# CONNECTIONS

## GUIDE FOR BUSINESS PROCESS REVIEW AND ANALYSIS IN PREPARATION FOR BUILD 18 CASE MANAGEMENT

# INTRODUCTION

As part of the larger CONNECTIONS Project of OCFS, the Implementation Management Bureau is responsible for preparing district, agency, regional, and state staff for the implementation of a comprehensive automated information system for social services. This includes change management, training, on-site support, and communication to stakeholders and end users. A wide range of tools will be used by the project staff to orient users to the system; build the capacity of user agencies; and assist users in proactively preparing for the changes that an automated system can make. One of those tools is Business Process Reengineering (BPR). This is a method that includes the critical analysis of existing business processes and the redesign of these processes in an effort to streamline and improve the day-to-day operations of child welfare districts and agencies using the new automated system of case management.

The outcomes and benefits expected from analyzing and redesigning business processes that will directly use CONNECTIONS or be impacted by the use of CONNECTIONS changes in policy or by the use of CONNECTIONS will be that:

- Districts/ agencies will be able to critically examine how work is currently being conducted or processed in their own organization and assess ways to reduce redundancy with system functionality, identify and eliminate processes and procedures that CONNECTIONS will render unnecessary, and improve efficiency.
- Staff will become exposed to the ways in which CONNECTIONS can support the work of their organization and be a useful tool for casework decision making, documentation and case management.
- Districts/ agencies who share responsibilities for provision of services will be able to cooperatively develop redesigned work processes that will be the most efficient and effective for all involved.
- Processes across district and agency organizations will become more standardized, and the number of methods by which each district and agency must operate will be reduced.

This guide has been prepared to give district and agency staff assistance in preparing to implement the CONNECTIONS Case Management application. As a result of the changes that an automated system of case documentation brings, it is recommended that all districts and agencies make the review and analysis of current and proposed business processes a part of the implementation preparation activities.

The methods and tools presented in this guide can be used individually by each district and agency to assess and redesign internal work processes as well as to refine cross-agency work processes. The overall set of tools, which are covered in Appendix B, can be used by the CONNECTIONS Implementation staff at Regional Implementation Support Team (RIST) meetings, and at other planned meetings with your staff.

# ACKNOWLEDGEMENTS

**Special thanks go to the three Local Departments of Social Services and three Voluntary Agencies that participated in piloting our work on Business Process Reengineering. They devoted substantial staff time to participate in user groups to examine and document current work processes in their locations; to study the new functionality of CONNECTIONS Build 18; to discuss how the automation will affect their current work processes; and to meet jointly with the district or agency in their locale to begin cooperatively developing the model processes you will see documented in this guide. We could not have done this without their assistance.**

**CONNECTIONS Implementation thanks:**

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**Christina Perkins, Implementation Coordinator**

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# MAJOR PROCESSES IMPACTED BY CONNECTIONS CASE MANAGEMENT IMPLEMENTATION

1. Intake Processes - to open Services case and provide services.
    A. Family Services Intake initiated by an Agency (non-CPS).
    B. Family Services Intake initiated by a Local DSS (non-CPS).
    C. Family Services Intake initiated through CPS in a local district

2. Case Opening Processes- to move the case from Intake into open service delivery and case planning.
    A. Beginning activities to begin the Family Services Casework.
    B. Opening the case in WMS.
    C. Assignment of workers to a case.

3. Family Assessment and Service Planning (FASP)- conducting, coordinating and communicating about work in the ongoing case.
    A. Completing the FASP (formerly known as UCR).
    B. Conducting the Service Plan Review.
    C. Processing Status Changes that occur in the case.

In the sections that follow, samples of the major processes listed above will be shown using workflow diagrams along with a 'Questions and Considerations' page for each diagram to guide districts and agencies in considering how work will be done in a CONNECTIONS environment. This list is not intended to be an exhaustive list of all processes and work done in CONNECTIONS, but focuses on the major processes that will have the most impact during Build 18. The 'Questions and Considerations' pages will assist planning groups to understand 1) WHAT process is to be done; 2) WHEN it should be done; 3) WHO should complete the process or steps in the process; and 4) HOW it gets done.

*Appendix A gives an explanation or description of the workflow objects used in the diagrams to aid the reader in following the diagrams.

## MANAGING THE IMPACTS AND CHANGES

The continued implementation of CONNECTIONS will have an impact on workers, supervisors, and managers in all districts and agencies. The degree to which you actively prepare for and manage the changes and impacts will determine the degree to which your staff feels prepared and empowered to deal with the impacts, or the degree to which they feel unable to cope and/or unable to conduct the business of your office.

The CONNECTIONS Implementation Team has prepared and disseminated a series of "Impact Analyses" that detail the areas of impact and the scope of Case Management in CONNECTIONS from a systems, policy and case practice perspective. They also disseminated a self-assessment for your use so that you can gauge your readiness to manage and implement the changes. This Guide presents you with a "how to" process for redesigning the business processes that you identified as impacted by the implementation of Case Management in CONNECTIONS. The Guide is intended to be used with the impact analyses, the comparison of the current UCR to the CONNECTIONS Family Assessment and Service Plan (FASP), the FASP rules, and the use of either screen prints or the CONNECTIONS Build 18 Prototype.

How do we manage the impacts and changes? The following seven concepts will help you to manage the change in your organization.

1) **Understand the size and scope of the impact**.
   Although CONNECTIONS provides a different way of documenting the same work that is being done now, it will change the way work gets done; when tasks are performed; what certain things are named; and the way documents are produced. Pay attention when staff describe concern and anxiety over the changes. Address their concerns through your planning efforts. Emphasize the positive changes that automation will bring.

2) **Develop a plan and strategy early.**
   Forming an implementation team in your district or agency is a first step in planning. By using the recommended ten (10) month preparation schedule and the tools that are available, your organization can develop a strategy that will manage the change. Core competencies of staff need to be addressed in planning. These include keyboarding and mouse skills, information management skills, work management skills, conceptual knowledge skills of policy and practice, and self-management skills.

3) **Coordinate a cooperative effort among OCFS, OFT, CONNECTIONS, Regional office, Local DSS, Voluntary (Contract) Agencies and the Courts.**
   Implementation of an integrated system that contains documentation of all cases requires that all parties be involved in making decisions, planning, carrying out implementation, making it work, and measuring success. We must think about who is affected and how we can involve them. By cooperatively developing new work processes, efficiencies can be incorporated and processes can become more standardized. The end result should be better service delivery to children and families in New York State.

4) **Involve all levels of staff.**

Implementation groups and regional planning groups need to involve all levels of staff, not just managers. Because line workers will be entering the majority of information into CONNECTIONS, they should have input into change planning. Identify Change Leaders in your organization who understand the positive effects that CONNECTIONS can provide.

5) **Manage the flow of information by communicating change, status, and decisions.**
Change is unsettling. Information is powerful and needs to be shared regarding why changes are happening and the direction of those changes. Communication from the CONNECTIONS staff and OCFS should be shared with all staff to enable them to be prepared. Information sharing is a two way street. Districts and Agencies also need to provide information about the needs and other information regarding equipment and training to the CONNECTIONS and OCFS staff.

6) **Identify the impacts on daily workflow; learn new ways, let go of old processes.**
There should be critical examination of how work gets done now. Then using the methods and tools that are contained in this guide, your organization can prepare to redesign work processes incorporating CONNECTIONS into daily work. CONNECTIONS presents an opportunity to promote best practices, to document measured outcomes based on national standards, to share information and do joint planning to improve services, and to standardize business relationships between districts and agencies.

7) **Identify the impact on policy and local practice.**
Some of the elements in the CONNECTIONS system are included because of federal regulations and requirements for reporting to the federal government as outlined in the SACWIS and AFCARS requirements. Some of the system design has been based on new state policy changes such as the risk assessment and safety assessment. There will be other impacts that will require new local policies and procedures related to how and when certain actions are completed. The whole idea of the movement to an electronic case record will change how documents are produced, how records are perceived by the courts, and what the rules are about how information on cases are stored, maintained, and shared.

# RECOMMENDED PLANNING STEPS TO INCORPORATE BUSINESS PROCESS REENGINEERING INTO IMPLEMENTATION PLANNING FOR CONNECTIONS CASE MANAGEMENT

1. An implementation team of line, supervisory, management and systems staff should be established in the district and agency that will take responsibility for learning about CONNECTIONS and using the information to do local planning.

