)

Enter the 2-character code from the following table which best describes the reason for service termination/rejection.

<u>Code</u>	<u>Service Not Begun</u>
1A	Client Not Eligible--Does Not Meet Offense Guidelines
1B	Client Not Eligible--Target Area Residence Required
1C	Client Not Eligible--Other
1D	Client Refused Service
1E	Parent(s)/Guardian Refused Service
1F	Client Not Accepted/Problem Does Not Warrant Service
1G	Client Unable to Pay Required Fee
1H	Client Unwilling to Pay Required Fee
1J	Client Not Accepted: Service Resources Depleted
1K	No Provider Available
1L	Unacceptable Waiting (for Service) Period: 0-30 Days
1M	" : 31-60 Days
1N	" : Over 60 Days
1P	Time/Location of Service Not Acceptable
1Q	Cancelled--Client No Show
1R	Cancelled--Provider Not Available for Appointment
1S	Came Under Court Jurisdiction
1Z	Other
2A	<u>Service Active</u>

<u>Code</u>	<u>Early Termination</u>
4A	Case is Closing (by Case Manager)
4B	Client's Eligibility Terminated
4C	Service Resources Depleted or Discontinued
4D	Poor Attendance
4E	Unacceptable Client Behavior
4F	Contact with Client Lost (Reason Unknown)
4G	Progress Unsatisfactory
4H	Unexpected Development
4J	Service No Longer Needed
4K	Client Decision--Service Not Helpful
4L	Client Decision--Service too Costly
4M	Client Decision--Other
4P	Came Under Court Jurisdiction

<u>Code</u>	<u>Service Completed</u>
7X	According to Order/Request--Satisfactory
7Y	According to Order/Request--Unsatisfactory
7Z	According to Order/Request--Further Service Indicated
99	Service Request Void--Requested in Error
22	Provider's Report Not Acceptable

Item No.Item IdentificationItem No.Item Identification

19

TOTAL CHARGE (3 + 2)

This is the dollar amount of payment the provider is requesting for the number of service units reported in Item 16. It should equal the service authorized rate per unit (Item 8 in the Accounting Information section of the Service Order Document) times the number of units reported in Item 16; i.e., service authorized rate X # units delivered = total charge.

ACCOUNTING INFORMATION

Make sure that the information in Items 1 through 6 on this form is identical to that on the Service Order Document.

1-15

The provider should have copied all data in this section directly from the Service Order Document which ordered/authorized this service. Any conflict in the data must be immediately corrected.

Omit items 7-15 unless specifically requested to complete. Always omit Items 12 and 15.

When the accounting information is completed, forward one copy to the data processing clerk and place the other in the client's case record.

WHEN SERVICES ARE PROVIDED DIRECTLY

The form is completed in essentially the same manner as when submitted by another providing agency with the following exceptions.

- Routing Information and Client Identification sections may be left blank. If the provider is other than the case manager, the name of the case manager may be written in Item 8.
- The shaded portion of the SERVICE DELIVERED section is completed. This consists of Items 20 through 26, and is concerned with EVENT REPORTING. This permits the reporting of all service contacts during a period either to accumulate a monthly figure (units) for services provided during the period or for tracking and management analysis purposes. It is a method of itemizing the monthly service units reported.
- Each contact the case manager has with the client, for example, should be reported on a line (Items 20 through Item 25). If more than five contacts are made during a reporting period, the Service Delivery Report should be completed and a new form begun.

If the service for which you are reporting involves daily attendance of the service recipient or primary client (e.g., some form of classroom training or group therapy), complete Item 26, Attendance.

Item No. Item Identification

NOTE: only events or attendance related to the specific service reported as delivered in Item 13, SERVICE TYPE DELIVERED, should be reported. Other events, etc. which are not related should be reported on a Service Delivery Report to which they are related.

NOTE: Event/Attendance reporting is specifically client-oriented as opposed to case worker or case manager oriented. That is, this type of reporting makes no attempt to account for the worker's time. For example, a worker may spend two hours with a client in a group counseling session. This means that the worker also spent two hours with all of the other clients who also participated in the session. If four other clients were in the session this means that the worker would report a total of TEN HOURS to the data processing clerk (BUT USING A SEPARATE SERVICE DELIVERY REPORT FOR EACH CLIENT).

REMINDER: Event/Attendance reporting is used only for the direct provision of services. But if you are providing the service for another agency but the events/attendance reported can be summed to complete a Service Delivery Report or a monthly voucher to the agency for which you are providing the service. Normally, this would not apply to a case manager but could apply to a staff provider.

Item No. Item Identification

20 EVENT DATE (6)

Enter the date on which the event took place using the format: MM/DD/YY.

21 TIME (5)

Enter the approximate time of the event in hours and minutes. Enter to the nearest 5 minutes. Enter 'A' or 'P' to indicate A.M. OR P.M. For example a morning contact at 9 A.M. should be entered as: '09:00A'.

22 HRS/MIN (4)

Enter the approximate time in hours and minutes invested in the event by the worker or client, to the nearest 5 minutes.

23 MODE (1)

Circle the letter indicating the mode of the contact/event: 'P'--in Person; 'T'--Telephone; 'L'--Letter.

24 WHO (1 + 1 + 1)

Indicate 'Who' was involved in the event using one or more of the following codes:

<u>Code</u>	<u>Meaning</u>
I	The Individual client
F	Family members
O	Others

Item No.

Item Identification

If the client, parents, and the client's teacher were in a meeting, enter 'IFO'.

Indicate on the adjacent line any identifying information useful to you.

Internal Staff Provider: If completed by an internal staff provider, retain one copy; send two copies to the case manager, who will distribute as above. If providing for another agency, send the original to that agency; a copy to your data processing clerk; and place a copy in the client's folder.

25

UNITS (3)

Enter the number of units represented by the event.

CLIENT'S CONSENT TO RELEASE OF CONFIDENTIAL INFORMATION (YSIS-7)

PART B: APPENDIX/YSIS-7

Page ____ of ____

26

ATTENDANCE (30)

This item is used in place of event reporting.

For each day or session which the client attended, enter the time of attendance to the nearest hour. There are enough entry spaces.

If the client did not attend on a particular day, enter one of the following codes:

<u>Code</u>	<u>Meaning</u>
A	Absent
C	Cancelled by provider on this day.

There are enough entry lines to report a month of attendance. When the period has ended, total the units of attendance and report in Item 16, # Units Deliv.

DESCRIPTION

Each client should be given a copy of the agency's Privacy and Confidentiality Policy to read. The client should keep one copy and initial another copy for inclusion in his/her folder.

In addition to the above procedure, whenever it will be necessary to release any client information to any party, whatsoever, outside of the case management agency, the attached consent to release form should be completed. Completion of the form is self explanatory. Release of data to evaluators should be included on this form.

SYSTEM DEVELOPMENT MEMORANDUM FORM (YSIS-8)

PART B: APPENDIX/YSIS-8

Page ____ of ____

DESCRIPTION

This form is to be used during the Service Planning phase of case management, specifically in regard to procedure 4.3, which involves the identification of service providers for services requested in the client's service plan.

All case managers should have a supply of this form. When indicated in the procedures this form should be completed and a copy sent to the youth service program managers. Completion of the form is self-explanatory.

When this form is completed for reporting service provided directly:

Case Manager: If completed by a case manager send one copy to the data processing clerk and place the other in the client's folder.

CLIENT'S CONSENT TO RELEASE OF
CONFIDENTIAL INFORMATION

The undersigned client hereby authorizes the Case Management Agency designated below to release the following information from the client's record to the following recipients under the following conditions:

<u>Name of Information Recipient</u>	<u>Information to Be Released (enter "YES")</u>			<u>Release of Information Consent Effective Until</u>
	<u>Client Base Data</u>	<u>Problem List</u>	<u>Service History</u>	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The client hereby acknowledges the understanding that this "consent to release confidential information" remains in effect until the date or event appearing in the "Release of Information Consent Effective Until" column. This consent may be specifically revoked in writing to the case management agency.

