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ABSTRACT

This 60-item annotated bibliography focuses on case management as it relates to welfare, Medicaid, and/or the Family Support Act of 1988. While specific definitions, types of practice, and goals of case management vary greatly, the term here refers to a strategy of coordinating or integrating services for a client or group of clients in the social services and/or health arenas, e.g., maternal and child health, family support, and early childhood care and education. Section 1, "Overviews of Case Management," includes general discussions. Section 2, "Medicaid and Case Management," reflects the "managed care" or "gatekeeper" model of case management, stressing primary care and control of utilization and costs. Section 3, "Welfare Reform and Case Management," includes some of the newest perspectives on case management as a strategy for helping families become independent of welfare. Section 4, "Other Applications of Case Management," includes miscellaneous applications of case management to a variety of social and health services. All materials listed in this bibliography were published during or after 1985. Complete price and ordering information appears whenever available and appropriate. All of the publications are available to the public at the library of the National Center for Children in Poverty (New York, New York).
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NATIONAL CENTER FOR CHILDREN IN POVERTY

Annotated Bibliography II (JUNE 1990)

ED333057

CASE MANAGEMENT IN WELFARE AND MEDICAID PROGRAMS: AN ANNOTATED BIBLIOGRAPHY

compiled by:

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INTRODUCTION

The goals of the National Center for Children in Poverty are to develop and strengthen programs and policies for children under six who live in poverty, and to heighten awareness of the needs and opportunities for early intervention for poor families and their children in terms of maternal and child health, family support, and early childhood care and education.

The first bibliography published by the Center is **Young Children in Poverty: An Annotated Bibliography of Books and Reports**. It lists about 150 publications on young children and their families in poverty, and on social welfare policies and prevention programs designed to assist them. Individual copies are available from the Center for a \$3 postage and handling charge.

This second bibliography, **Case Management in Welfare and Medicaid Programs: An Annotated Bibliography**, was originally prepared for dissemination at a "Technical Assistance Seminar on Implementation of the Family Support Act" in Nashville, Tennessee, on May 14-16, 1990. The seminar was one of a series sponsored by a consortium of the National Governors' Association (NGA), American Public Welfare Association (APWA), National Association of Counties (NACo), and Council of Chief State School Officers (CCSSO). The Center subsequently decided to publish this bibliography for professionals and students interested in case management.

While specific definitions, types of practice, and goals of case management vary greatly, the term here refers to a strategy of coordinating or integrating services for a client or group of clients in the social services and/or health arenas. The materials focus on case management as it relates to welfare, Medicaid, and/or the Family Support Act of 1988 (also known as welfare reform).

Overviews of case management appear first in this bibliography. A section follows on Medicaid and case management. Many of the listings in this second section reflect the "managed care" or "gatekeeper" model of case management, stressing primary care and control of utilization and costs. The third section, on welfare reform, incorporates some of the newest thinking about case management, exploring it as a strategy to help families become financially independent of welfare. Finally, a fourth section includes miscellaneous applications of case management to a variety of social and health services.

CONTENTS

- I. **Overviews of Case Management**
- II. **Medicaid and Case Management**
- III. **Welfare Reform and Case Management**
- IV. **Other Applications of Case Management**

All materials listed in this bibliography were published during or after 1985. For professionals interested in materials on case management prior to 1985, there are many references to earlier articles and reports in the bibliographies of the citations listed here.

The Center is interested in learning about other relevant materials our readers might know of—especially concerning the relationship between case management and welfare reform—that can be added to this bibliography when it is revised. If you can bring any such materials to our attention, please contact Leigh Hallingby, Head Librarian, at the Center by telephone or by mail.

We provide information about how to obtain each of the citations listed. Complete price and ordering information appears whenever it is available and appropriate. Some of the documents are distributed by the Center, and they are priced at \$.25/page to cover costs of photocopying, postage, and handling. All of the publications in the bibliography are in the library of the National Center for Children in Poverty. The library is open to the public Monday through Friday from 9 a.m. to 5 p.m. except for holidays. To make an appointment, contact Leigh Hallingby at (212) 927-8793.

Individual copies of **Case Management in Welfare and Medicaid Programs: An Annotated Bibliography** may be ordered from the National Center for Children in Poverty. There is a \$3 postage and handling charge for each copy. If copies are needed in bulk, a reduction can be negotiated. When ordering, write checks out to Columbia University. (We also grant permission for photocopying the document.)