2. The team should review the impacts of Build 18 using the Impact Analysis documents, the Self Assessment/Action Plan documents, Prototype demonstrations, screen shots, as well as other documents explaining the new functionality.

3. Using the model business processes included in this guide, the team (or workgroups within the team) should review how specific work processes are being done now (before implementation of CONNECTIONS Build 18) and compare that to the model processes. This step should begin six (6) to eight (8) months before 'Day One' Implementation.

4. The team should then use the Questions and Considerations pages that accompany each model process to make decisions and set local protocols. Work groups should begin to identify the processes that will out of necessity change because of the system design, or steps in processes that could be modified or reorganized to make casework more efficient and effective. The groups should also identify the limitations and barriers to change and make recommendations to address them.

5. Decisions that are made and new procedures developed should be documented in writing and shared with all staff that will be impacted.

6. At the same time planning is being done internally within each district and agency, the local team should also participate in joint planning with other districts and agencies who will be working together using CONNECTIONS. This will provide for consistency across organizational boundaries as well as allow the organizations to learn from each other. It is important that cross-jurisdictional procedures be in place prior to implementation.

7. Cooperative planning between districts and the agencies with whom they contract for foster care and preventive services should take into consideration how processes can be streamlined by eliminating old ways of operating. Forms currently being used to document various actions or activities may also be eliminated. Planning should seek to standardize as much as possible the processes that affect multiple agencies and/or districts. This includes 1) comparing existing processes between areas and organizations, noting the commonalities and differences in each process; and 2) envisioning the new processes that are more efficient, and that better meet each district's and agency's needs and those that support better outcomes.

8. New or modified cross-agency processes should be clearly documented and agreed upon by both districts and agencies.  This documentation can take a form similar to the workflows included as samples in this document, they can be narratives or “use cases” that illustrate the new processes, or can be communicated in any form that suits your organization.  These processes can then be tested post-training and pre-implementation in the Preview environment for validation and fine-tuning.  The Implementation team can assist you in defining how to use preview to test these new processes.

The CONNECTIONS staff along with the Regional Office staff will be available throughout the process to assist districts and agencies in planning for and incorporating new business processes.

## Family Services Intake initiated by a Contract (Voluntary) Agency (Non-CPS)

### Questions and Considerations

- **WHAT process is to be done?**
  All Intakes for Services Cases will be recorded using the Family Services Intake in CONNECTIONS. Either a contract agency or a Local District (LDSS) can initiate Non-CPS intakes, including intakes for Preventive Services and JD/PINS placement cases. If the case is non-CPS (e.g., does not originate from an indicated CPS report and opened for CPS services), the completion of a screening tool, the Behavioral Concerns and Family Issues (BCFI) and the documentation of any emergency services/interventions provided to the family are required.

  As part of a contract agency's discussion and planning around the intake process, consideration should be given to eliminating unnecessary or redundant locally developed intake forms currently being used. The agency should also consider if other activities and steps currently being completed in the intake process can be streamlined by taking advantage of the automated intake functionality.

- **WHEN should it be done?**
  In a contract agency, the Family Services Intake is done when a family or child is referred to the agency for services or independently seeks services. The Family Services Intake (FSI) must be completed before an ongoing service case can be opened.

  Procedures need to be determined within each contract agency to determine the point in time in which a Family Services Intake is first initiated, completed online and submitted for LDSS approval. Is the FSI initiated when the family information is first provided to the agency worker (for example, when an application for services is completed by the client), or when the information comes initially from another source (for example, telephone referral from a school). Or, should the FSI only be initiated after a complete screening interview with the client(s) or some initial screening of the referring source and/or collateral contacts has been completed?

- **WHO completes it?**
  Each agency must decide who will be responsible for obtaining the application for services, conducting the screening interviews and entering the Family Services Intakes into CONNECTIONS. Is there an Intake Unit currently completing this function? Does an Intake Unit need to be created? Who will be performing case and person searches?

  Does a supervisor at the contract agency need to review the completed intake before it is sent to the appropriate LDSS for acceptance? If so, a procedure for timely review and submission to the LDSS for acceptance is needed. Will the supervisor submit the intake to LDSS after review or will it be sent back to the intake worker to submit directly to the LDSS?

*An important point to remember is that in CONNECTIONS, the Family Services Intake can only be on one person's workload at a time.

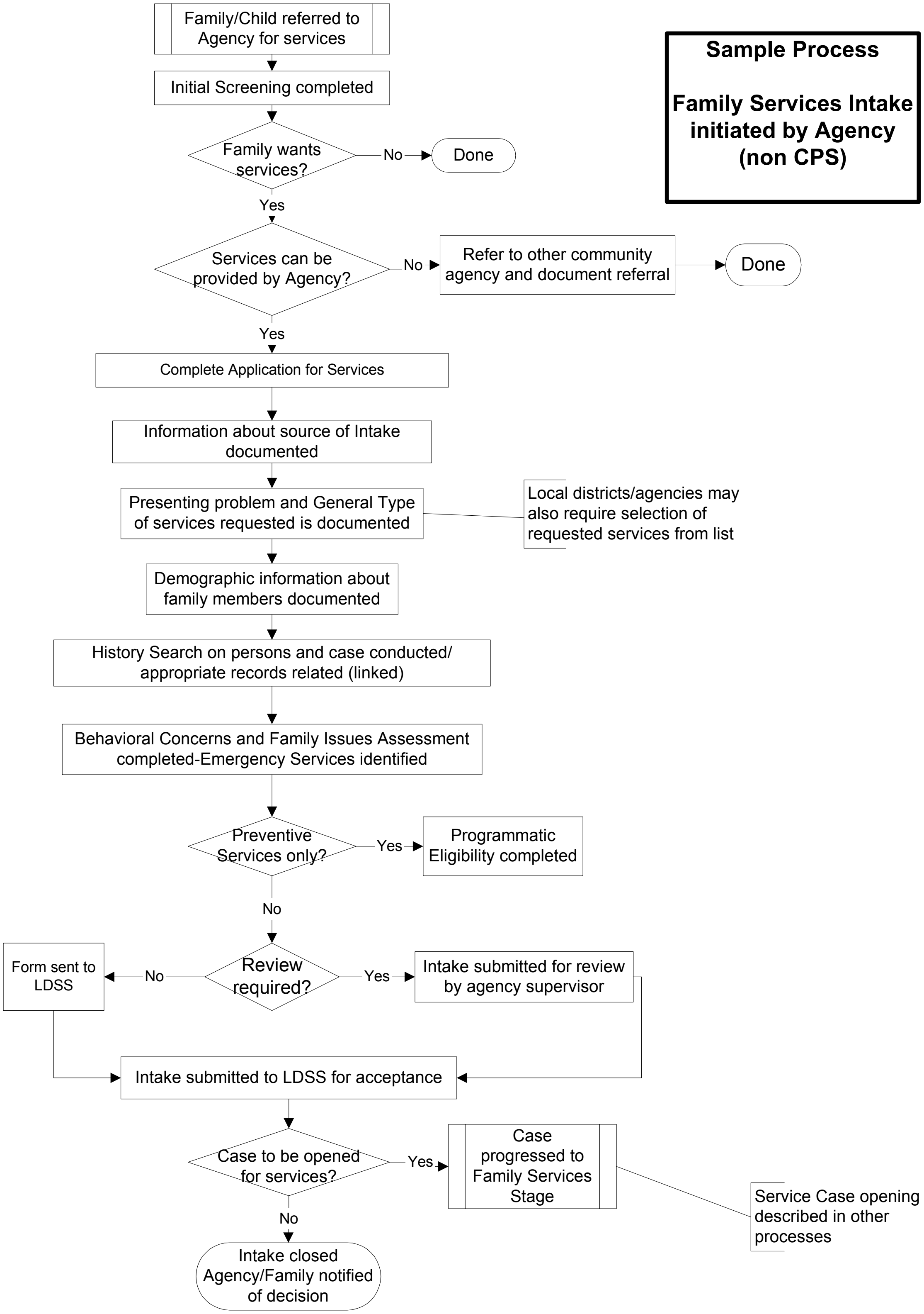
Do the Intake workers know how to complete thorough person and case searches in CONNECTIONS? It is important that these searches be completed so that if an open CPS Intake/Investigation exists, the FSI is related to that case.