. Signature of Client: _____ Date: _____

. Signature of Guardian: _____ Date: _____

. Witness : _____ Date: _____

Case Management Agency: _____

Case Manager: _____ Telephone: _____

SYSTEM DEVELOPMENT MEMORANDUM (YSIS-8)

TO : YSIS STAFF

DATE: _____

FROM: _____

(agency)

(worker)

(phone)

1. Subject (check one)

___ Service needed but I am unable to identify a provider agency in community
(11--Not in community inventory)

___ Service needed; provider identified but service exhausted
(12--Resource depleted)

___ Service needed; provider identified but waiting list too long
(13--Resource scarce)

___ Service needed; provider was identified BUT IS NOT IN OUR RESOURCE
DIRECTORY (14--Resource missing from Directory)

___ Provider does not offer service as indicated in OUR RESOURCE DIRECTORY (15)

___ Provider offers service but OUR RESOURCE DIRECTORY does not list service
on provider's page. (16)

___ Service is available in the community but there is a major barrier to
the client receiving it (17).

2. Detail

Provide specific detail regarding service and client involved in the above
subject:

(21) Service Code/Description: _____

(22) Problem Code/Description for
service was requested : _____

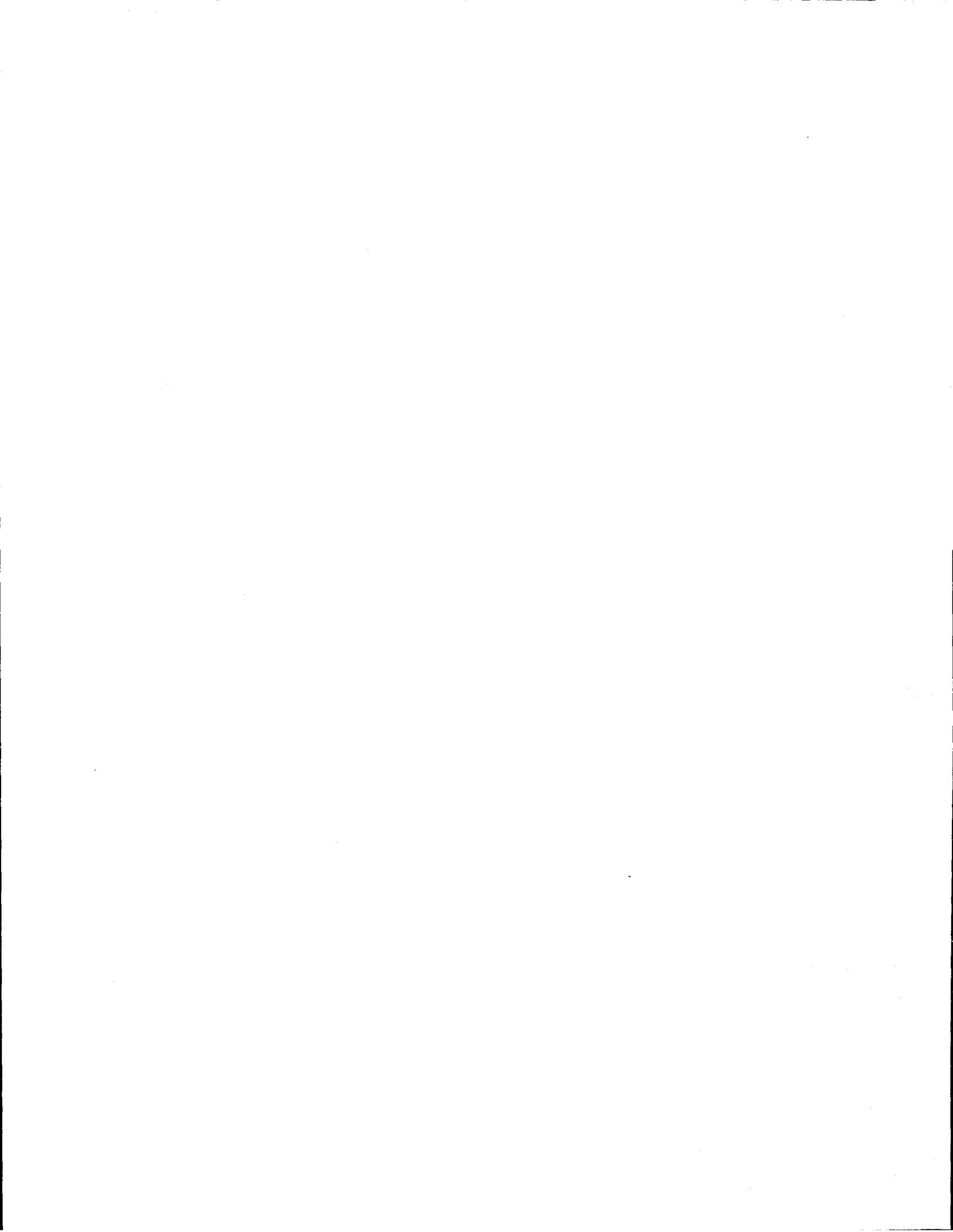
(23) Name of subject agency : _____

Page in YSIS Resource Directory referenced, if any: _____

(24) Description of barrier to service (e.g., transportation, fee, discrimi-
nation, hours, eligibility, etc.):

(25) Client Characteristics: DOB: _____ Sex: _____ Race: _____

Census Tract: _____ Family Gross Monthly Income: _____



PART C

Manual Operation of the YSIS

INTRODUCTION

Part C of this YSIS documentation presents a general approach to operating the YSIS manually. Its purpose is illustrative. It is directed toward administrative staff responsible for implementing the system on a manual basis and is designed to show them how to approach the processing of the data. Each user, however, should carefully think through the approach on a step-by-step basis before it is finally adopted.

Part C is comprised of the following sections:

- Section 1: Information System Rules
- Section 2: Suggested Files & Records
- Section 3: File Maintenance Processing
- Section 4: Report Generation

The following are the record-keeping rules which have been incorporated into the design of the Youth Services Information System.

A: INDIVIDUAL AGENCY FILES:

If the information system is being used for a program or system which involves a number of different agencies, each agency should have its own files in the Central Records Unit, even though a specific individual may be served by more than one agency. Each agency will update its own files.

B: NO LINKING OF THE RECORDS OF MEMBERS OF THE SAME FAMILY:

The system should not have the capability of linking members of the same family across (inter) agency files. The guide for this rule is what an intelligent middle class buyer of social services would accept, not what might be accepted by a disadvantaged person who cannot afford to pay for alternative services, i.e., the system must have the same respect for the privacy of a disadvantaged person that private sources of social services have for paying clients.

C: AGGREGATE DATA:

Reports providing aggregate data for planning, evaluation or research purposes which are disseminated outside the agency shall not be displayed with individual names or other identifiers.

D: GOAL-PROBLEM RECORDS:

The system should maintain records of all goals and identified problems for which the client seeks or receives service.

E: GOAL-PROBLEM-SERVICE LINKAGE:

No service shall be provided for a client unless it has been linked to a specific problem.

F: SERVICE PLAN:

All services provided for a client--no matter what the funding source(s)--shall be first entered into and requested through a formal service plan.

G: DOCUMENTED SERVICES:

All services planned should be quantified, specify a provider, have a beginning and ending date, have a completion status or outcome code, and contain provision for the recording of cost information; all services should be linked to a specific client problem.

H: PROBLEM RESOLUTION AND GOAL ACHIEVEMENT:

The outcome of all problems and goals should be systematically recorded.

I: UNIT OF COUNT:

The "client" should be the basic unit of count in the maintenance of records and the reporting of services delivered. (The "client" is defined as "an individual with whom, or for whom, a specific goal is established and to whom services are provided for the purpose of achieving the service goal.")

J: CLIENT RECORDS:

A client's records should permit the recording of the name and basic characteristics of household members receiving services as part of the client's service plan; the client's service history should record all services received by household members as part of the client's service plan, i.e., when services are provided to a household member to facilitate achievement of the primary client's goal.

K: CASE MANAGEMENT:

All entries into the client's record, and especially all services entered into the client's service plan, should be controlled by a case manager, except in instances where indications of authorization for payment of services should be entered by another official of the agency.

L: EVENT REPORTING:

The information system should permit event reporting, i.e., the reporting of all client contacts which can be counted as a unit (or toward a unit) of service for eventual service delivery reporting.

M: TRACKING:

Service planning and delivery should be tracked to ensure that services are planned and delivered according to quality performance standards.

N: COMMON DATA ELEMENTS:

A set of common data elements should be defined in a "data element dictionary" and be used throughout the information system. Whenever new forms and reports are employed, they should utilize the common

data elements. If a desired data element is not in the "data element dictionary," a new element should be defined, formally added to the dictionary, and then used as required. Ideally, the common data dictionary should be adopted by all agencies in the community.

O: PROBLEM AND SERVICE CODES:

All problems and services used in a client's service coordination records should use codes which permit a system-wide analysis. This should be accomplished by developing a dictionary of problems and service definitions to be used by all participating agencies. The definitions should be organized according to a taxonomy so that agencies offering essentially similar services will have identical classifications. This is essential for future planning, evaluations, and cost comparison analyses. The codes used on forms in the computer fields, however, should not be those used for the taxonomy but, rather, should be linked to the taxonomy through an index. This will reduce the possibility of system personnel resisting changes in the taxonomy or the adoption of nationally promulgated taxonomies because such might cause changes in file or record structures. The adoption of new taxonomies would simply require the development of a new index.

The YSIS can be used by a single agency or a system of agencies. Agencies could have one program operating from one site, to multiple programs operating from several sites.

The type of agency or service system the YSIS is used to support will in great part determine the organization of the files to be maintained. Within a single agency, with one program operating from one site, most files would be organized by case manager, by client. In a multi-agency system, with a multi-program structure, the files would be organized by agency, by program type, by site, by case manager, by client in descending order.

