

CASE RESOLUTION PROTOCOL

PURPOSE OF THE PROTOCOL

To document the purpose and process of holding Case Resolution within the Brant community.

BACKGROUND:

Case Resolution is a process established by MCSS/MCYS under the Making Services Work for People framework to ensure that individuals with urgent and/or multiple complex needs are identified, and that appropriate service options are developed. Where the existing services and service system are not able to meet the needs of the individual, that person must be referred to the local Case Resolution mechanism.

Individuals reviewed through Case Resolution may have services provided within existing resources through one or more agencies. Services may be available immediately or individuals can be placed on a wait list. However, there are situations where the service community determines that a person is at an unacceptable level of risk of harm to self and/or others. Decisions to provide resources beyond the agencies' base allocations, for individuals with urgent and complex needs, would be a risk management strategy and funds would be expensed within the fiscal year.

GUIDING PRINCIPLES:

- The Case Resolution process serves individuals and/or their families with extraordinary needs, where services are needed on an urgent basis and the individuals and/or their families are having difficulties gaining access to services
- The Case Resolution Process assists individuals and families to access supports from a variety of agencies in an integrated and coordinated manner
- The service system will re-assess individuals' needs for services as their needs change
- The Case Resolution process will occur quickly and easily when individuals and families have complex, unusual or high levels of need
- A core group of senior level managers and informed citizens will make up the Case Resolution Team, who will be oriented by Contact Brant.
- Where the Case Resolution process deems a request for specialized supports is needed due to the complexity of service needs that are beyond the capacity of the service system and family and immediate measures are needed to decrease the risk, the Case Resolution process will follow the MCSS/MCYS Decision-making Guidelines (See Appendix 1).

PREREQUISITE FOR CASE RESOLUTION CONFERENCING

1. Contact Brant has the responsibility to implement the Case Resolution process to address the needs of individuals and families requiring access to MCSS/MCYS funded Adult Developmental Services or Children's Mental Health or Developmental Services in response to any one or more of the following:

- Situations that are urgent, complex or critical requiring multi-disciplinary responses or immediate intervention from the service system
 - Situations where there is no immediate suitable and appropriate service
 - Situations where there are significant supervision needs due to complex health needs, multiple diagnosis, critical mental health issues and these needs exceed the capacity of any one organization
 - Situations where all other community processes have been exhausted and the barriers to provision of service include resources implications, lack of access to expertise and/or mandate restrictions.
2. Prior to implementing Case Resolution, community resources should have been exhausted, including at least one case conference involving appropriate cross-sectoral representatives who have decision making authority.

THE CASE RESOLUTION MEETING

For each Case Resolution meeting, the Case Manager and Contact Brant staff, in consultation with the individual/family, will determine the composition for the Case Resolution meeting:

- Individual and family members
- Advocates or support people identified by the individual or family (optional)
- Other involved service providers (optional)
- Other individuals identified by Contact Brant or Case Manager who would improve the problem solving capacity of the team (optional).

The Case Resolution meeting will also include:

- Case Manager
- Contact Brant Resource Coordinator
- Contact Brant (Chair)
- Members of the Case Resolution Team

PROTOCOLS WITH SERVICE PROVIDERS

Service Providers agree to share the following commitments and responsibilities for the Case Resolution process either as a Case Resolution Team member or participant of the Case Resolution meeting:

- Commitment to the values and principles guiding the process
- Appoint a senior representative annually from their agency as a Case Resolution Team member, with appropriate experience, knowledge and decision-making authority.
- Attendance and active participation in meetings.
- Prioritization of the Case Resolution meetings.
- Preparation in advance of the meeting in conjunction with identification of potential opportunities to respond.
- Response(s) to the required implementation steps outlined in the plan of action according to the required time frames.
- Maintenance of confidentiality throughout the Case Resolution process.