Who in the LDSS is responsible for review and acceptance of FSIs referred by contract agencies? Does a decision to accept require supervisory review? Does the same worker at LDSS receive the Application form signed by the client? Will the LDSS worker receiving the Intake recheck information and do an additional Person Search?

- **HOW does it get done?**
  The Agency Intake workers with the appropriate Business Function Profile in Security can create a Family Services Intake (FSI) by going to the CONNECTIONS toolbar and selecting "Create FSI". The original application (hard copy) is sent to the Local District. A photocopy will remain at the Voluntary Agency.

## Sample Process

## Family Services Intake initiated by Agency (non CPS)



**Family Services Intake initiated by LDSS (Non-CPS)**

**Questions and Considerations**

- **WHAT process is to be done?**
  All Intakes for Services Cases will be recorded using the Family Services Intake in CONNECTIONS. Non-CPS intakes, including intakes for Preventive Services, Voluntary Placements, and JD/Pins cases, can be initiated by a LDSS or contract agency. If the case is non-CPS, the completion of a screening tool, the Behavioral Concerns and Family Issues (BCFI) and the documentation of any emergency services/interventions provided to the family are required.

  As part of a district's discussion and planning around the intake process, districts should consider if the locally developed intake forms currently being used could be eliminated. They should also consider if other activities and steps being completed in the intake process can be streamlined by taking advantage of the automated intake functionality.

- **WHEN should it be done?**
  In an LDSS, the Family Services Intake (non-CPS) is completed when a family and/or child is referred to or a client request for services is received by the district. The FSI must be completed before an ongoing service case can be opened.

  Procedures need to be determined at the local district to determine the point in time when a Family Services Intake (non-CPS) is initiated and completed in CONNECTIONS. Is it when the family information is first provided to the district intake worker? Or after some initial screening through interviews or collateral contacts is done?

- **WHO completes it?**
  Each local district must decide who will be responsible for obtaining the applications for services, conducting the screening interviews and entering the Family Services Intakes. Is there an Intake Unit currently completing this function? Does an Intake Unit need to be created?

  Do the Intake workers know how to complete thorough person and case searches in CONNECTIONS? It is important that these searches be completed so that if an open CPS Intake/Investigation exists, the FSI is related to that case.

  Does a supervisor at the district need to review the intake before it is opened as a services case and a Family Services Stage created in CONNECTIONS? If so, a procedure for timely review and movement is needed. Will the supervisor progress the intake to an open Family Services Stage after review or will it be sent back to the intake worker to progress?

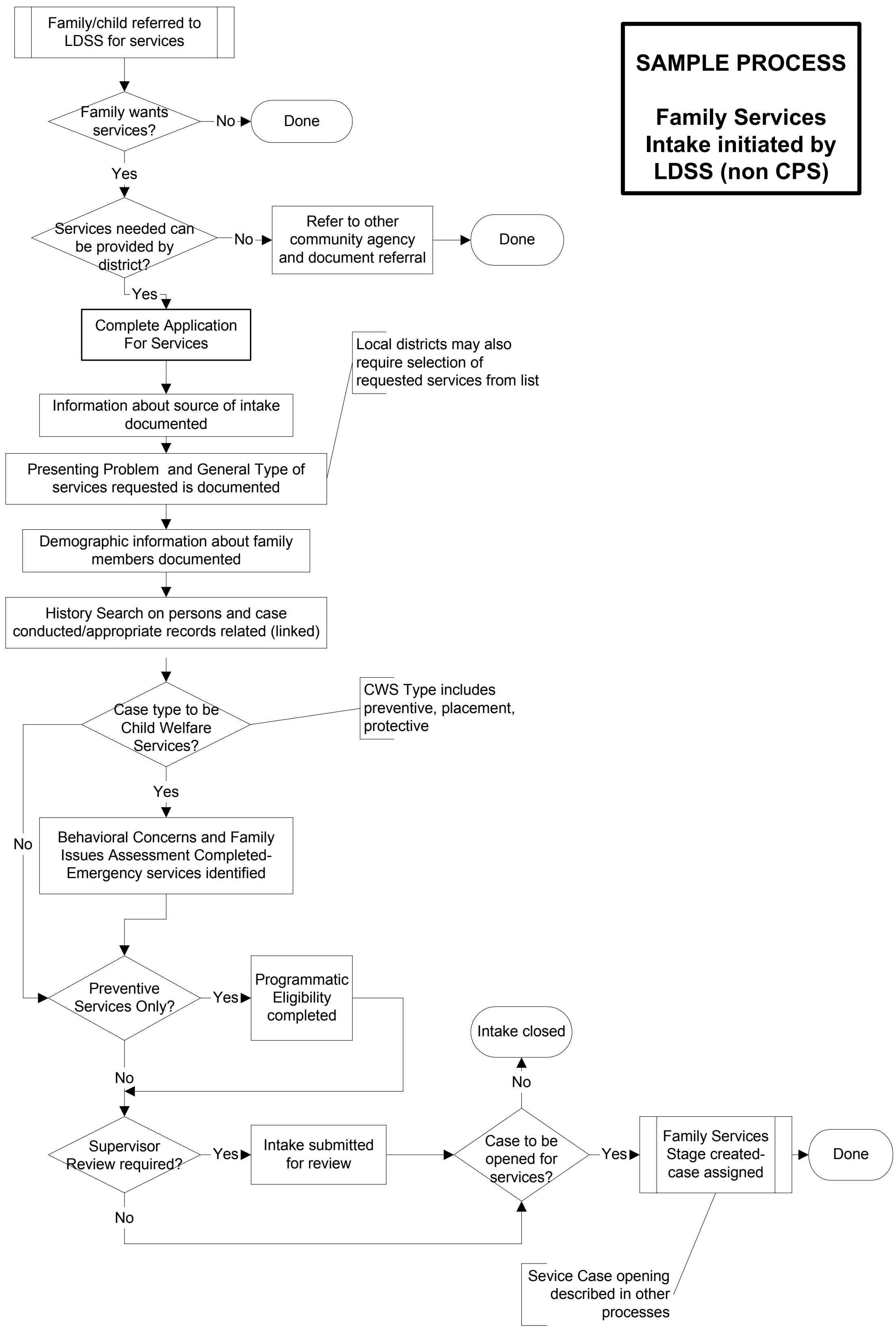
  *An important point to remember is that in CONNECTIONS, the Family Services Intake can only be on one person's workload at a time.

- **HOW does it get done?**

The LDSS Intake workers with the appropriate Business Function Profile in Security can create a Family Services Intake (FSI) by going to the CONNECTIONS toolbar and selecting “Create FSI”.

**SAMPLE PROCESS**

**Family Services Intake initiated by LDSS (non CPS)**



## Family Services Intake initiated through CPS in Local District

### Questions and Considerations

- **WHAT process is to be done?**
  All Intakes for Services Cases will be recorded using the Family Services Intake in CONNECTIONS. Much of the information required for a Family Services Intake will be carried forward from the Investigation Stage. The CPS worker can determine which persons from the investigation need to be carried forward into the open services case during the Intake stage.

- **WHEN should it be done?**
  The Family Services Intake can be opened at any point during the Investigation when the decision is made that a services case needs to be opened to provide needed services to the family. The system will automatically open a Family Services Intake upon approval of an Investigation Conclusion with a stage closure reason stating that the case will be opened for services.

  If the Family Services Intake is opened while the Investigation Stage is still in process, procedures need to be determined by the district regarding where CPS workers should document progress notes: in the Investigation Stage or in the Family Services Stage (once the FSS is opened); or if notes should be copied into both stages. This may depend on the nature of the contact.

- **WHO completes it?**
  The CPS worker assigned to the Investigation will open the Family Services Intake and progress it to the Family Services Stage (open case). The system will assign the CPS worker as the case manager in the new Family Services stage and that worker can begin work in the open case and make (re)assignments as needed.

  Does a Supervisor need to review the Family Services Intake before it is moved to an open Family Services Stage? If so, a procedure for timely review and movement is needed. Please see the section of this guide on "Making Assignments" for more information on how the case will be assigned to an ongoing services worker.

  *An important point to remember is that in CONNECTIONS, the Family Services Intake can only be on one person's workload at a time.