The presentation of the manual operation of the model system would be far too complicated if all of the possible system/agency/program/site structures which could use the system were addressed. In the following presentation, therefore, it is assumed that the model system will support several agencies, each with a single program, each operating from only one site. This structure has been chosen for presentation because it is the one most likely for potential manual users of the model system. It is assumed that most agencies/service systems with more complex structures would have the resources to at least partially automate the system. The files described below, then, will be organized by agency, by case manager, by client.

The presentation also assumes that all agencies will forward data collection forms to a Central Records Unit for processing. The Central Records Unit will establish the necessary

records and files. If properly maintained, the data in these files will be ready for the processing of the appropriate outputs (reports, etc.). The following files should be maintained by the Central Record Unit:

PROBLEM/GOAL/SERVICE HISTORY FILE:

This file contains a Problem List/Goal Data Sheet and a Client Service History Sheet on each open case. A record is created in this file when the initial Service Planning Form (YSIS-2) is filed along with the Application for Services Form (YSIS-1) opening the case. This file is used to maintain all case action, goal, problem and service data in summary form. Organized by agency/case manager/client.

CLIENT FOLLOW-UP FILE:

This file contains the Problem List/Goal Data Sheet on all closed cases for which follow-through contacts are planned.

CLIENT MASTER ID RECORD FILE:

This file contains an identification card on every client for whom a case has been opened in a particular agency. Each time the agency reopens the case, it is posted to this card. Organized by agency, by client last name.

CLIENT FILE:

This file contains the client's folder which includes a copy of all data collection forms (source documents) generated by the case. It contains the folders of open cases only. Organized by agency/client.

CLOSED CASE FILE:

This file contains the folders of all clients whose

cases have been closed. In addition to data collection forms the client's folder when in this file contains the Client Service History Sheet and (after the follow-through period) the Goal Data/Problem List Sheet. It is organized by agency/client/case opening date.

90 DAY CONTACT FILE:

This file contains Service Application Forms (YSIS-1) for all contacts which did not result in a case opening. Organized by agency/month/date of contact. Forms are destroyed after being on file over 90 days.

MONTHLY REPORT FILE:

This is a temporary work file to maintain report work sheets while they are being posted during the month. At the beginning of each month, each report to be generated at the end of, or during, the month has a blank report tally form placed in this file. As client forms are processed, the appropriate report worksheet is pulled from this file and posted with information from the forms. At the end of the reporting period, the work sheets are pulled, totaled, and a final report form typed. A new set of work sheets for the file is then prepared for the next month. The file is organized by agency/report type. The prior month's work sheets are maintained for 30 days and then discarded.

MONTHLY SOCIAL SERVICE INVOICE FILE:

This file is similar to the Monthly Report File in use but contains the work sheets for only Report No. 9, Social Service Invoice. The reports in this file are organized by agency/third party payee. The file could also be organized by case manager (within agency).

In addition to the above files, the central records unit should consider maintaining various files which contain historical master copies of all reports generated. Related information to be maintained would be a master data dictionary of all data elements used in the system as well as a Problem/Service dictionary of all problems and service codes used in the model system.

INTRODUCTION

Data are entered and maintained in the YSIS files by means of the data collection forms described in Part A. Reports generated by the system are also presented in Part A. The reader will find this section more understandable if Part A is reviewed once again.

This section describes the data processing steps necessary to enter and maintain data in the files. This processing takes place through the daily performance of the following six steps by the central records unit.

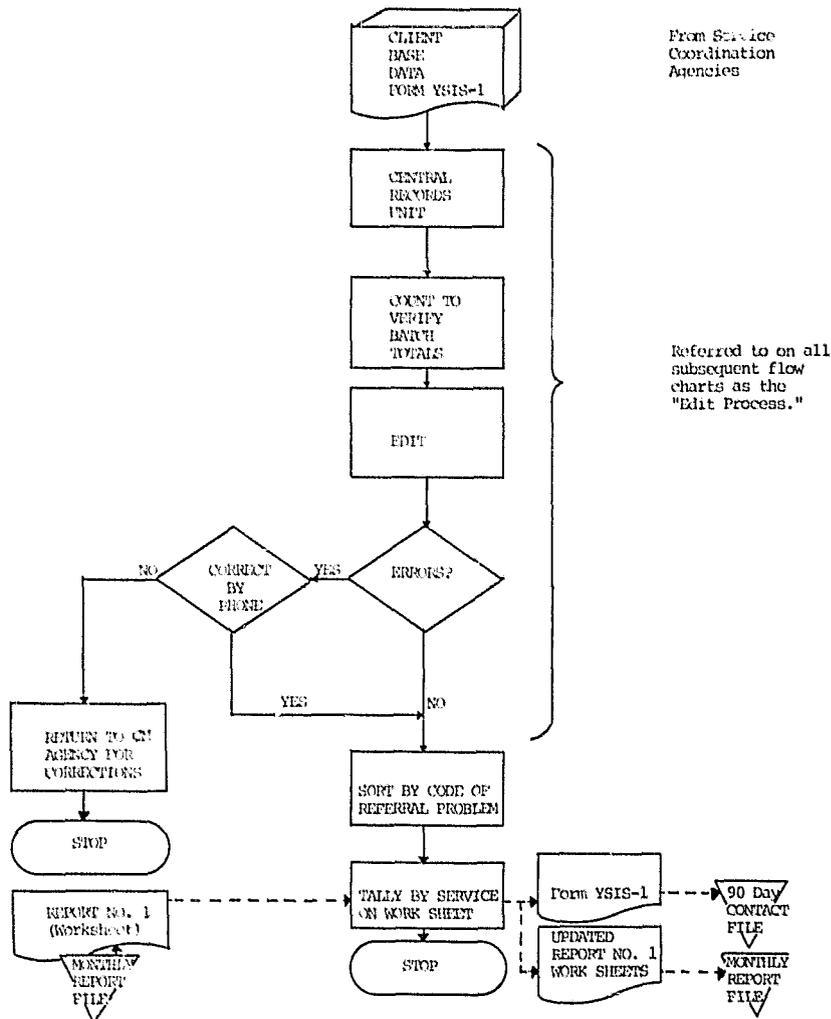
- Step 1--Processing Reports of Contacts Only (YSIS-1)
- Step 2--Processing of Case Openings (YSIS-1 & YSIS-2)
- Step 3--Processing of Service Order Documents (YSIS-3)
- Step 4--Processing of Service Delivery Forms (YSIS-4)
- Step 5--Processing Problem List/Goal Data/Follow-Through Changes
- Step 6--Processing Case Closings

Each of these steps is elaborated in the following narrative which is accompanied by a flow chart for each step. Flow charts are grouped together at the end of this section, section C-3.

DATA PROCESSING STEPS

STEP 1--PROCESSING REPORTS OF CONTACTS ONLY:

Step 1
PROCESSING REPORTS OF CONTACTS ONLY



From Service Coordination Agencies

Referred to on all subsequent flow charts as the "Edit Process."

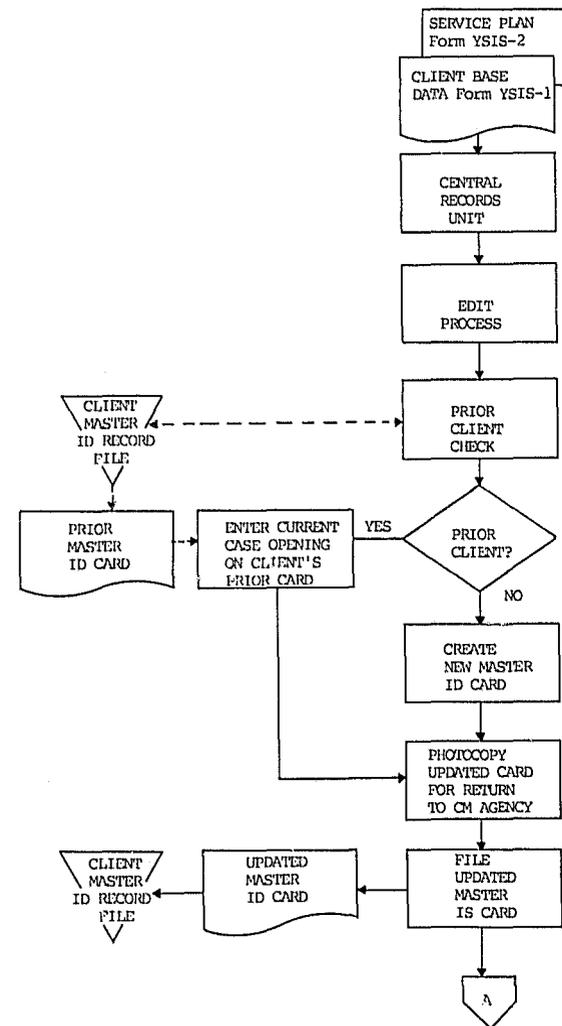
- A batch of Application for Service forms are received from a case management agency by the central records unit. These forms report on agency client contacts which did not result in a case opening.
- The central records unit will count the forms and ensure that they correspond with the total written on the transmittal slip forwarded with the forms. The forms will then be edited.
- If errors are found, an attempt will be made to correct them by phone. If this is not possible, the forms in question will be returned to the case management agency and the transmittal slip will be marked accordingly and filed.
- Forms which are error free, and forms corrected by telephone, will be sorted by "REFERRAL PROBLEM" which is indicated in Item 44 of the Client Base Data form.
- A blank Report No. 1 (Analysis of Contacts and Openings by Referral Problem) is then used as a worksheet and each contact report is used to tally the data requested on this sheet. The forms are then filed in the 90 Day Contact File (and after 90 days they will be discarded). The updated Report No. 1 worksheet will be filed in the Monthly Report File until the next batch of reports will arrive at which time it will be updated.
- This completes the Step 1 processing.