I. OVERVIEWS OF CASE MANAGEMENT

Ballew, Julius R.; Mink, George

Case management in the human services

This overview of case management contains chapters on engaging clients, assessing resources and impediments, goal planning, accessing resources, coordinating, disengaging, and providing agency support. Each chapter includes practice issues and practice methods. (1986, 328 pp.; \$44.50 including postage and handling)

Charles C Thomas, 2600 South First Street, Springfield, IL 62717; (217) 789-8980

Blazyk, Stan; Crawford, Carla; Wimberley, Edward T.

The ombudsman and the case manager

The authors look at the advocacy role of ombudsmen and case managers in the human service system, distinguishing between the two roles when possible. They conclude that there are almost as many models for the two roles as there are programs utilizing them.

Social Work, September-October 1987, 32(5): 451-453

Center for Human Resources, Brandeis University

About case management

This article summarizes what the Center for Human Resources has learned about case management based on reading the published literature and discussing the subject with practitioners. It covers why case management is needed, how to make case management work, and the case manager's role.

Youth Programs, Fall 1988: 2-7, 15. Published by: Center for Human Resources, The Heller School, Brandeis University, 60 Turner Street, P.O. Box 9110, Waltham, MA 02254; (800) 343-4705

Kamerman, Sheila B.; Kahn, Alfred J.

Social services for children, youth, and families in the United States

This document is a special issue of *Children and Youth Services Review* (Volume 12, Numbers 1/2, 1990). It reports on a two-year study (funded by the Annie E. Casey Foundation) of alternative state and county approaches to delivering social services to children, youth, and their families. A section on case management (pp. 115-120) describes it as a strategy that has come to dominate many new

developments in social service delivery. Examples portray case management as the primary staff role of social service workers and as a device for accountability. (1990, 184 pp.; \$30 including postage and handling)

Pergamon Press, Maxwell House, Fairview Park, Elmsford, NY 10523; (914) 592-7710

Kenyon, V. Sheffield

Case management

This document, written by the Assistant Deputy Secretary for Programs in the Department of Health and Rehabilitative Services in Florida, presents a definition of case management and information about quantity and quality of staff, automated information systems to support case management, case management for clients with complex problems, and alternative strategies to improve case management. (1988, 9 pp.)

Photocopy available for \$2.25 from: National Center for Children in Poverty, Columbia University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Moxley, David P.

The practice of case management

This is a guide for human service professionals learning about case management. It reviews how to assess the needs of the client, how to help the client contact appropriate institutions and services, how to monitor the quality of services provided, and how to take action when the client's needs are not fulfilled. It also considers the therapeutic role required when specific needs are not met because of the client's problems. (1989, 155 pp.; \$12.95)

Sage Publications, P.O. Box 5084, Newbury Park, CA 91359; (805) 499-0721

O'Connor, Gerald G.

Case management: System and practice

This article presents case management as a complex system of interrelated functions performed by personnel at various occupational levels in the service delivery system. The framework identifies five service-personnel levels, specifying their respective case management responsibilities. The model provides a conceptual tool to assist practitioners in complex service delivery systems as they learn the case management process as a whole as well as the relationships among components of the system.

Social Casework: Journal of Contemporary Social Work, February 1988, 69(2): 97-106

Roberts-DeGennaro, Maria

Developing case management as a practice model

This overview article discusses case management functions, psychotherapy as a case management task, the systems approach to case management, and case management training. The author concludes that case management integrates aspects of all the traditional methods of social work practice: casework, group work, and community organization.

Social Casework: Journal of Contemporary Social Work, October 1987, 68(10). 466-470

University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Technical Assistance and Planning, Associates

Redefining case management

This article describes how a South Carolina task force, charged with designing an integrated case management system, arrived at a definition of case management.

TAP Insights, August 1988, 2(1): 1-2. *Publisher: Technical Assistance and Planning Associates, P.O. Box 98, Terry, MS 39170; (601) 878-2300*

Rubin, Allen

Case management

This encyclopedia entry defines case management as an approach to service delivery that attempts to ensure that clients with complex, multiple problems and disabilities receive all the services they need in a timely and appropriate manner. It discusses growth and aims, core functions, role issues and authority, status and training, caseload and supervision, and research and critical analysis. (1987, 11 pp.)