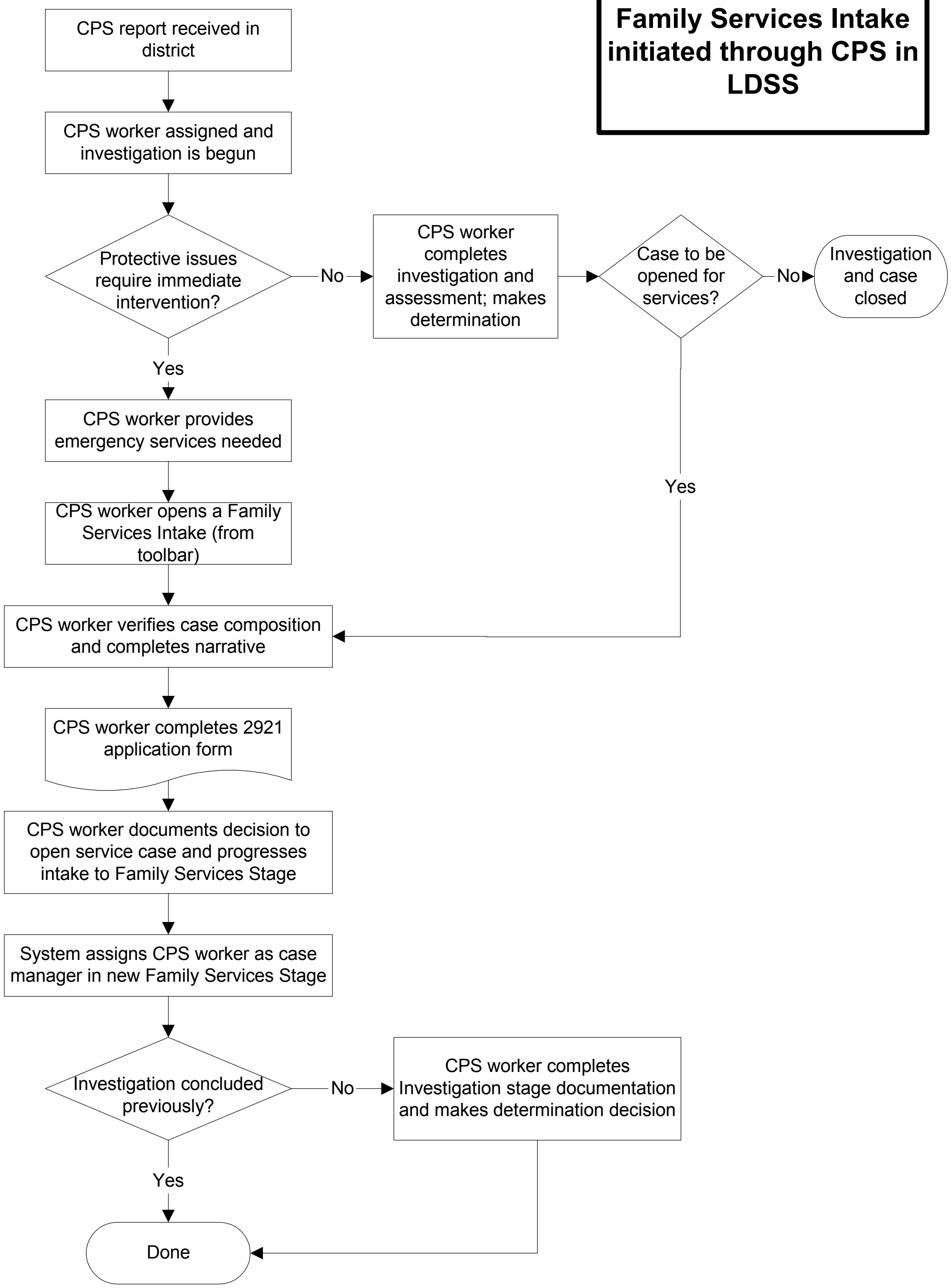
  (Please refer to the section of this manual on "Making Assignments and Transferring Assignments in the Open Case.)

- **HOW does it get done?**
  The CPS worker can create a Family Services Intake (FSI) by going to the CONNECTIONS Toolbar and selecting "Create FSI" if the case is being opened for services before the conclusion of the investigation. The system will

automatically open the Family Services Intake upon approval of the Investigation Conclusion with a stage closure reason indicating that the case will be opened for services.  The CPS worker can then access it from their assigned workload window.

**SAMPLE PROCESS**

**Family Services Intake initiated through CPS in LDSS**



## Case Opening Process (Until CONNECTIONS Financial Management – Build 19 – is implemented)

### Questions and Considerations

- **WHAT process is to be done?**
  When the determination is made that services are going to be provided to a family, a services case is opened in CONNECTIONS, in WMS, in CCRS and in the district and/or agency as a paper file. Beginning with Build 18, opening the case in WMS will be done through CONNECTIONS. Until Build 19 is implemented, the maintenance of case information in CCRS continues to be required. Coordination of all case opening activities is needed to make certain all required steps are completed so that service delivery and casework can proceed.

- **WHEN should it be done?**
  Case opening activities must be done when a new services case is opened or reopened in the local district. There are certain steps that must be completed in CONNECTIONS before work can begin on the Family Assessment and Service Plan by any worker assigned to the case.

  Some specific information must be entered into CONNECTIONS before the case can be opened in WMS. This information includes the 'Application Signed' date, Demographic information (Name, Date of Birth, Sex, Social Security Number) on each person in the case, designation of a Primary Caretaker, and an active address for the primary caretaker.

  The completion of the WMS Application Registration must be done in CONNECTIONS by clicking the WMS App. Reg. Button before any other case data can be entered into WMS. This is the only way a WMS Child Welfare Services case can be opened after Build 18 is implemented.

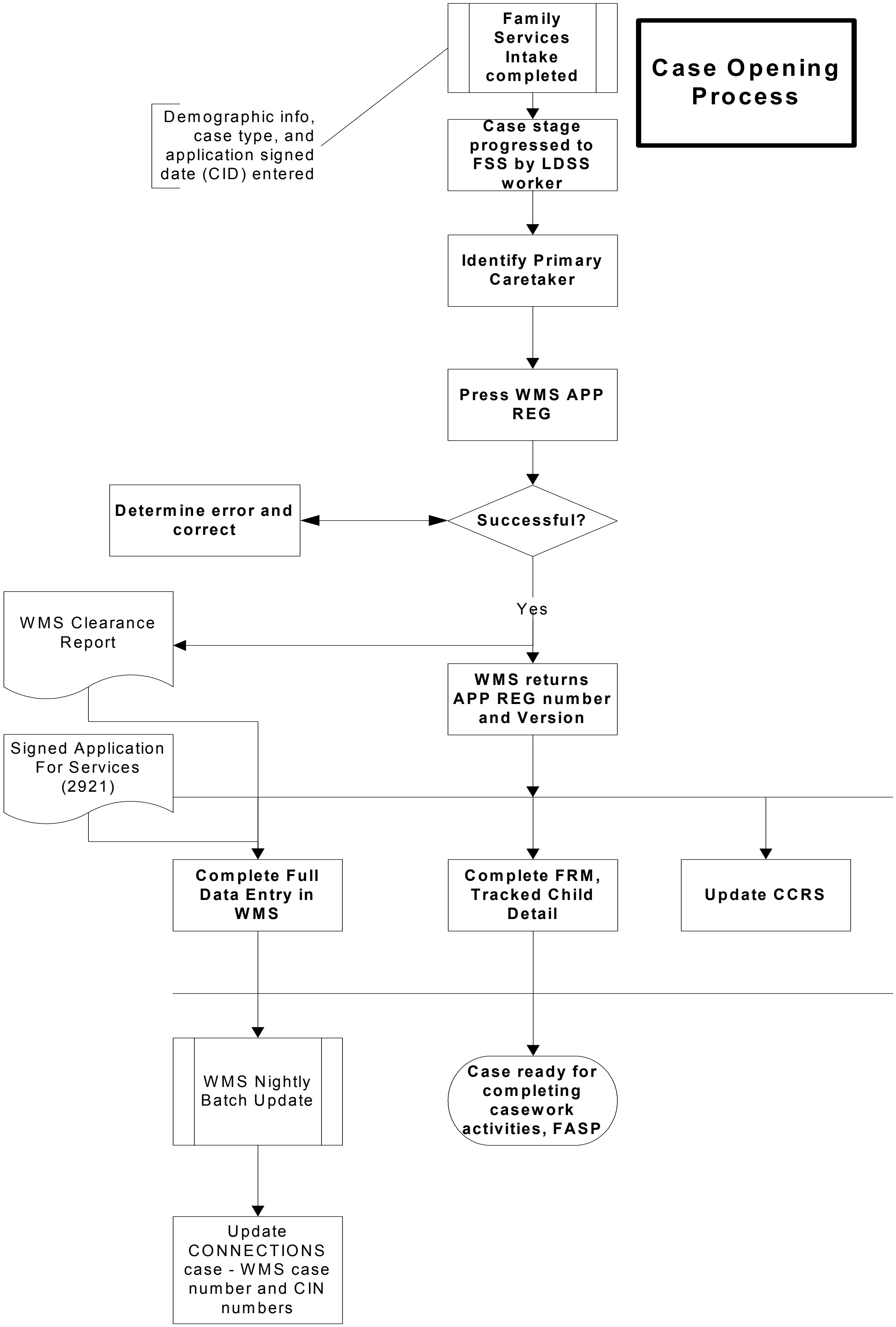
- **WHO completes it?**
  The LDSS worker who stage progresses the Family Services Intake to the Family Services Stage will in most instances be the worker who completes the case opening activities. Other workers may be assigned a role in the stage to perform all or some of these activities.