STEP 2--PROCESSING OF CASE OPENINGS

- For each case opened, the case management agency sends a Client Base Data Form and a Service Planning Form to the Central Records Unit. The standard edit process is then completed.

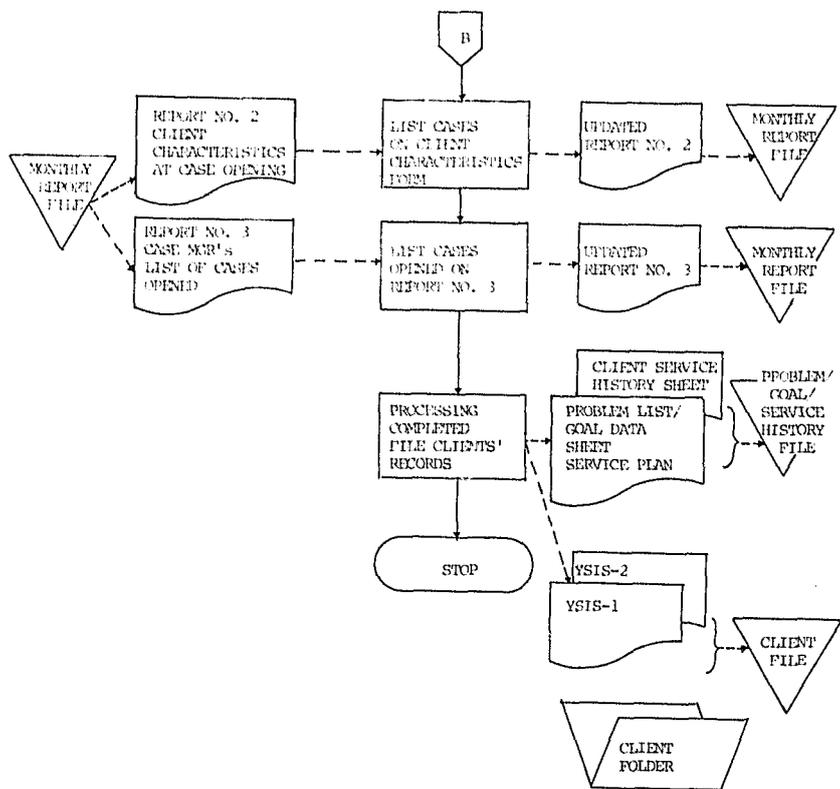
- Forms which pass edit are then checked against the Client Master ID Record File. If the client on the report appears in the ID Record File as a prior client of the agency, the current case opening is added to the client's prior Master ID Card to maintain a running record of his/her contacts with the agency.
- If not a prior client, a new Master ID card is created for the client. A photocopy of the card is made for return to the case management agency and the new or updated Master ID Card is filed in the Client Master ID Record File.
- A case folder is then prepared for the client. A Problem List/Goal Data Sheet (ledger card) is created for the client entering appropriate problem, goal, and eligibility data from the Service Planning Form (YSIS-2).
- Services planned are then entered on the Client Service History Sheet (ledger card).
- Photocopies of the Problem List/Goal Data Sheet and the Client Service History Sheet are made and--along with the photocopy of the Master ID Card made earlier for clients with reopened cases--are sent to the case management agency. The Problem List/Goal Data Sheet is later used by the case management to update the main sheet maintained by the central records unit.
- The client folders are then sorted by case management agency, by case manager. For each case manager the folders are then sorted by "Referral Problem" as indicated in Item 44 on each client's Client Base Data Form (YSIS-1).
- A Report No. 1 (Analysis of Contacts and Openings by Referral Problem) worksheet for cases "opened" is then taken from the Monthly Report File and for each case a tally is made on the worksheet on the appropriate

Step 2
PROCESSING OF CASE OPENINGS

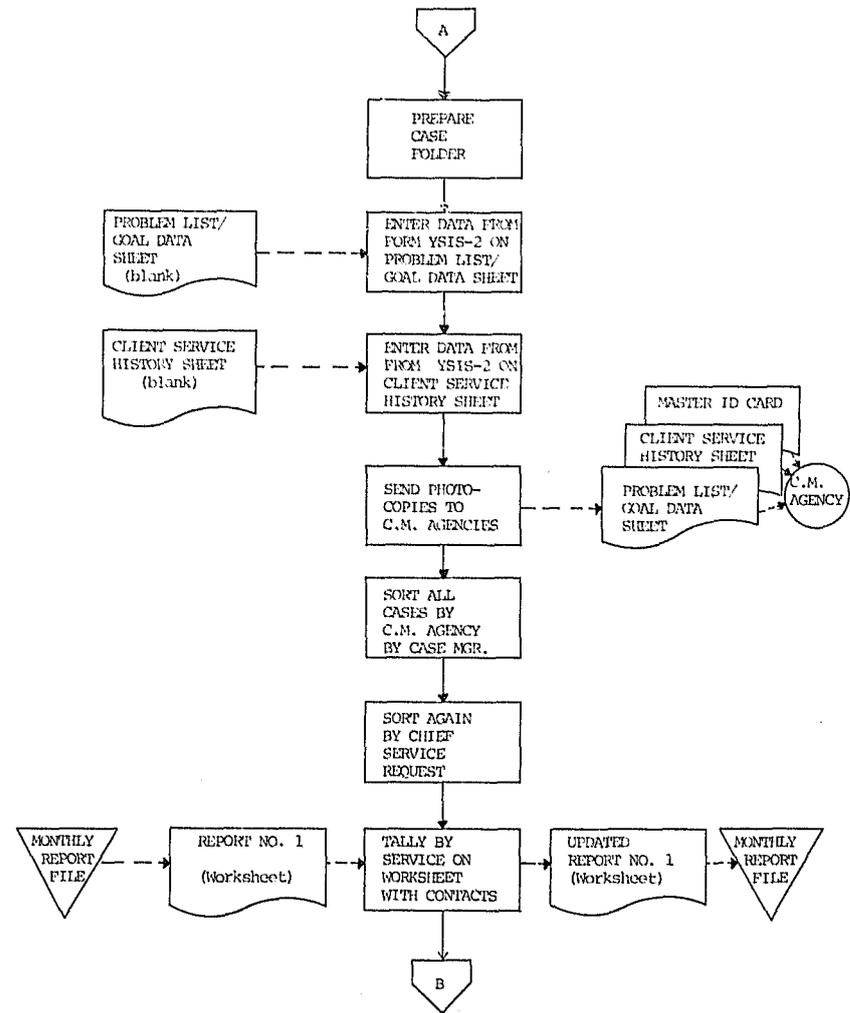


From Case Management Agencies

PROCESSING OF CASE OPENINGS
(Continued)



PROCESSING OF CASE OPENINGS
(Continued)



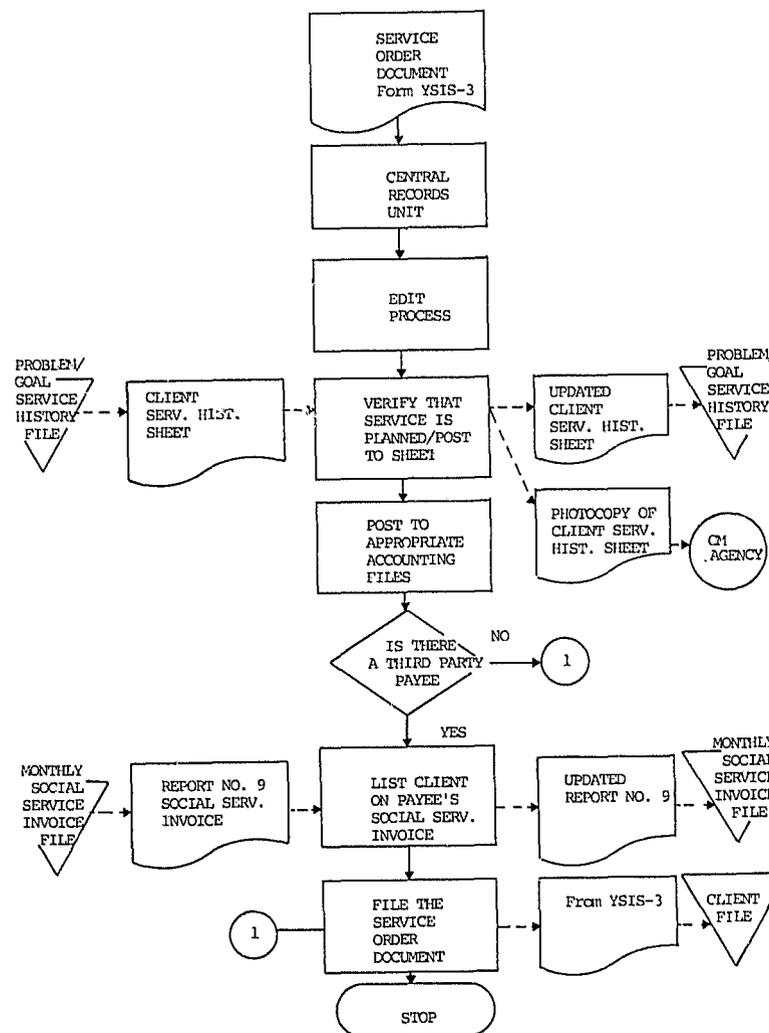
service request type line. The worksheet is returned to the Monthly Report File.