Encyclopedia of Social Work. Washington, DC: National Association of Social Workers, 1987, 18th ed., pp. 212-222

Weil, Marie; Karls, James M.; et al

Case management in human service practice: A systematic approach to mobilizing resources for clients

This book reviews the principles of effective case management; it shows how these principles can be applied in working with a variety of populations, including children, families, and the elderly; and it offers guidance on developing and implementing responsive case management systems that can be adapted for individual program needs. The authors demonstrate how case management can help contain costs, improve accountability, make better use of existing resources and services, encourage cooperation among service providers, enhance decision making, and eliminate the waste caused by duplicating services. (1988, 407 pp.; \$29.95 including postage and handling)

Jessey-Bass, 350 Sansome Street, San Francisco, CA 94104, (415) 433-1740

Stewart, Demis

Case management

This document was prepared for the Pennsylvania Services Integration Consortium and the Pennsylvania Association of Public Assistance Directors' Committee on Program Coordination. It covers several aspects of case management: rationale, definitions, possible linkages with other services, strategies for linking, and overcoming barriers. (1989, 7 pp.)

Photocopy available for \$1.75 from: National Center for Children in Poverty, Columbia University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Sussman, Richard A.

Case management working paper #1 for the Connecticut Commission on Children

This paper identifies and promotes public policy and coordinated efforts to improve children's development. It gives descriptions of case management, of the context for case management, of the case manager, of the client in the case management process, and of case management evaluation. (1988, 23 pp.)

Photocopy available for \$5.75 from: National Center for Children in Poverty, Columbia

Anderson, Maren D.; Fox, Peter D.

Lessons learned from Medicaid managed care approaches

Medicaid-managed care plans have proliferated since 1981. The four most common program types include HMOs, fee-for-service primary care case management, partially capitated primary care case management, and health insuring organizations. Examples of these programs are given, with lessons learned from them and their limitations.

Health Affairs, Spring 1987, 6(1): 71-86

II. MEDICAID AND CASE MANAGEMENT

Buescher, Paul A.; Smith, Clinton; Holliday, Joseph L.; Levine, Ronald H.

Source of prenatal care and infant birth weight: The case of a North Carolina county

Women receiving prenatal care, including case management services, through a large county public health department prenatal program, were compared to pregnant Medicaid-eligible women receiving prenatal care primarily from private practice physicians in the county. Low birthweight occurred in 8.3 percent of the health department women and 19.3 percent of the Medicaid women. After differences between the two groups were statistically controlled, the chance of a Medicaid woman having a low birthweight baby remained twice as great. Case management and a greater use of ancillary services appeared to improve birthweight outcomes in the health department.

American Journal of Obstetrics and Gynecology, January 1987, 156(1): 204-210

Capitman, John A.; Haskins, Brenda; Bernstein, Judith
Case management approaches in coordinated community-oriented long-term care demonstrations

The primary focus here is on the characteristics of case management programs in 12 Medicaid and Medicare demonstration projects. The project evaluations, sponsored by the Health Care Financing Administration (HCFA), tested whether various methods of coordinated community-oriented delivery of health and social services produced more cost-effective use of both institutional and noninstitutional long-term care resources. Case management and the use of cost "caps" emerged as techniques for gaining greater control over public-supported service use. Some of the ingredients for design of successful case management programs are suggested.

Gerontologist, August 1986, 26(4): 398-404

Freund, Deborah A.; Hurley, Robert E.

Managed care in Medicaid: Selected issues in program origins, design, and research

The authors describe a set of initiatives known in the Medicaid program as managed care, case management, or "gatekeeping." They discuss how these approaches are being evaluated, and they describe both the environment that has fostered alternative delivery methods and the legislative and executive activities that have enabled experimentation. They detail the theoretical foundations for these programs and

the characteristics of a group of them, including evaluation designs.

Annual Review of Public Health, 1987, 8: 137-163

Freund, Deborah A.; Neuschler, Edward

Overview of Medicaid capitation and case-management initiatives

The authors review the structure and incentives of case management programs, which have grown in number and acceptance in the Medicaid program since 1981. They describe problems with eligibility, enrollment, rate setting, and management information systems. They find that these programs have been difficult to implement in general, posing challenges for program managers and state administrators.