THE CASE RESOLUTION PROCESS

Prior to Case Resolution

1. Requests for a Case Resolution Meeting must be made to Contact Brant by the Case Manager. The goal of the Case Resolution must be clear.
2. Contact Brant and the Case Manager requesting Case Resolution will agree upon a date and time for the meeting, which must be held within 5 working days of the request, unless the Case Manager and Contact Brant staff believe that a longer time frame will increase participation and will not adversely affect the individual and family.
3. Contact Brant staff will notify the Case Resolution Team of the meeting date and time, and provide a summary of the situation by email. The Case Manager will identify other participants to be invited to the meeting, including the individual/family. Contact Brant or the Case Manager will invite these people and follow up to confirm attendance.
4. Contact Brant in conjunction with the Case Manager will develop the Case Resolution Package for review by the Case Resolution Team on the day of the meeting. The Case Manager should refer to Contact Brant for Case Resolution Forms to assist with these preparations for Case Resolution. The package will include:
 - Consents
 - Most recent Case Conference minutes (1 - 2)
 - Case Manager's Summary
 - Relevant professional assessments
5. The Case Manager must provide the package of information to Contact Brant for photocopying of packages at least 24 hours before the Case Resolution meeting. Contact Brant will review the package with the Case Manager prior to copying to ensure only current and relevant information is included.

Case Information Review

The Case Resolution Team will have the opportunity to review the individual's Case Resolution information package a half hour prior to the Case Resolution meeting. The Case Manager and Contact Brant Resource Coordinator will review the information package with the individual/family prior to the meeting.

The Meeting

Contact Brant staff person will chair the meeting and is a member of the Case Resolution Team.

The Case Resolution Team and other participants will meet to discuss the individual plan that needs to be addressed. Once the individual's plan is agreed upon, the Team will meet to discuss how the plan will be met, identifying resources that will be utilized.

Finalizing the Plan

- a) The Team will continue meeting until a resource/action plan is agreed upon. Contact Brant will ensure the individual/family and Case Manager are informed of the action plan.
- b) The Case Manager should schedule follow up meetings including: Case Conferences, meetings with the individual/ family to monitor progress of the plan, etc., and will report back on progress of the plan to the Chair of Case Resolution.

- c) Contact Brant will document the Case Resolution plan in a Case Resolution Meeting Report that will be distributed to the individual/ family, Case Manager, the Team members present, any other individual/ agency who has responsibilities outlined in the plan. As well, the appropriate MCSS/MCYS Program Supervisor will be provided with the Report to identify the community pressures, including funding.

Documentation

The Ministry Decision-Making Guidelines outline that Case Resolution Report must document:

- The immediate health and safety risk
- The reasons why it is unable to resolve the situation
- The plan to address the child/individual's needs including how the immediate risk will be reduced
- Information from the community processes to address the needs of the child/individual and family and their "most in need" status
- The specific supports requested, the cost and the transfer payment agency that will provide the supports
- Evidence that the family has been given an opportunity to provide additional information that may inform the plan prior to submitting it to the Regional Office

DECISION MAKING PROCESS

The final decisions, as related to the development of the Case Resolution action plan, rest with the Case Resolution Team. The Chair will negotiate agreement by consensus.

DECISION MAKING AROUND SPECIALIZED SUPPORTS

The Ministry's Decision Making Guidelines pertain to children's services; however, for the purposes of this Protocol, all Case Resolution decisions will follow the Guidelines. The Guidelines outline that Case Resolution may consider specialized support for an individual when the complexity of the service needs for the individual are beyond the capacity of the service system and family to address. The process of decision-making for specialized supports does not replace existing mechanisms for identifying "most in need". It is intended to deal with those individuals who are identified by a Case Resolution mechanism as "most in need". The term "most in need" is not intended to be comparative but rather to identify the most needy situations that the service sector encounters.

The Ministry expects the following decision-making guidelines to be included when Case Resolution is considering specialized supports:

- The urgency of need for measures to reduce the risk to the immediate health and safety of the individual
- The support needs for the individual with Complex needs and the family
- The availability of Ministry-funded supports in the community
- The availability of other formal and informal supports to the individual and family
- The availability of funds

DECISION MAKING AROUND FUNDING

If available, funding through the Developmental Services' Transformation At-Risk Fund (for adults) or the Children's Services Complex/Multiple Needs Fund (for youth under age 18) may be committed by the Case Resolution Team. A Case Resolution report, including

system recommendations and a report of the Funds, will be included in the monthly Systems Report provided to both the Children's Services Committee and the Developmental Services Committee, for the purposes of system planning.

The Children's Services Committee and the Developmental Services Committee will monitor the utilization of MCSS/MCYS "at-risk" funding. Through identifying community gaps in services within their sectors, these committees may additionally develop an annual plan for the use of funding and will manage any over-commitments.