- A Report No. 2 (Client Characteristics at Case Opening) worksheet is taken from the Monthly Report File and each case is listed on it and an 'X' is placed in each characteristics column which corresponds to the characteristics of the client as reported on the Client Base Data Form. After all cases have been listed, the updated worksheet is returned to the Monthly Report File until the next batch of case openings is processed.

- A Report No. 3 (Case Manager's List of Cases Opened) worksheet is taken from the Monthly Report File. Again, with all cases sorted according to agency and case manager, each case is listed on the worksheet, along with some specific information about the case: Date Opened, Referral Problem, Goal Area and the source from which the client was referred. All this information is taken from the Client Base Data Form. After listing all cases in the batch, the worksheet is returned to the Monthly Report File.

- This completes the processing of case openings. The client's records are then filed. The Client Service History Sheet and Problem List/Goal Data Sheet (on ledger card stock) are filed in the Problem/Goal/Service History File (by agency, by case manager, by client). The Client Base Data Form (YSIS-1) and the Service Planning Form (YSIS-2) are placed in the client's folder and filed in the Client File (by agency, by case manager, by client).

Step 3
PROCESSING SERVICE ORDER DOCUMENTS



STEP 3--PROCESSING SERVICE ORDER DOCUMENTS:

- A batch of Service Order Documents (YSIS-3) is received from a case manager by the Central Records Unit. The

standard edit process is then completed.

- The client's Client Service History Sheet is pulled from the Problem/Goal/Service History File. A verification is made that the service ordered has been planned (on the Service Plan) and that the units ordered are the same as those planned. The service order (along with dates and vendor identification) is then posted to the sheet. The sheet is returned to the File. A photocopy of the updated sheet is sent to the case manager. This step continues until all Service Order Documents in the batch are posted.
- If the users of the system have the central record unit performing some accounting functions, a posting would be made to appropriate accounting files. (The model system does not include accounting systems, although the forms are designed so that they can interface with an accounting system.)
- If there are third party payees, sort by payee and pull the Report No. 9 worksheet for each payee from the Monthly Social Service Invoice File and list client and service types and units to be provided on the respective worksheets. Return the updated worksheets to the File.
- File the Service Order Documents in the client folders in the Client File.
- This completes Step 3 processing.

STEP 4--PROCESSING SERVICE DELIVERY FORMS:

- A batch of Service Delivery Forms (YSIS-4) is received from a case manager by the central records unit. The standard edit is then completed.
- The client's Client Service History Sheet is pulled

from the Problem/Goal/Service History File. A verification is made that the service has been ordered and that the accounting and units data on the Report are in accordance with the initiating Service Order Document.* The service delivery information is then posted to the History Sheet (ledger card). The updated sheet is then returned to the File. A photocopy of the updated History Sheet is sent to the case manager. This processing continues until all of the Service Delivery Forms are posted and photocopied.

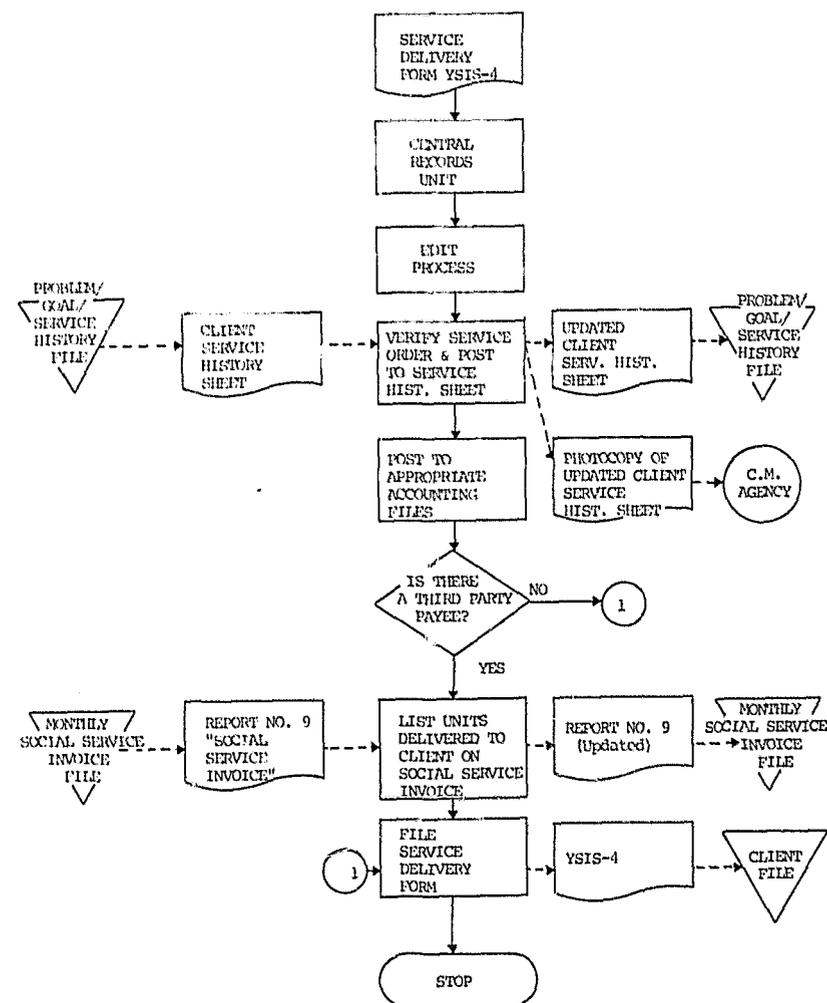
- If the Service Delivery Report does not indicate a third party payee, it will be filed and the processing will stop.
- If the Service Delivery Report indicates a third party payee, pull the Report No. 9 worksheet for each payee from the Monthly Social Service Invoice File and list client and service units delivered during the reporting period according to the service order entries previously entered on the sheet. Return the updated worksheet(s) to the File.
- File the Service Delivery Reports in the client folders in the Client File.
- This completes Step 4 processing.

*This information will have been previously entered on the Client Service History Sheet. It is up to the case management agency to reconcile the Service Delivery Report with the Service Order Document and to certify that services have been duly delivered prior to submitting the form to the central records unit. Of course, an agency using its own central records unit may wish to integrate an accounting procedure into this processing step.

STEP 5--PROCESSING PROBLEM LIST/GOAL DATA/FOLLOW-THROUGH CHANGES

- As changes are made in client's problems, goals, or eligibility redetermination dates or as follow-through contacts are made after case closing, the case manager will forward updated Problem List/Goal Data Sheets to the central records unit. When received the sheets will go through the standard edit process.
- The sheets will be sorted by agency, by case manager.
- If a follow-through contact is being reported, the follow-through data will be posted to the sheet. If further contacts are planned, the sheet will be returned to the Client Follow-Up File. If further contacts are not planned, a photocopy will be made of the updated sheet. The sheet will then be filed in the client folder in the Closed Case File. The photocopy of the sheet will be sent to the case manager.
- The processing under Step 5 is completed.
- If the report is not one of follow-through but rather one reporting a change in problems (e.g., a new problem, a change in problem resolution status, etc.) or in goal data, then the problem or goal data changes will be posted to the Problem List/Goal Data Sheet which is pulled from the Problem/Goal/Service History File. The updated sheet is then returned to this File and a photocopy sent to the case manager.
- The processing under Step 5 is completed.