Health Care Financing Review, 1986 Annual Supplement: 21-30

Hill, Ian T.; Breyel, Janine

Coordinating prenatal care

This is one of a series of six NGA reports that explore state responses to various Medicaid options authorized since 1986 in several budget reconciliation acts. In response to these options, many states have shifted their view of case management from a cost containment strategy for utilization control to a process that better identifies needs and facilitates clients' access to diverse services. This report presents several states' development and implementation of "care coordination" programs—a term used to avoid the ambiguities of "case management"—aimed at improving the organization and delivery of prenatal services for Medicaid clients. (1989, 62 pp.; \$15)

National Governors' Association, 444 North Capitol Street, Suite 250, Washington, DC 20001-1572; (202) 624-5300

Hohlen, Mina M.; Manheim, Larry M.; Fleming,

Gretchen V.; Davidson, Stephen M.; Yudkowsky, Beth K.; Werner, Stephen M.; Wheatly, George

Access to office-based physicians under capitation reimbursement and Medicaid case management

This study describes and evaluates the Children's Medicaid Program in Suffolk County, NY, a voluntary Medicaid case management demonstration of the primary care office-based physicians provided to young children. The participating physicians were reimbursed at rates higher than the regular

Medicaid fee schedule, through either augmented fees for specific services or monthly capitation (i.e., per person) payments. All of the physicians agreed to act as case managers for the covered medical services. Children received more primary care from office-based physicians in the augmented fee-for-service program than children received in the regular Medicaid program. Children seeing physicians paid through capitation received the same amount of primary care.

Medical Care, January 1990, 28(1): 59-68

Hurley, Robert E.; Freund, Deborah A.

Determinants of provider selection or assignment in a mandatory case management program and their implications for utilization

Mandatory managed-care programs for Medicaid beneficiaries typically require enrollees to select the provider who will act as case manager. A substantial number of Medicaid recipients, however, do not exercise the choice and are assigned a case manager. Using consumer survey data from the Missouri Managed Health Care Project, the authors examined characteristics and health care utilization experiences of "assignees" compared to "selectors." They found that assignees enjoyed better health and were less likely to have had a regular source of care prior to the program. The utilization experience was similar for both groups.

Inquiry, Fall 1988, 25(3): 402-410

Hurley, Robert E.; Freund, Deborah A.; Taylor, Donald
Emergency room use and primary care case management: Evidence from four Medicaid demonstration programs

Claims-based utilization data collected in four Medicaid demonstration programs were used to examine the impact of primary care case management on patterns of reliance for services in the emergency room. The experience of stratified random samples of AFDC adults and children in the demonstration programs is compared with that of equivalent samples from comparison groups in traditional Medicaid programs. Results indicated large reductions in the proportion of people with at least one emergency room visit.

American Journal of Public Health, July 1989, 79(7): 843-846

Hurley, Robert E.; Freund, Deborah A.; Taylor, Donald
Gatekeeping the emergency department: Impact of a Medicaid primary care case management program

The Missouri Managed Health Care Project is one of the primary care case management programs known as Nationwide Medicaid Competition Demonstrations. Implemented in 1983, this project required all AFDC recipients to enroll in one of five prepaid health plans that were to manage virtually all Medicaid services except prescriptions and long-term care. The primary care case management plans were generally successful in reducing emergency room visits for their enrollees, as contrasted with nonenrollees in the comparison group.

Health Care Management Review, Spring 1989, 14(2): 63-71

Long, Stephen H.; Settle, Russell F.

An evaluation of Utah's primary care case management program for Medicaid recipients

By assigning Medicaid enrollees to specific providers responsible for arranging all non-emergency care, Utah intended both to improve access to primary care physicians and to reduce program costs. This study found that use of primary care physicians increased significantly, but that the use of specialists and of prescription drugs also increased. The use of hospital outpatient services was lowered. Case management achieved increased access, but it failed to achieve cost containment.

Medical Care, January 1988, 26(11) 1021-1032

Rosenbaum, Sarah; Hughes, Dana; Butler, Elizabeth; Howard, Deborah

Incantations in the dark: Medicaid, managed care, and maternity care

This study analyzed contracts between state Medicaid agencies and individual managed-care plans and included interviews with Medicaid agency officials, plan officials, and local health personnel working in communities served by managed-care plans. The authors state that most current Medicaid managed-care plans do not include structural improvements in maternity components such as early, stable, and continuous enrollment; expansion of benefits to include preventive health and patient support services; and extensive utilization of community-based providers skilled in caring for low-income patients and trained in the management of people with medical and social risks. Instead, most Medicaid managed-care plans are placed over existing delivery systems, possibly exacerbating pre-existing problems.