  Decisions will need to be made regarding who will complete the Common Application (Form 2921) application information and to whom it will be given to complete the Full Data Entry sections directly in WMS as is done now. A printout of the Family Services Intake person and demographics information may be attached to the Common Application in lieu of completing that section of the form.

  Decisions will need to be made regarding who is responsible for obtaining the Application and Clearance Report from WMS and coordinating the case opening activities. These activities include the Full Data Entry required in WMS and keeping CCRS synchronized with CONNECTIONS.

Decisions will need to be made regarding who enters case information, Worker Ids, CID dates, permanency planning goals, program choice, etc. into CCRS. This person should also complete updates to CCRS as needed. It is important that this data be synchronized with CONNECTIONS.

- **HOW does it get done?**
  The opening of a services case is done in CONNECTIONS. The WMS Services case opening will be initiated through CONNECTIONS by completing the Application Registration through an automated interface. The additional WMS case information such as income, eligibility, and service authorization, etc. will be entered directly into WMS. CCRS will continue to be used to record assessment and service plan data, placements, legal and adoption activities, etc. as remains current practice until Build 19.


Case Opening Process
Family Services Intake completed
Demographic info, case type, and application signed date (CID) entered
Case stage progressed to FSS by LDSS worker
Identify Primary Caretaker
Press WMS APP REG
Determine error and correct
Successful?
Yes
WMS Clearance Report
WMS returns APP REG number and Version
Signed Application For Services (2921)
Complete Full Data Entry in WMS
Complete FRM, Tracked Child Detail
Update CCRS
WMS Nightly Batch Update
Case ready for completing casework activities, FASP
Update CONNECTIONS case - WMS case number and CIN numbers

## Making Assignments and transferring case assignments in the open case

### Questions and Considerations

- **WHAT process is to be done?**
  When the service case is first opened, assignments to workers handling the case will be made. Periodically cases will need to be reassigned to different units within a district or agency and to different workers. The assignment process in CONNECTIONS will be an automated assignment made by workers in the case, the supervisors of the workers, or the case manager. In addition to assigning workers to a case, each worker is assigned a role in the case. The roles include case manager, case planner, caseworker, or CPS monitor. Supervisors automatically have access to cases assigned to their workers. Finally, workers assigned to a case can also be associated to a particular child within a case, if they are working with a specific child.

- **WHEN should it be done?**
  When a Family Services Stage is initially opened, the system automatically assigns the LDSS worker who stage-progresses the Family Services Intake to the FSS as the Case manager. That worker then can reassign other workers to the case. He can reassign the case management role to another LDSS worker or supervisor as local protocol dictates.

  Consideration should be given to minimizing the movement of cases from unit to unit and worker to worker. Also, careful consideration needs to be given to the timing of reassignments. If a case were reassigned while a FASP has been launched (initiated), the system would not allow that unassigned worker continued access to new case information, and therefore the completion of that FASP would fall to the case planner. Reassignment to a new worker right before a FASP should be completed should be avoided, as that newly assigned worker would not have sufficient information to complete the FASP for the case. Again, the former worker would no longer have access to the FASP to contribute the required information.

- **WHO completes it?**

  The LDSS worker who stage-progressed the FSI is automatically assigned the case manager role in the Family Services Stage. That worker then can reassign other workers to the case. He can reassign the case management role to another LDSS worker or supervisor as local protocol dictates.

  Will the assignment go to the Assign Unit at the agency or to a specific worker in the agency? The Assignment window defaults to the Assign Unit in the Agency. The person completing the assignment can complete a staff search and also assign the case to a specific worker at the agency.

  When cases move from one unit to another, will the cases be reassigned to the supervisor of the unit for reassignment to a worker in the unit, or will it go directly to a worker?

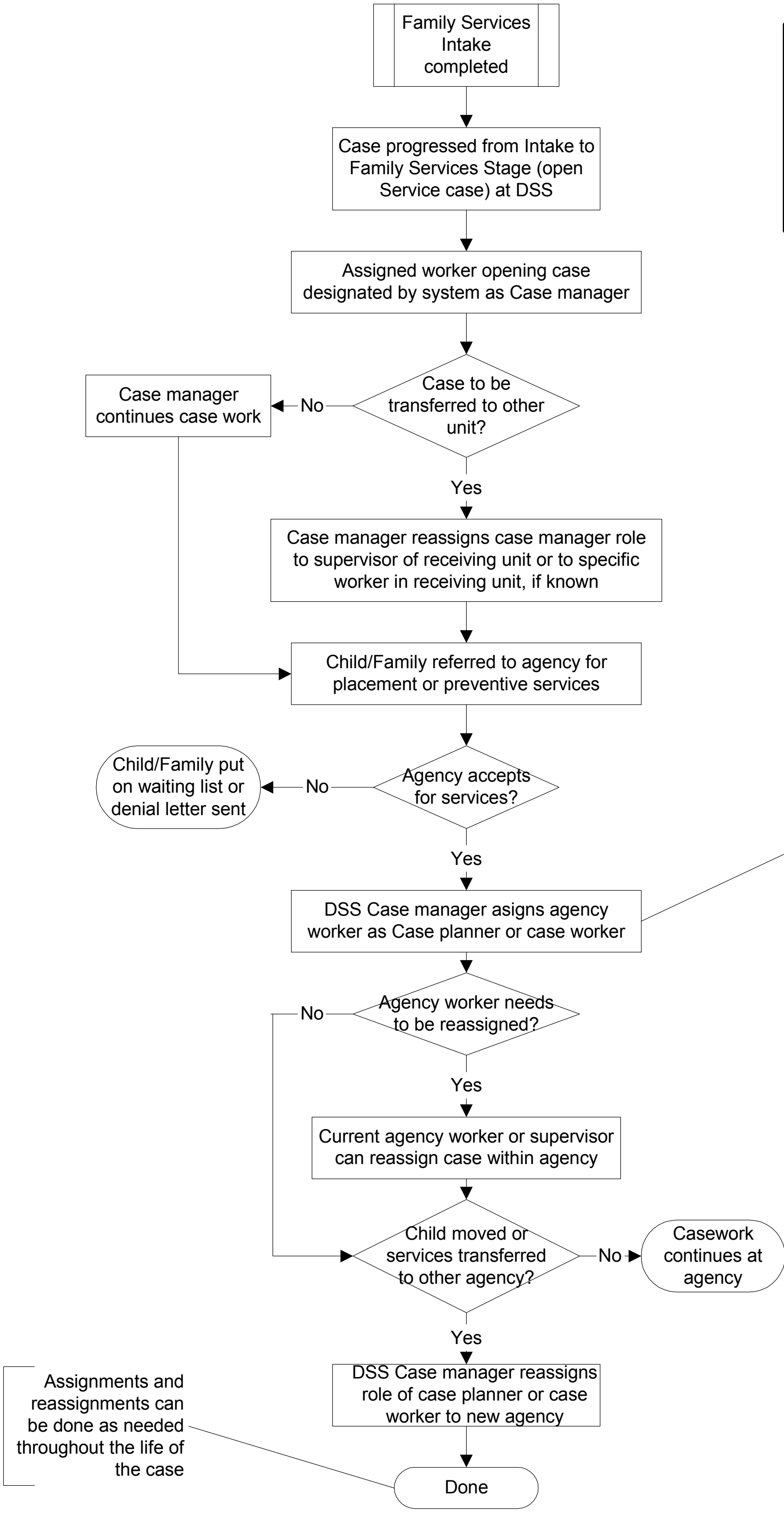
Agency workers/supervisors can reassign the case to other workers in their own agency, but not to other agency workers.