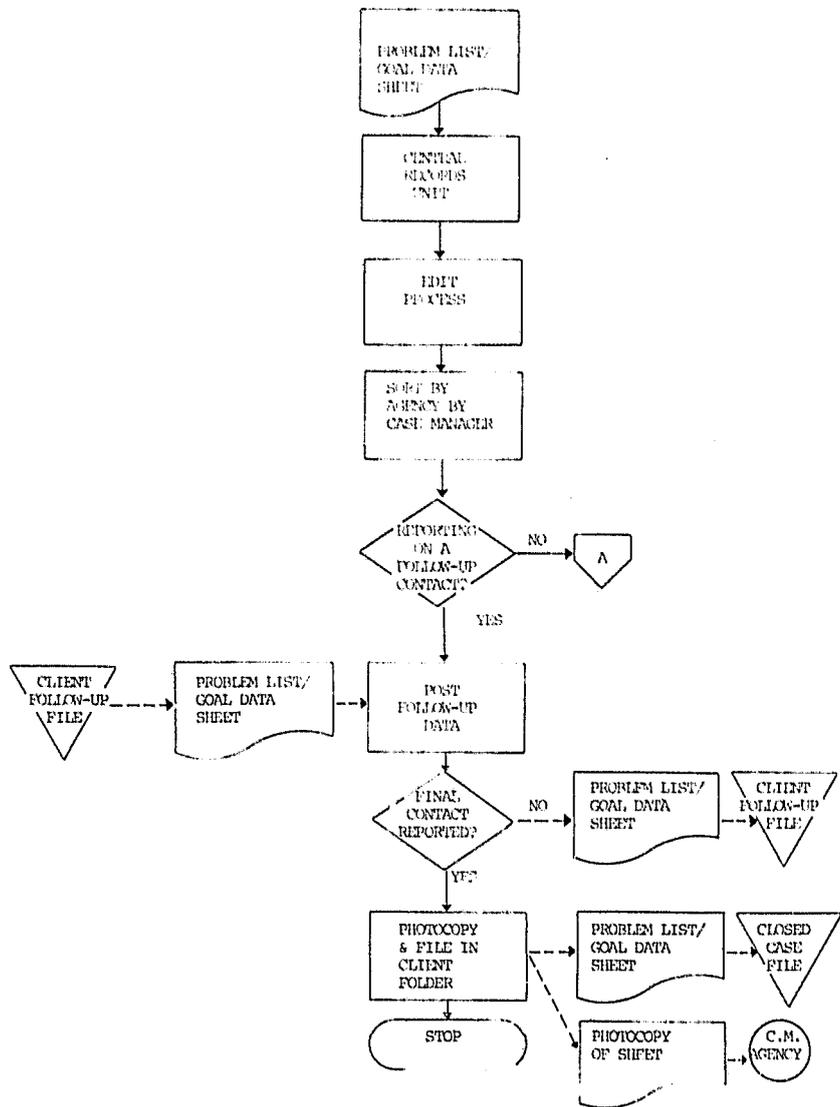
Step 4
PROCESSING SERVICE DELIVERY FORMS



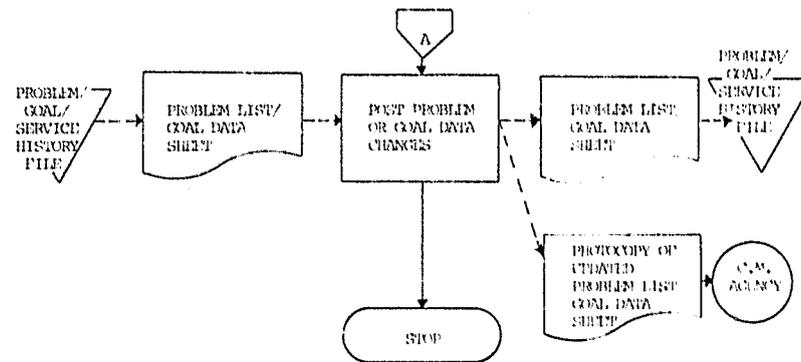
STEP 6--PROCESSING CASE CLOSINGS

- As each case is closed, the case management agency sends the following information to the central records unit:

PROCESSING PROBLEM LIST/GOAL DATA/FOLLOW-THROUGH CHANGES



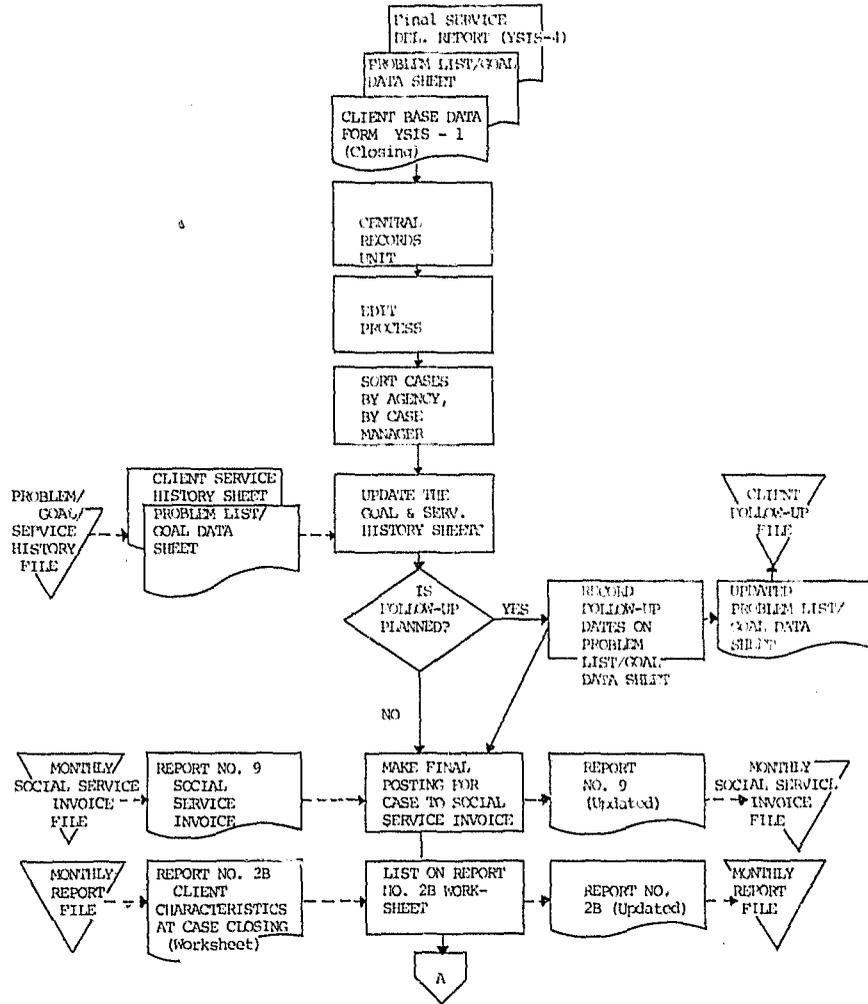
PROCESSING PROBLEM LIST/GOAL DATA/FOLLOW-THROUGH CHANGES
(Continued)



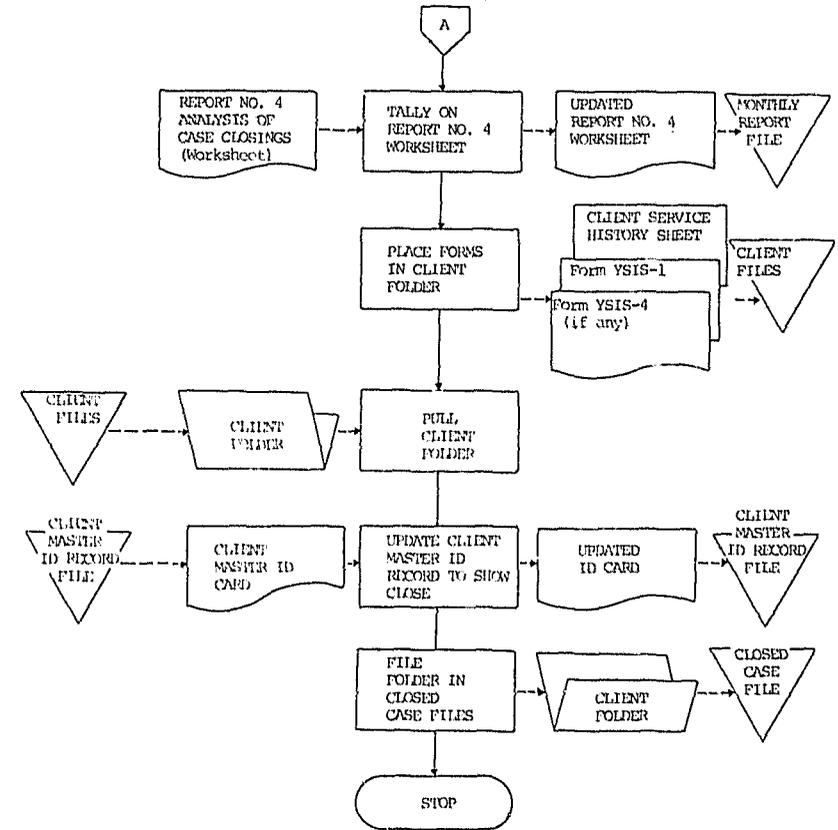
- (1) an updated Client Base Data Form (YSIS-1) showing the case closed, the reason for closing, date closed, etc; (2) an updated Problem List/Goal Data Sheet showing the final status of each problem on the Problem List, goal attainment data, and the dates of any follow-through contacts planned; (3) any Service Delivery Reports (YSIS-4) necessary to close out existing services the client is receiving.
- The closing forms set is placed in the appropriate client folder in the Client File.
- The Client Folder is then pulled.
- The Client Master ID Card is pulled and updated with the closing information and returned to the Client Master ID Record File.
- The Client Folder is then filed in the Closed Case File.
- This completes the processing of Step 6.
- The standard edit process is performed on each set received.
- The Client Service History Sheet and Problem List/Goal Data Sheet are pulled from the Problem/Goal Service History File. Each of the sheets are updated accordingly.
- If a follow-through contact is planned, the dates are recorded on the Problem List/Goal Data Sheet which is then filed in the Client Follow-Up File by the date on which the first follow-through contact is planned.
- Processing continues with the posting of any final service delivery data to a Report No. 9 worksheet for third party payee clients. The Report No. 9 worksheets are pulled from the Monthly Social Service Invoice File, posted, and returned to the File.
- The Report No. 2B worksheets are pulled from the Monthly Report File and posted with data from the Client Base Data Form with each client listed along with the requested characteristics. Report No. 2B is then returned to the File.
- The Report No. 4 worksheets are pulled from the Monthly Report File and each client is listed along with the reason for closing. The updated worksheets are returned to the Monthly Report File.