Milbank Quarterly, 1988, 66(4): 661-693

Spitz, Bruce

A national survey of Medicaid case-management programs

This article reports on a national survey of the Health Policy Center of Brandeis University and the Intergovernmental Health Policy Center of George Washington University to discover whether definitional, procedural, and policy questions about case management were being resolved in the implementation of Medicaid case management programs. The author concluded that case management seems to be an ill-defined process.

Health Affairs, Spring 1987, 6(1): 61-70

Spitz, Bruce; Abramson, John

Competition, capitation, and case management: Barriers to strategic reform

Political support for competition, capitation, and case management in health services has come from successive U.S. congresses and presidents. Benefits attributed to these organizational/financing strategies are consistent with society's preference for a private market approach. However, effective public policy or programs have not followed. The systematic barriers to implementing alternative delivery systems are examined in the context of Medicaid, and are found to be significant but not intractable.

Milbank Quarterly, 1987, 65(3): 318-370

III. WELFARE REFORM AND CASE MANAGEMENT

American Public Welfare Association

Case management and welfare reform

The APWA sees case management as key to accomplishing the self-sufficiency goals of welfare reform. This document describes what the implementation of case management systems will mean for public welfare agencies. It describes the context and elements of case management systems and outlines models.

W-Memo, July 31, 1987, Memorandum W-7, 1-15. Publisher American Public Welfare Association, 810 First Street, NE, Suite 500, Washington, DC 20002-4205; (202) 682-0100

American Public Welfare Association and National Council of State Human Service Administrators

One child in four: Investing in poor children and their families: A matter of commitment

This document reports on the Matter of Commitment Steering Committee's recommendations for welfare reform strategies to reduce poverty among children and their families. Pages 24-25 discuss case management as a way to implement the client-agency contract aimed at promoting client self-sufficiency. Case management human services programs in Oklahoma and Pennsylvania are described.

(undated, ca. 1986, 32 pp.; \$6)

American Public Welfare Association, 810 First Street, NE, Suite 500, Washington, DC 20002-4205; (202) 682-0100

Department of Public Welfare, Commonwealth of Massachusetts

Case management agreement and application

This is the Massachusetts application for Aid for Dependent Children (AFDC), Food Stamps, Medicaid, Employment and Training (ET), child support enforcement, Health Choices, and Housing Choices. (undated; not paginated)

Department of Public Welfare, Commonwealth of Massachusetts, 180 Tremont Street, Boston, MA 02111; (800) 841-2900

Department of Public Welfare, Commonwealth of Massachusetts

Case management guide

Case management in Massachusetts integrates eligibility for benefits with the following services: Employment and Training (ET), child support, health, and housing. An individualized Family Independence Plan is developed with each client. This guide spells out the roles and responsibilities of the case manager, other staff, and supervisors in creating and carrying out the Family Independence Plan. (1987, 30 pp.)

Department of Public Welfare, Commonwealth of Massachusetts, 180 Tremont Street, Boston, MA 02111; (800) 841-2900

Doolittle, Fred; Riccio, James

Case management in welfare employment programs

This paper was prepared for an April 1990 conference entitled "Evaluation Design for Welfare and Training Programs." In it the authors describe how the functions of case management systems in several social service settings have been adapted to welfare employment programs. They consider various options: with the welfare agency providing case management or subcontracting it to an outside agency; dividing case management duties into specialized tasks performed by multiple staff or

combining them into a single role; and setting different client-to-staff ratios and staff qualifications for case manager positions. They discuss a performance evaluation system and incentives for case managers, and they summarize the implications of case management practices for conducting research on welfare employment programs. (1990, 43 pp.)

Photocopy available for \$10.75 from: National Center for Children in Poverty, Columbia University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Golden, Olivia; Skinner, Mary; Baker, Ruth, Clark, William

Welfare reform and poor children: An interim report

This background paper, prepared for the Foundation for Child Development Research Forum on Children and the Family Support Act, offers insights from a study at the Center for Social Policy at the Kennedy School of Government at Harvard University. The project explores the question: How might states implement the Family Support Act, and its assessment and case management provisions, in a way that will meet both children's and adult needs? Findings here are based on completion of three of six site visits, each of which includes interviews with welfare department eligibility workers, caseworkers, project administrators, and clients. (1989, 51 pp.)