DISPUTE RESOLUTION

The Resource Coordinator will notify the individual/family at the Case Resolution meeting that they will be called in a few days to provide feedback on their satisfaction with the Case Resolution outcome. If an individual/family is not satisfied with the outcome, further Case Resolution meetings will need to be called.

All service providers involved in Case Resolution can formally lodge any dispute with the final action plan in writing to the Executive Director of Contact Brant within 5 working days of the Case Resolution meeting.

Contact Brant will arrange a meeting with the Case Resolution Team, the disputing party and a representative from the MCSS/MCYS Area Office to review the dispute. Minutes will be taken at this meeting and forwarded to all present. At a minimum they will include:

- The names of all parties present at the meeting
- Nature of the Dispute
- Response to the Dispute
- Resolution and next steps
- Non-Resolution and explanation for lack of consensus

EVALUATION FRAMEWORK

Contact Brant will complete two phone surveys, with consent, for each individual/family involved in Case Resolution. The two surveys address different levels of assessment. The first survey reviews the individual and/or family's experience of the Case Resolution meeting. The second survey addresses the "follow through" by the community of the plan of action developed in the Case Resolution meeting. The first survey will be completed within one week of the Case Resolution meeting and the second in approximately 4 months.

At a minimum, the Case Resolution Team will evaluate the Protocol annually and make any recommendations for changes to the Children's Services and Developmental Services Committees. Contact Brant will schedule a meeting of the Case Resolution Team for a review when requested at any time by a member of the Team.

Contact Brant will develop an annual Case Resolution Report for the Children's Services Committee, the Developmental Services Committee, MCSS/MCYS and the Case Resolution Team to include:

- volume of meetings differentiating children's vs. developmental services
- summary of situations brought to Case Resolution
- summary of resolution outcomes/plans of action
- service system gaps identified
- summary of disputes, volume and type of disputes
- assessment of resolution team representation
- summary of survey responses

Appendix 1

Ministry of Children and Youth Services

Specialized Support for Children/Youth with Complex Needs

Decision-making Guidelines

I: Introduction

Children/youth with Complex needs are:

- Under the age of 18 and require specialized services/supports to participate in activities of daily living, on a long-term, continuous and/or intermittent basis; and
- Have two or more different special needs, requiring an integrated service approach that crosses sectors (health, education and social services) with services often being provided at a number of different locations; and
- Have needs associated with a variety of conditions, which may include physical, intellectual, emotional and developmental disabilities, and chronic, severe and/or terminal illness.

Where there are no protection concerns, these children/youth and their families are to be referred to non-protection agencies that have both the mandate and the expertise to provide the services.

The policy, *Making Services Work for People*, 1997 requires that every local system of services have (or develop) the capacity to provide supports to children/youth with Complex needs who have been assessed to be "most in need", within available resources. Local systems of services must find ways to provide service to children/youth who are assessed to be "most in need" to reduce the immediate health and safety risk to the child/youth. Once the level of risk has been reduced, the child/youth and/or family may be placed on a waiting list for additional services where the services are not immediately available.

Some children/youth with Complex needs require specialized supports to meet their unique circumstances because:

- The complexity of the service needs for the child/youth are beyond the capacity of the service system and family to address; and
- Immediate measures are needed to decrease risk to the immediate health and safety of the child.

Where a request for specialized support is received the decision-making shall:

- Reflect a common set of guidelines and a common process, as outlined in the Sections II and III of these guidelines, that give all applicants an opportunity to submit the information they believe needs to be considered in their request for specialized support;
- Demonstrate a consistent interpretation and application of the guidelines;
- Consider each individual's and family's unique situation and circumstances and show a willingness to use discretion where circumstances warrant; and

- Result in decisions that are consistent, objective and sensitive to individuals, families, language and culture.

While the framework for decision-making will be consistent across the province, the amount of support that a child/youth may receive will vary depending on the individual circumstances, unique characteristics, and available community resources.

The following guidelines will assist in decision-making regarding specialized support where a request is received for a specific child/youth with Complex needs and his/her family. Decisions will be made within the resources available to the ministry. Supports approved through this process are time-limited with the goal being to transition the child/youth and family into the existing service system. Services/supports provided through this process will be managed by transfer payment agencies with the clinical expertise to support the child/youth and family. These agencies are subject to ministry review and accountability requirements.