Step 6

PROCESSING CASE CLOSINGS



PROCESSING CASE CLOSINGS
(Continued)



SECTION C-4: REPORT GENERATION

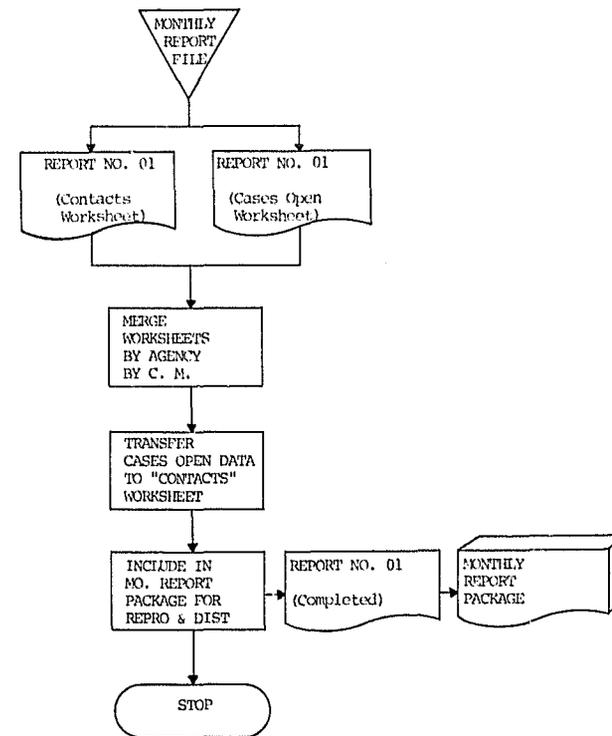
Reports are generated by the YSIS on a periodic basis from data maintained in the system files. An illustrative set of reports which can be generated by the system are presented in Part A. This section describes the data processing necessary to produce those reports.

A specific processing procedure is used to generate each report. The processing logic shown in the flow charts at the end of this section is one way of generating the required reports. A number of other approaches may be possible and the potential user is cautioned to analyze the most efficient processing approaches to meet local reporting requirements.

The processing consists essentially of periodically posting report worksheets and, at the end of the desired reporting period for the desired report, totaling the data on the worksheets to arrive at final figures and typing final report copies. The final copies are then packaged, reproduced, and distributed to the participating case management agencies.

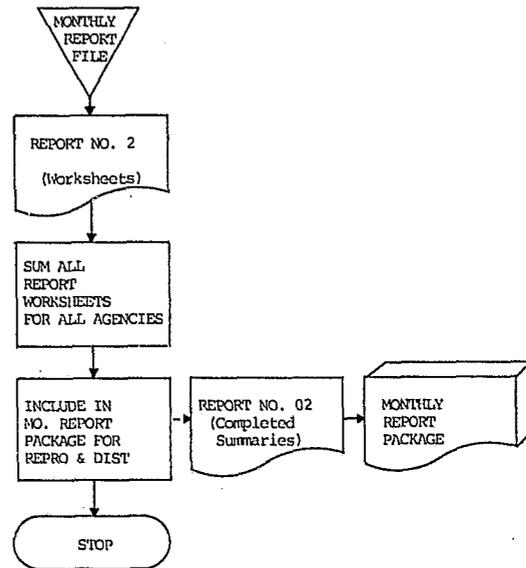
The "tracking reports," Reports Nos. 06 ("Cases Requiring Review") and 07 ("Unplanned, Unscheduled or Overdue Services") are prepared on a weekly cycle by a review of each Problem List/Goal Data Sheet and Client Service History Sheet in the Problem/Goal/Service History File and the Client Follow-Up File. Exceptions in case flow and service delivery are noted in this review and each case with an exception is listed on the report forms and the relevant exceptions noted. The completed reports are then merged by agency, by case manager, reproduced and distributed to them.

REPORT PROCESSING
Report No. 01--Analysis of Contacts & Openings
By Referral Problem



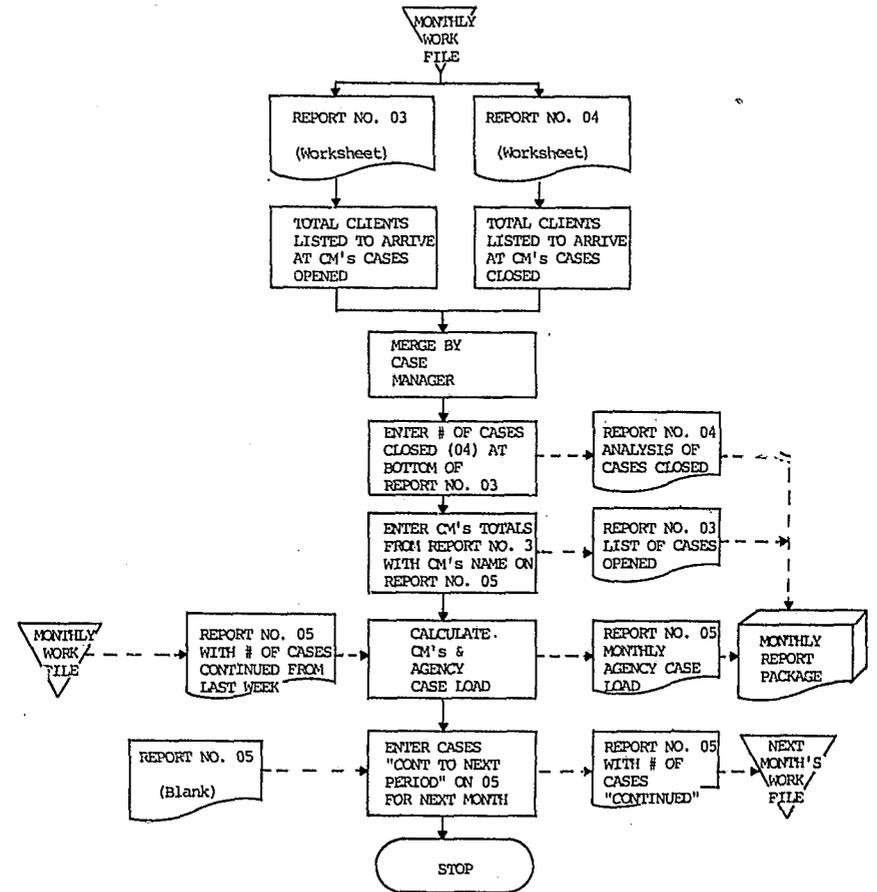
REPORT PROCESSING

Report No. 02-A--Client Characteristics at Case Opening
 Report No. 02-B--Client Characteristics at Case Closing