- **How does it get done?**
  From the workload screen, the worker making the assignment selects the stage to be reassigned and clicks the assign button. This brings up the assign window and the worker can select the appropriate worker by unit, or by districts or agencies. A 'To-Do' is then sent to the newly assigned worker of the action taken.

  Steps will need to be taken to also transfer the paper file and WMS/CCRS system responsibility for that case at the same time the electronic transfer is made, so that there is a smooth transition in case movement and ability to proceed.

**SAMPLE PROCESS**

**Making Assignments and transferring case assignments in open case**



## Family Assessment and Service Planning

### Questions and Considerations

- **WHAT process is to be done?**
  The Family Assessment and Service Plan (FASP) is completed on all open service cases that include preventive, placement, or protective program choices. The process is completed periodically according to statutory guidelines and regulatory requirements. All workers assigned to an individual case will complete components within the single electronic case record and the case planner will coordinate the completion of the plan which is then submitted to the case manager for approval.

- **WHEN should it be done?**
  Timelines for completing the FASP are based on the CID date of the case and reminders are provided to all workers assigned prior to the due dates. The Initial FASP can be started (launched) upon opening the Family Services Stage. The Comprehensive FASP can be started (launched) no more than 30 days before the due date. The Reassessment FASP can be started no more than 60 days before the due date. Plan amendments cannot be launched if another FASP is in process.

  Decisions will need to be made regarding when it will be expected that workers in the case will have required components completed, so that the case planner can have sufficient time to edit and finalize the plan prior to submitting the plan to the Case Manager for approval. Approvals need to be completed by the due date to be considered timely.

- **WHO completes it?**
  The case planner coordinates all the work done to complete the Assessment and Service Planning process. Who should be designated as the case planner for the case- the LDSS worker or the Agency worker? Is the rule consistent for all cases or decided on a case-by-case basis?

  Who determines which components each worker assigned to the case completes? Is this decided on a case-by-case basis? How will the workers communicate so the assessments reflect the knowledge of all staff assigned to the case, and so the plan in timely, integrated, cohesive and meets child and family needs?

  Is there going to be a set protocol for who should ‘launch’ or begin work on the new FASP? Decisions will need to be made regarding what actions will be taken in the event that a previously due FASP is overdue when the current FASP is ready to be launched.

  Will workers be associated to specific children? If so, is it understood which components are to be completed by the child’s worker? (Note: if a worker is assigned to the case but not to a specific child, s/he can still enter progress notes, etc. A worker cannot, however, complete the child scales unless assigned to a child in the case.)

What is expected of the CPS Monitor? Is s/he sufficiently involved with the case so s/he can complete the Safety and Risk Assessment components of the assessment or should s/he just review the FASP?

Will each worker's supervisor review the worker's work before it goes to the case planner or case manager? If so, each worker has to know to send a 'To Do' to the Supervisor to ask for the review. The system will not enforce that review.

Is the case manager the final approver or should it go to the case manager's supervisor? NOTE: if the case manager and case planner role is assigned to the same person, that person's supervisor must approve the FASP.

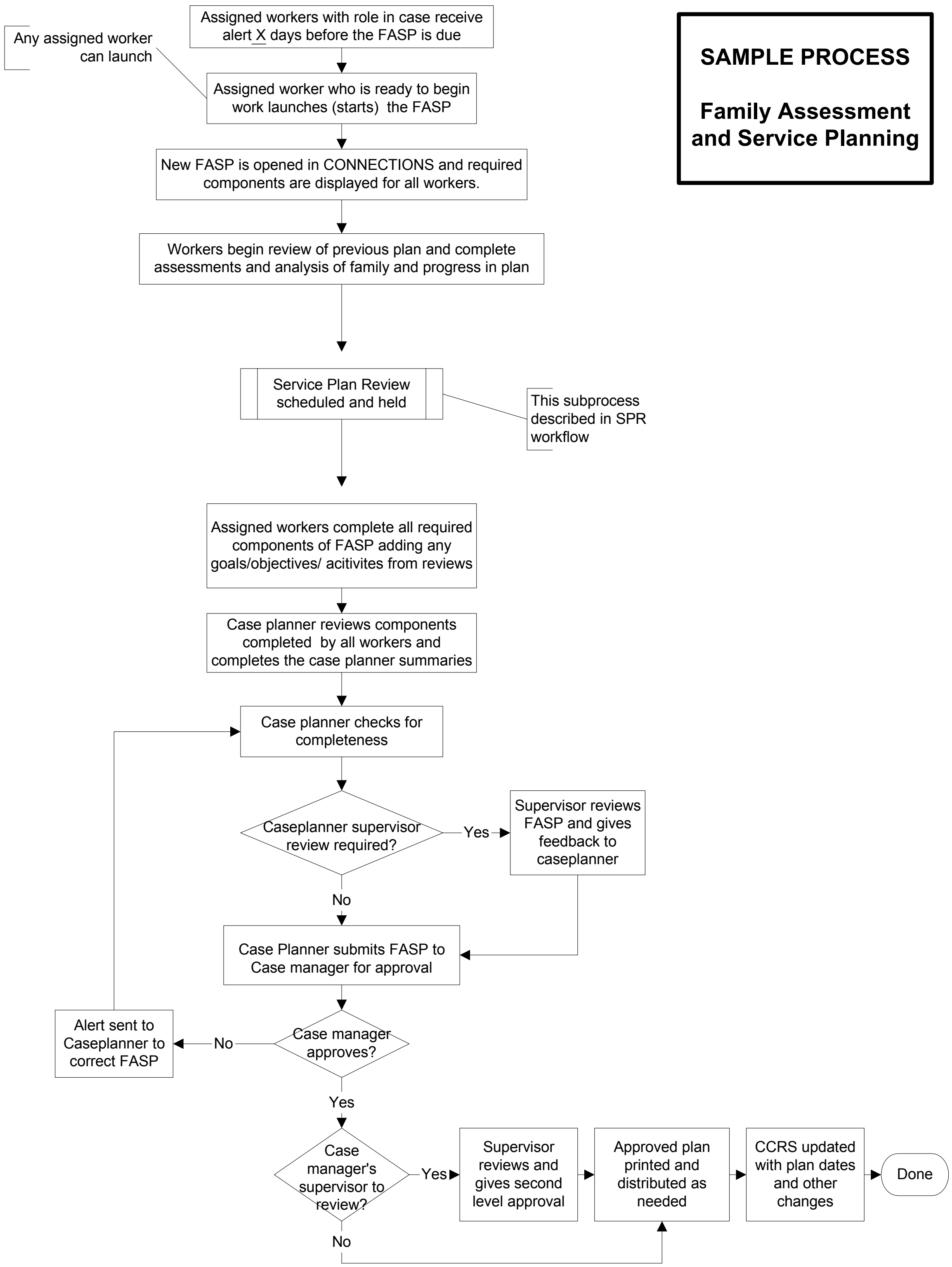
What changes or adjustments are needed in expected casework practices so that the family is fully engaged in the assessment and planning process and that involvement is fully captured in the FASP?

How will the Service Plan Reviews be scheduled and held within the planning time frame. How will the third party reviewer summary be captured and entered into the FASP? Who obtains the signatures on the plan? Who is responsible for printing and distributing the final approved plan?

Which worker is designated to update WMS and CCRS (legacy systems) with the assessment and service plan updates and the service authorizations that are derived from the plan?

- **HOW does it get done?**
  Any worker assigned to the case can start work on the FASP if within the allowable time frames. All workers are working in a single case record in CONNECTIONS. Each worker completes the required components for which it was decided that they were responsible and the case planner reviews those contributions, completes the case planner summaries and submits the FASP to the case manager for approval.

  If done timely, the information from the previous approved FASP is displayed in the new FASP to reduce the data entry time on unchanged items.