II: Guidelines

Children/youth with Complex needs may be considered for MCYS specialized support if they meet the following criteria:

- Are residents of Ontario;
AND
- Have ongoing functional limitation/s as a result of a disability and/or disorder as documented by a physician, psychologist, or psychiatrist;
AND
- Have support needs that are beyond the available services and supports as documented by the local case resolution mechanism.

In addition:

- The supports required are ones that MCYS provides within its policy and legislative mandates;
AND
- The services/supports are to be provided/delivered within the Province of Ontario.

Approvals will be based on the following **decision-making factors**:

- The urgency of need for measures to reduce the risk to the immediate health and safety of the child/youth;
AND
- The support needs of the child/youth with Complex needs and the family;
AND
- The availability of ministry-funded supports in the community;
AND
- The availability of other formal and informal supports to the child/youth and family;
AND
- The availability of funds.

III: Process

Families of children/youth with Complex needs will be informed of the full process for accessing specialized support by the Access Mechanism or the Case Resolution Mechanism.

Step 1: Access Mechanism

Each community has established an access mechanism, which provides information about services, makes referrals, and maintains waiting lists for services. Any individual or family requiring services is expected to contact the access mechanism in their area for information and/or referral. Families seeking specialized support must contact local access mechanisms for assessment, prioritization, referral, intake and service provision. The family is not expected to repeat this process if it occurred at an earlier time.

Step 2: Case Resolution Mechanism

Where the existing services and service system are not able to meet the child's/youth's needs the child/youth must be referred to the local case resolution mechanism.

The ministry requires every local system of services to have a *Case Resolution Mechanism* to deal with "most in need" cases. The functions of a case resolution mechanism include:

- Reviewing cases to determine if they are "most in need"; and
- Recommending service options to address "most in need" cases.

The process of decision-making for specialized supports does not replace existing mechanisms for identifying "most in need". It is intended to deal with those children/youth who are first identified by a Case Resolution Mechanism as "most in need" and then also fit the criteria identified in Section II of this document.

Step 3: Specialized Support

The case resolution mechanism may consider specialized support for a child/youth, within available resources, when:

- The child's/youth's needs are sufficiently complex that the family and the existing service system are not able to meet the needs of the child/youth; and
- The child/youth meets the criteria identified in Section II of this document.

Step 4: Regional Office Review

Where the Case Resolution Mechanism decides that it is unable to address the need, it may submit a plan for the child to the regional office for consideration. The Case Resolution Mechanism must document:

- The immediate health and safety risk;
- The child's eligibility in the context of the criteria identified in Section II of this document;
- The reasons why it is unable to resolve the situation;
- The plan to address the child's needs including how the immediate risk will be reduced;
- Information from the community processes to address the needs of the child/youth and family and their "most in need" status;

- The specific supports requested, the cost and the transfer payment agency that will provide the supports; and
- Evidence that the family has been given an opportunity to provide additional information that may inform the plan prior to submitting it to the Regional Office.

On receipt of a request for specialized support the Regional Office will:

- Request additional information as required to make a decision;
- Send a letter to the family and copy the case resolution mechanism, acknowledging receipt of the request for specialized support and the plan, advising that the guidelines for decision-making can be made available upon request and identifying a timeframe for a decision;
- Review the plan against the guidelines, the five decision-making factors to be considered for specialized support and the available resources;
- Give the family an opportunity to provide additional information about their plan prior to a final decision being made; and
- Document the decision and reasons for the decision including:
 - ✓ A response to the criteria and five decision-making factors;
 - ✓ Level and type of support to be allocated; and
 - ✓ The transfer payment agency who will manage the support plan with the family and facilitate linkages with and the transition to the existing service system.

Step 5: Inform the Family of the Decision

Within the timeframe identified in the acknowledgement letter, the Regional Office will inform the family in writing, and copy the Case Resolution Mechanism, of:

- The decision and the reasons for the decision;
- The specific time period of the approval up to a maximum of one year, coinciding with the ministry's fiscal year;
- The requirement that the urgency of need will be reassessed at least annually by the Case Resolution Mechanism. The same level of support is not guaranteed in subsequent approvals; and
- The requirement that the family work with the case resolution mechanism and/or local agencies to transition the child/youth and family to the existing service system.