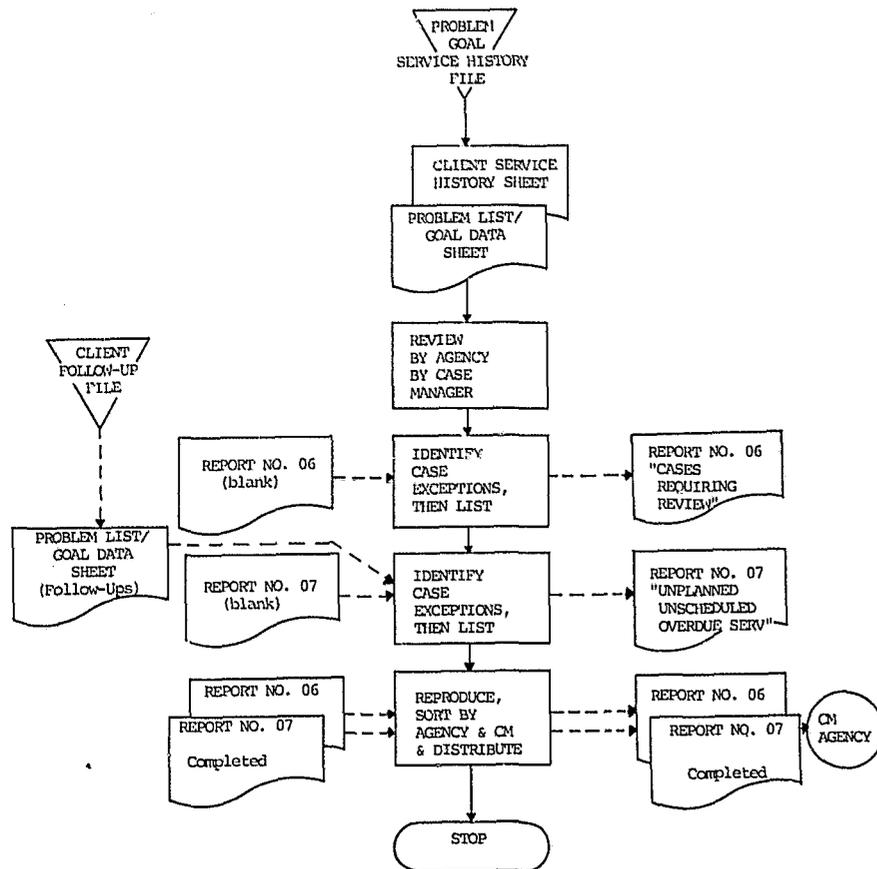


REPORT PROCESSING

Report No.03--CASE MANAGER'S LIST OF CASES OPENED
 Report No.04--ANALYSIS OF CASES CLOSED
 Report No.05--AGENCY CASE LOAD REPORT



REPORT PROCESSING
 Report No. 06--Cases Requiring Review
 Report No. 07--Unplanned, Unscheduled or Overdue Services



GENERAL INSTRUCTIONS FOR PREPARATION OF REPORTS NOS. 06 AND 07.

At the end of each week, by agency/by case manager pull each client's Problem List/Goal Data Sheet and Client Service History Sheet (which are filed together) from the Problem/Goal/Service History File.

Analyze by case manager to note any exceptions which should be reported to the agency/case manager. Exceptions on the Problem List/Goal Data Sheet should be reported on Report No. 06. Exceptions on the Client Service History Sheet should be reported on Report No. 07.

1. REPORT NO. 06: Review the Problem List/Goal Data Sheet.

- a. Has the goal date occurred during the week ending without being extended or closed? **YES**. Since the sheet is still in the File, this means the case is still open. The service should either extend the goal achievement date (and change the goal if necessary) or close the case.

ACTION: List the case on Report No. 06 worksheet and put an 'X' in Column 1, 'GOAL DATE OVERRUN'. Now go to Step c, below.

NO. Go to Step b, below.

- b. Will the goal date arrive during the next 10 days?

NO. Go to Step c. **YES.** Remind the case manager.

ACTION: List case on Report No.06 worksheet and place an 'X' in Column 2, 'GOAL DATE ARRIVES (10 Days)'. Also review the Problem List. If any problems have a resolution status code of 'I', place an 'X' in Column 3, 'PROBLEMS UNRESOLVED'.

- c. Review the Client Service History Sheet. If all services planned have been completed--as indicated by the code in the 'STATUS' field--and the last completion date ('DATE COMP') is 10 days less than the current date, and the goal date will not arrive in the next 10 days, the case manager should be alerted that the service plan has been completed and that the case should be reviewed.
ACTION: List the case on Report No. 06 worksheet and put an 'X' in Column 5, 'ALL SERVICES RENDERED'. Also review the Problem List and if any problem has a status of 'I', also place an 'X' in Column 3, 'PROBLEMS UNRESOLVED'. Set aside Report No. 06 and prepare Report No.07.

2. REPORT NO.07: Review the Client Service History Record.

- a. Does each problem with a STATUS of 'I' on the Problem List/Goal Data Sheet have at least one service planned for it on the Client Service History Sheet? YES. Go to Step b. NO. List the case on the Report No.07 worksheet for the agency/case manager. Also enter data in the following fields: 'CASE OPEN DATE', 'PROB CODE', and 'DAYS OVERDUE'. Compute days overdue by subtracting the date opened from the current date. Go to Step b.
- b. Has each service planned been ordered, i.e., is there an appointment date in the 'DATE APT' field and a service provider indicated? YES. Go to Step c. NO. If the 'DATE PLANNED' is 10 days past

the current date, a Service Order Document (YSIS-3) is overdue. Notify the Case Manager to order the service.

ACTION: List case on Report No.07 worksheet. Also enter data in the following fields: the three fields mentioned in Step a, plus 'SERVICE CODE', 'DATE SERVICE PLANNED'. Compute days overdue by subtracting the 'DATE SERVICE PLANNED' from the current date, minus 10 days. Go to Step c.

- c. Does each service for which a DATE APT has been entered have a confirmed date in the 'DATE CONF' column (if the current date is 2 days greater than the appointment date)? YES. Go to Step d. NO. List the case on Report No.07 worksheet. Also enter data in the following fields: the fields mentioned in Steps a and b, plus 'DATE APT'. Compute days overdue by subtracting the appointment date from the current date, minus 2 days. (NOTE: If the appointment has been confirmed, the client will be either accepted for service or rejected by the provider. If accepted, code '2A' ("Service Active") should appear in the status column. If rejected, there should be a date in the 'DATE COMP' column and an appropriate code in the 'STATUS' column. Go to Step d.
- d. If the service has been confirmed and the current date is thirty days greater than the confirmation date and no units have been delivered (and the STATUS column indicates the service is active), the case should be listed to remind the worker to check on implementation.
ACTION: List the case and all data specified in Steps a, b, and c. Go to Step e.
- e. If the service units delivered ('UNITS DEL') are equal to the units requested ('UNITS REQ') and there is no final STATUS code, list the case and all data specified in Steps a, b, and c. No

service should have the units delivered exceed the units planned. In the days overdue column, enter '999'. This indicates that the exception is related only to units and not to days overdue. Go to Step f.

- f. If the current date is 180 days greater than the 'DATE PLANNED' and the service is still in an active STATUS, it should be listed. No service should be planned for longer than six months. This is a signal to the agency to terminate the service. If the service is still required it should be requested again. In the days overdue column, enter '180' which will indicate the 180 day rule has been exceeded.

Return all of the sheets to the Problem/Goal/Service History File. Then pull the Problem List/Goal Data Sheets (for closed cases) from the CLIENT FOLLOW-UP file.

3. REPORT NO.07: Complete this report. Review the Problem List/Goal Data Sheet of cases closed and placed in Follow-Through status. These cases may require listing on the report.

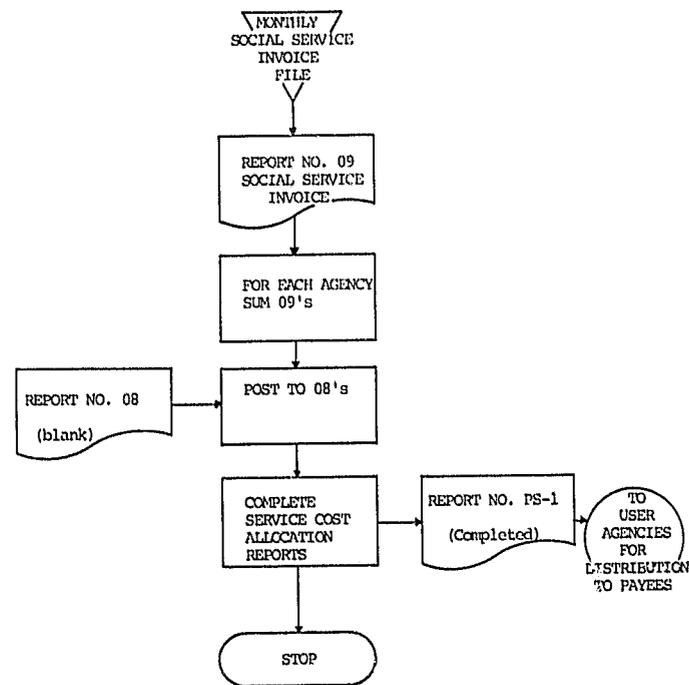
- a. If the 'DATE DUE' for follow-through will occur in the forthcoming week, list the case and place an 'X' in Column 6.
- b. If no record appears of contact due during the week, list the case and place an 'X' in Column 7.

Return the cases with follow-through contacts still due to the CLIENT FOLLOW-UP File. The cases with all follow-through contacts completed should be filed in the Client Folders in the CLOSED CASE File.

The Reports Nos.07 and 08 should then be typed in final form, reproduced, sorted by agency and case manager, and distributed.

REPORT PROCESSING

Report No. 08--Service Cost Allocation Report (Mo. PS-1)
Report No. 09--Social Service Invoice (Mo. PS-12)





END