**SAMPLE PROCESS**

**Family Assessment and Service Planning**

## Service Plan Reviews

### Questions and Considerations

- **WHAT process is to be done?**
  Service Plan Reviews (SPR) are required to be conducted and documented for all placement cases and are recommended to be completed on other cases. The Service Plan Review can be scheduled in CONNECTIONS and invitation letters generated to participants, with alerts sent to assigned workers on the case. Documentation of the actual review meeting, attendance list, and input from the Third Party Reviewer is completed in CONNECTIONS. Because the documentation of Service Plan Reviews is outside the Family Assessment and Service Plan (FASP) documentation, it may be accessed whenever needed.

  The Service Plan Review should be conducted and documented prior to each FASP being submitted for approval. This is to review the progress of the family, the efficacy of the previous case plan and to discuss proposed goals, outcomes and activities for the next planning period.

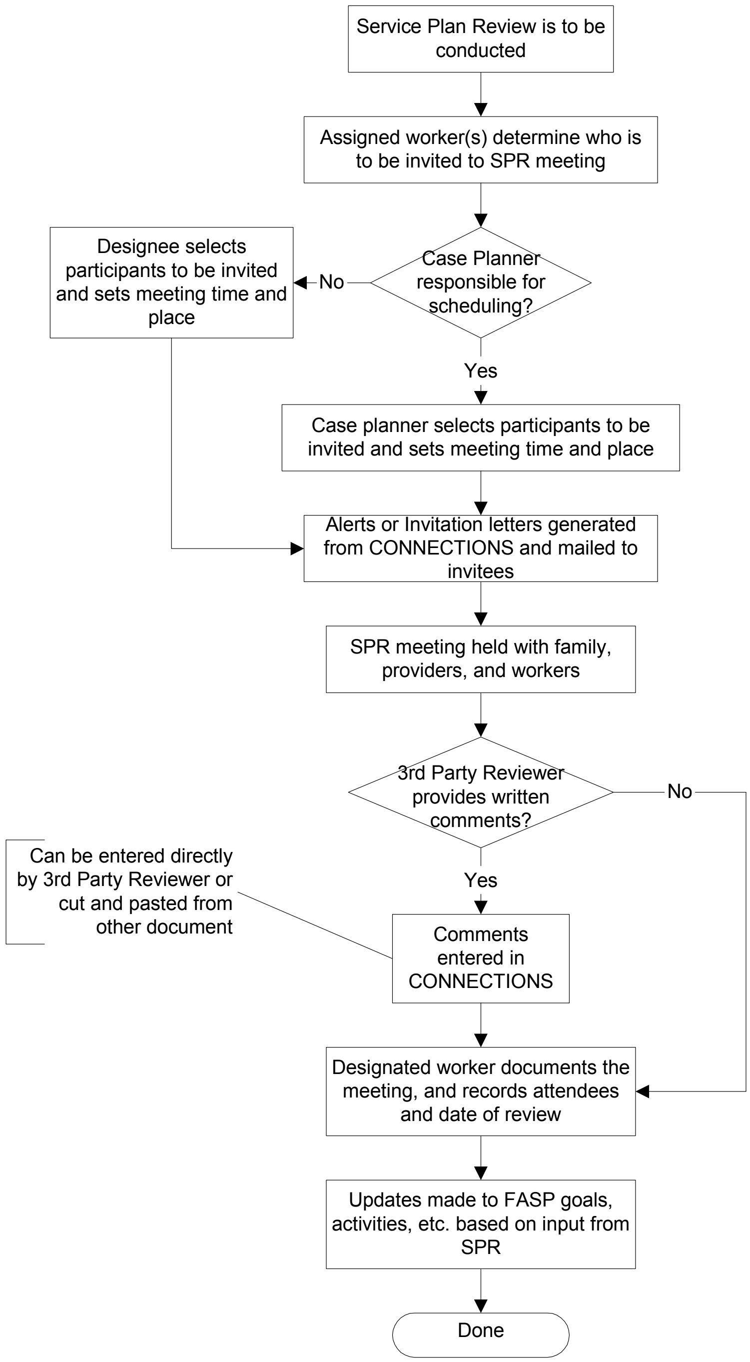
  Current practice indicates that in some cases, multiple Service Plan Reviews are being conducted for the same planning period by both district and agency workers. Consideration needs to be given toward coordinating these reviews so that the family can, when appropriate, attend one Service Plan Review to address the entire plan for the family. While multiple family meetings may be necessary and appropriate, a single service plan review, overseen by an independent third party reviewer supports effective, integrated plans. However, the system will accommodate the recording of multiple Service Plan Reviews for the same planning period.

- **WHO completes it?**
  Decisions will need to be made regarding who is responsible to schedule and document the Service Plan Reviews through CONNECTIONS. Clerical workers can be given security access to schedule conferences and record the Service Plan Review information. Also, any assigned workers can complete the scheduling and documenting of the Service Plan Review. Will the person designated to schedule the Reviews also be responsible for updating or verifying the names and addresses of the invitees or will that responsibility be given to the case planner?

  Procedures will need to be developed around who is responsible for recording comments from the Service Plan Reviews. Will it be the case planner or other assigned workers?

  Decisions will need to be made regarding the documentation of the Third Party Reviewer's comments. If the Third Party Reviewer is a CONNECTIONS user, they can enter information directly into the Service Plan Review tab when given security access. If the Reviewer is not a CONNECTIONS user, decisions will need to be made regarding whose responsibility it is to enter the comments documented elsewhere by the Reviewer.

- **HOW does it get done?**
  The designated user assigned to schedule the SPR's can go into the CONNECTIONS case and select the invitees, enter the meeting date, time, and location and generate the letters of invitation for the Reviews. After the Review is held, a designated worker can also document the comments from the Reviews and enter comments from the Third Party Reviewer if that Reviewer does not enter comments directly into CONNECTIONS. CONNECTIONS will keep a history of all Service Plan Reviews held in the case and recording of actual attendees at each Review can also be entered in the system.




**SAMPLE PROCESS**

**Service Plan Reviews**

## Documenting Changes that occur in the Case

### Questions and Considerations

- **WHAT process is to be done?**
  A Plan Amendment will be used to record status changes that occur between Family Assessment and Service Plans (FASP). These will be completed in CONNECTIONS by adding a Plan Amendment that is linked to an approved FASP. If changes occur while a FASP is being completed or in close proximity to when one is due, the changes are to be documented within the FASP.

- **WHEN should it be done?**
  Plan Amendments should be completed for required status changes following the current rules with two exceptions: 1). If a FASP is in progress or due to be launched (started), then a Plan Amendment cannot be done and these changes are to be documented in the FASP; 2). If the status change is "Case Open for Protective Services", the change must be recorded within 7 days. (All other status changes should be recorded within 30 days of the status change, unless it is being documented within the in-process FASP.