Photocopy available for \$12.75 from: National Center for Children in Poverty, Columbia University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Hoskins, Joan V.

Strategies for self-sufficiency: Welfare reform for Denver: Denver Family Opportunity Program

The case management aspects of the Denver Family Opportunity Program are described as well as case management models in Virginia, Utah, Massachusetts, Washington, and California. Appendix A is an 18-page paper by Mark Levy entitled "Denver Welfare Reform Project: Phase I: Case management and service coordination as a first step." (1987, 42 pp.)

Photocopy available for \$10.50 from: National Center for Children in Poverty, Columbia University, 154 Haven Avenue, New York, NY 10032; (212) 927-8793

Hoskins, Joan V.; Orrben, Jeanne M.; Schweigert, Charles; Magill, Geraldine
The Denver Family Opportunity Program case management manual

This is a blueprint for case managers to use to assist participants in the DFO/JOBS Program in achieving self-sufficiency through employment. It includes information on case management in general, intake, employability plan development and implementation, termination and/or transfer, and caseload coordination. There are 62 attachments related to program content and administration. (1990, 59 pp + attachments; \$10)

Jeanne M. Orrben, Denver Family Opportunity Program, 2200 West Alameda, Denver, CO 80223; (303) 727-2874

Levitan, Sar; Mangum, Garth L.; Pines, Marion W.

A proper inheritance: Investing in the self-sufficiency of poor families

The authors propose a "family investment initiative" for poor families, especially those headed by single women with children. Families would no longer apply for assistance to separate agencies but would go to a family investment center where a trained case manager (called a "family investment manager") would analyze obstacles to self-sufficiency, put together a package of services, negotiate a social contract with each member of the family, assign resources to family members, and follow up on the family's progress. (1989, 59 pp.; no charge with 9" x 12" self-addressed envelope stamped with \$2.05)

Center for Social Policy Studies, George Washington University, 1730 K Street, NW, Washington, DC 20006; (202) 833-2530

Olson, Lynn M.; Herr, Toby

Building opportunity for disadvantaged young families:

The Project Match experience

Project Match, located in the Cabrini-Green public housing projects in Chicago, develops and tests ways to help disadvantaged women and men return to school, obtain vocational training, and find and keep jobs. Pages 17 through 22 describe intra-agency and inter-agency case management and discuss their use in Project Match. (1989, 42 pp. + appendices; \$4 including postage and handling)

Center for Urban Affairs and Policy Research, Northwestern University, 2040 Sheridan Road, Evanston, IL 60208-4100; (708) 491-3395

Pillsbury, Jolie Bain

**Reform at the state level:
In Massachusetts eligibility workers
have become case managers**

One possible model for states, as they begin implementing employment and training programs in compliance with the Family Support Act of 1988, is the case management system developed in Massachusetts for the state's Employment and Training (ET) Program. In that program a range of services are integrated with benefit eligibility processes through a Family Independence Plan initiated during the client's intake process. This article describes the Massachusetts ET program and its case management system.

Public Welfare, Spring 1989, 47(2): 8-14

Technical Assistance and Planning Associates

**Case management and welfare reform:
The North Carolina proposal**

This concept paper focuses on case management's potential to bring many families out of poverty. Case managers would be responsible for gathering all the resources for getting clients into jobs and off welfare.

TAP Insights, Aug. 1988, 2(1): 3. Publisher: Technical Assistance and Planning Associates, P.O. Box 98, Terry, MS 39170; (601) 878-2300

U.S. General Accounting Office

**Welfare reform: Bibliographies of
case management and
agency/client contracting**

These bibliographies were developed in response to a request from the Senate Committee on Governmental Affairs for use in considering proposed welfare reform legislation. They identify 109 citations on case management as applied to the social service field, and 9 citations on agency/client contracting. The bibliographies were compiled by searching computerized databases in the sociology and welfare areas. (1988, 53 pp.; first 5 copies free)

U.S. General Accounting Office, P.O. Box 6015, Gaithersburg, MD 20877; (202) 275-6241. Report number: GAO/HRD-88-61FS.

