



Case Management Quality Review System

It is important to ensure that all clients receive quality case management and equal services. The group works as a team and each case manager is available to provide support or assistance to the other case managers in the collaborative regardless of agency affiliation. A targeted case management (TCM) audit is used to ensure the quality of case management services (attached form).

The use of the monthly progress report is a tool used in the tracking of case management services and data entry. The lead agency provides support staff to facilitate the data entry process, DCAR system trouble-shooting, as an added resource to follow-up on client participation or research outside programs/services for referrals.

These are the listed responsibilities and rules that each of the case manager follows.

- To coordinate, manage and supervise the programs and activities of a centralized case management system for clients;
- To coordinate these activities with an interdisciplinary team consisting of multiple agencies; to formulate inter-local collaborative contracts with all agencies involved in the centralized case management process;
- Manage and participate in the development and implementation of goals, objectives, policies, priorities and standardized forms for the centralized case management system; recommend and administer policies and procedures.
- Plan, direct and coordinate activities necessary to centralize case management across multiple agencies with multiple disciplines.
- Manage and participate in the development and administration of the centralized case management program.
- Evaluate effectiveness of centralized case management system including services provided and client outcomes.
- Establish positive working relationships with related community agencies; provide guidance and support to agencies related to the standards of the model; attend and participate in agency and community based meetings.
- Maintain accurate records of client contact, staff activities, client service outcomes, and additional plans.
- Respond to and resolve difficult and sensitive client inquiries and complaints.
- Respond to and resolve agency complaints.
- Assistance and support for clients with GDM and/or Type II Diabetes

**Best Babies Collaborative
Case Management AUDIT OF CLIENT CHART**

Client Name:	Client DOB:
Client Social Security Number:	Client Medi-Cal Number:
Date of Client encounter:	Case Manager:
Date of Audit:	Auditor:

AUDIT AREA	Yes	No	Comments
Encounter Specific Criteria			
1. Client Name is the same on all data entry forms, client chart and Family Information Sheet			
2. Client SS# or Medi-Cal # is the same on eligibility form, client chart and Family Information Sheet			
3. Encounter Type is face-to-face			
4. Chart Review Form indicates follow-up within 30 days. (if applicable)			
5. Case Manager Progress Note reflects			
Individual Service Plan/Assessment Specific Criteria			
1. Target Population identified on eligibility form			
2. Risk factor identified on eligibility form			
3. Needs Assessment Form completed initially and every 6 months Periodic Review a. At least every six months. b. Approved by Case Manager supervisor at minimum of 6 months. N/A - Case Closed in less than six months.			
4. Duplication of services or collaborative plan documented			
5. Supervisor signature or Case Manager/Team leader for initial service plan is within 30 days			
7. Individual Services Plan reflects current identified needs			
8. Case Manager notes document interventions related to identified needs			

Comments: _____