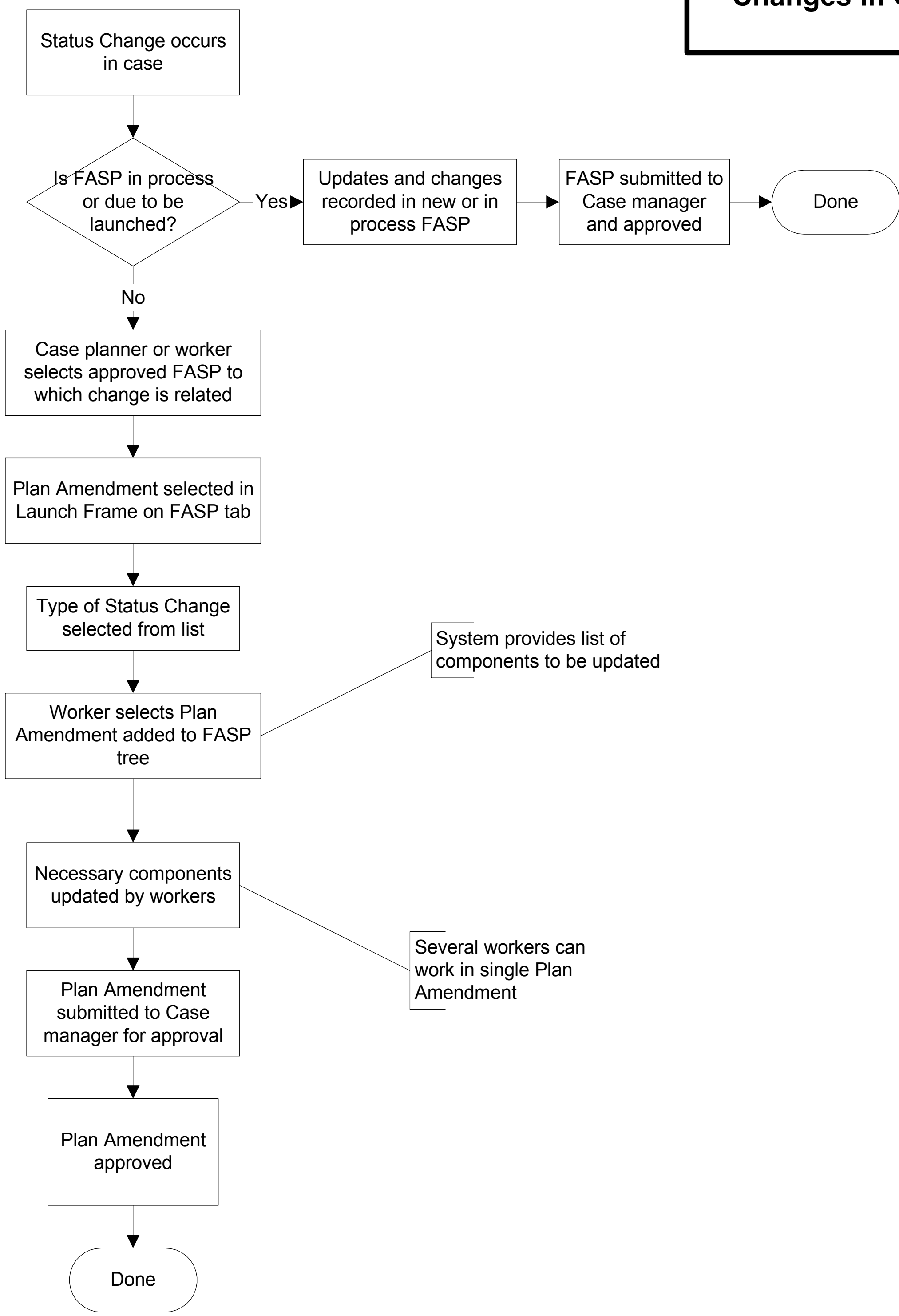
- **WHO completes it?**
  The Case Planner or Case workers in the case can complete a Plan Amendment. Multiple workers can work within a single Plan Amendment. The Plan Amendment is submitted to the Case Manager for approval.

  Consideration should be given regarding which worker is expected to complete a Plan Amendment. Coordination by the case planner is important to make sure all status changes are recorded in the system.

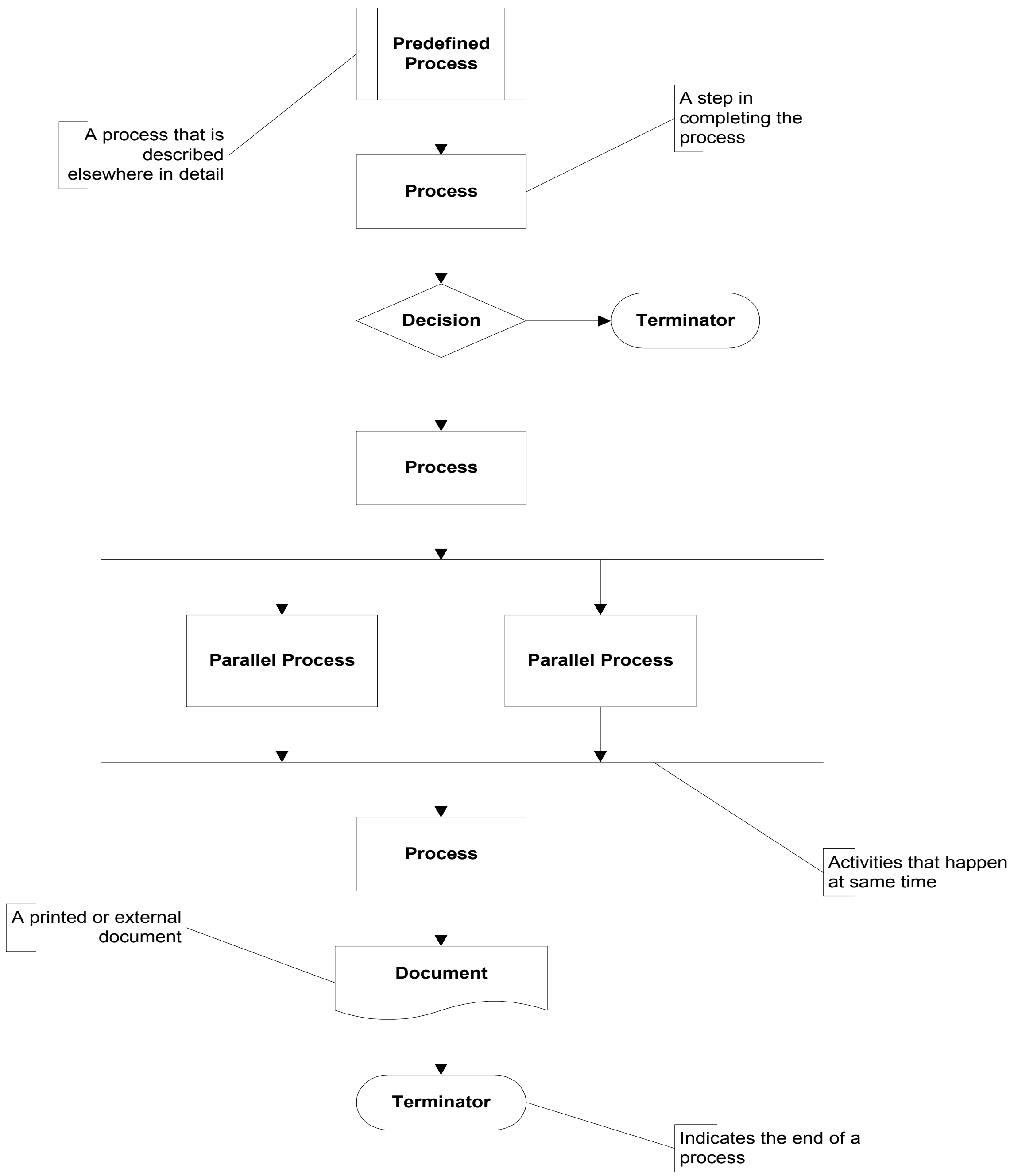
- **HOW does it get done?**
  In CONNECTIONS, an assigned worker selects an approved FASP from the list on the FASP tree. That worker launches a Plan Amendment. A selection of the type of status change is made. Then the worker or workers complete the necessary components as presented under the Plan Amendment on the FASP tree.

**SAMPLE PROCESS**

**Documenting Status Changes in Case**



# APPENDIX A



Predefined Process
A process that is described elsewhere in detail
A step in completing the process
Process
Decision
Terminator
Process
Parallel Process
Parallel Process
Process
Activities that happen at same time
A printed or external document
Document
Terminator
Indicates the end of a process

Appendix B:
Implementation Tools for Build 18
As of 8/20/04

1. Impact Analyses:
    a. Documenting Intake-final
    b. Documenting Information and Referral Inquiries-final
    c. Electronic Case Record-final
    d. Family Assessment and Service Plan (FASP) – Part I-final
    e. Family Assessment and Service Plan (FASP) – Part II-final
    f. Family Assessment and Service Plan (FASP) – Part III-final
    g. Plan Amendment-final
    h. Service Plan Review-final
    i. Progress Notes-final
    j. Non-LDSS Custody Cases-final
    k. Interface between CONNECTIONS and WMS-final
    l. Child Case Record-final
    m. Handling Cases During Phased Implementation-final
    n. Non-Child Welfare Services Case Types-final, not yet distributed
    o. Advocates Preventive (NYC only)-final, distributed to NYC; not on website
    p. DRS children (under development).

2. UCR vs. CONNECTIONS FASP

3. FASP Rules

4. Frequently Asked Questions

5. CONNECTIONS Build 18 prototype

6. CONNECTIONS Screen Shots: all or with explanation (CDHS presentation)—

7. Advantages of Data Clean-up

8. Generic Data Clean-up Plan

9. Multiple Person Report-Instructions

10. Milestone Chart (history of a site)

11. Self-Assessment

12. BPR Manual

13. District/Agency profile

14. Issues Briefs:

    a. WMS Case Number required
    b. Local Options

15. Implementation Coordinator Guide

16. Resource Guide for Managers