Wallace, John; Long, David; Martinson, Karin

**The Greater Avenues for Independence
(GAIN) Program: Planning and early
implementation**

GAIN is a California employment initiative designed to reduce welfare dependency. Counties participating cite case management as critical for linking participants to services,

monitoring their participation, and providing assistance when barriers exist. Counties assign various responsibilities to case managers, and the average number of GAIN clients in a case manager's caseload ranges from 45 to 200. (1987, 224 pp.; \$12 including postage and handling; \$2.50 for executive summary only) *Manpower Demonstration Research Corporation, 3 Park Avenue, New York, NY 10016; (212) 532-3200*

IV. OTHER APPLICATIONS OF CASE MANAGEMENT

Aaronson, May

The case manager home visitor

Public Law 99-457, Part II—the Education of the Handicapped Act—recognizes the importance of case managers. It states that each Individualized Family Service Plan will list the name of a case manager from a profession most relevant to the family's needs. This article suggests combining the roles of case management with those of home visiting for families with disabled infants and toddlers

Child Welfare, May-June 1989, 68(3): 339-346

Billig, Nancy Swire; Levinson, Catherine

**Homelessness and case management in
Montgomery County, Maryland: A focus on
chronic mental illness**

In January 1986 the Mental Health Association of Montgomery County, Maryland, expanded its Case Management Program to five shelters to serve homeless people with chronic mental illness. The Shelter Outreach Case Management Program includes assessment, goal setting, linkage, monitoring, and advocacy. The model shows that relationship building is the most significant factor in preparing clients to accept services. With a consistent and flexible approach, movement and change are possible with these clients.

Psychosocial Rehabilitation Journal, July 1987, 11(1): 59-66

Brindis, Claire; Barth, Richard P.; Loomis, Amy B.

**Continuous counseling: Case management
with teenage parents**

The Family Service Agency of San Francisco and the San Francisco Unified School District coordinate the Teenage Pregnancy and

Parenting (TAPP) Project that employs "continuous counselors." This is a term coined to describe social workers and the longevity of their relationships with clients in helping them plan, enroll, and participate in community service systems and programs. The article describes the tasks of continuous counselors, their contributions and barriers to successful case management, and their role in implementing comprehensive teen parent programs.

Social Casework: Journal of Contemporary Social Work, March 1987, 68(3): 164-172

Center for Human Resources, Brandeis University

The BEEP collaborative: A case management partnership for court-involved youth

The Boston Education and Employment Program (BEEP) is a case management partnership linking youthful offenders with employment, education, and other support services. This interview with BEEP initiator Leo Delaney reviews considerations that led to the use of case management, how agencies were brought together, and what problems were confronted.

Youth Programs, Fall 1988: 8-13, 15. Publisher: Center for Human Resources, The Heller School, Brandeis University, 60 Turner Street, P.O. Box 9110, Waltham, MA 02254; (800) 343-4705

Center for Human Resources, Brandeis University

A guide to case management for at-risk youth

This manual addresses the most common questions about case management asked by employment and training administrators and practitioners working with at-risk youth. It covers relationship building; case management components, skills, and systems; public and operational agreements; governance models; and partnerships. (1989, 103 pp.; \$17 including postage and handling)

Center for Human Resources, The Heller School, Brandeis University, 60 Turner Street, P.O. Box 9110, Waltham, MA 02254; (800) 343-4705

Center for the Study of Social Policy

New Futures: Plans for assisting at-risk youth in five cities

This document describes the New Futures initiatives with at-risk youth in five cities. The goals are to reduce dropouts, enhance academic achievement, diminish teen pregnancy, and promote post-secondary education and employment. A key strategy of this program, funded by the Annie E. Casey Foundation, is case management—aimed at creating

"collective institutional responsibility" by linking people who control social service systems with the needs and problems of at-risk children. The cities are Dayton, Ohio; Lawrence, Massachusetts; Little Rock, Arkansas; Pittsburgh, Pennsylvania; and Savannah, Georgia. (1989, 380 pp.; no charge)

Center for the Study of Social Policy, 1250 Eye Street, NW, Washington, DC 20005; (202) 371-1565

Franklin, Jack L.; Solovitz, Brenda; Mason, Mark; Clemons, Jimmie R.; Miller, Gary

An evaluation of case management

This article explores the efficiency and effectiveness of case management as compared to the usual and customary services available to chronic mentally ill individuals in reducing readmissions to mental hospitals and improving the quality of life. Individuals with at least two discharges from a mental hospital were assigned at random either to an experimental group to receive case management services or to a control group to receive any services except case management. Results showed that after project participation for 12 months, the experimental group received more services, cost more, and were admitted to mental hospitals more often. Improvements in quality of life indicators were not evident. The authors present alternative explanations for the results.

American Journal of Public Health, June 1987, 77(6): 674-678

Kane, Rosalie A.

Case management: Ethical pitfalls on the road to high-quality managed care

The purpose of case management for the elderly in long-term care is to assist particular clients in getting a wide range of necessary services and to assure an appropriate and equitable distribution of services for all clients. The tension between advocacy and "gatekeeping" causes ethical dilemmas, as does the tension between promoting client autonomy and acting for the client's good. The nature of informed consent and the definition of competent practice are also explored.

Quality Review Bulletin, May 1988, 14(5): 161-166

Korenbrodt, Carol C.; Showstack, Jonathan; Loomis, Amy; Brindis, Claire

Birth weight outcomes in a teenage pregnancy case management project

In this prospective study, information was gathered on 411 mothers in the Teenage

Pregnancy and Parenting (TAPP) Program. The program included case management and agency-level coordination of health, education, psychosocial, and nutrition services. The low birthweight rate for TAPP participants was significantly lower than the pre-program rate for San Francisco teens prior to the establishment of the program. Also, better health outcomes were achieved for the babies of the teens who had case management.

Journal of Adolescent Health Care,
March 1989, 10(2): 97-104

Loomis, Amy; Brindis, Claire

A public-private partnership for school dropout prevention of pregnant and parenting teens: Teenage Pregnancy and Parenting Program of San Francisco

This is a case management manual for school districts who are developing comprehensive approaches to prevent pregnant and parenting teens from dropping out of school. The manual describes the Teenage Pregnancy and Parenting (TAPP) Program at both student and systems levels, and discusses ways to replicate this design. The TAPP model is based on "continuous case management," carried out by a "continuous counselor" who guides clients through available services, maintains an on-going relationship with them, conducts needs assessments, facilitates outreach, develops case plans, and matches them with a variety of services. (1987, 60 pp. + appendices; \$13)
Teenage Pregnancy and Parenting Project,
1325 Florida Street, San Francisco, CA 94110;
(415) 648-8810

McAnally, Patricia L.; Linz, Mary Hubbard

**Minnesota Case Management Study:
Project report number 88-2**

This study is based on extensive data from 770 county case managers, supervisors, consumers, and service providers serving people with developmental disabilities. It describes the education and background of human services personnel; staffing patterns; caseloads, case management functions and time allocation; cooperative work among agencies; evaluation; barriers to service delivery; gaps and duplication in services; perceptions of case management effectiveness in schools, public health, and county agencies; and factors and strategies that add to effective case management; and it makes recommendations. (1988, 333 pp.; \$15)
Minnesota University Affiliated Program on Developmental Disabilities, University of Minnesota, 6 Pattee Hall, 150 Pillsbury Drive,

SE, Minneapolis, MN 55455 or
ERIC Document Reproduction Service, 1-800-
227-3742. Document number: ED 305 778.
ERIC price: ca. \$26

Schumacher, Michael A.

Implementation of a client classification and case management system:

A practitioner's view

Orange County, California, as well as other counties in the state, is implementing the National Institute of Corrections (NIC) Model Probation Client Classification and Case Management System. The system integrates risk assessment, needs assessment, a case planning and implementation component, workload measurement, and precise data collection. This article describes the system, the implementation process, problems, and accomplishments.
Crime and Delinquency, July 1985, 31(3):
445-455

Sonsel, George E.; Paradise, Frank; Stroup, Stephen

Case management practice in an AIDS service organization

The Client Services Division within the AIDS Project Los Angeles (APLA) implemented a case management program in 1986 embodying elements of advocacy, continuity of care, and cost containment. Here social workers are the primary case managers, with volunteer groups serving as "extenders" in maintaining client contact, assessing clients' on-going needs, conducting intake interviews, and providing medical transportation. An information management system is being developed to assist the case management program in performing tasks more efficiently and accurately.

Social Casework: Journal of Contemporary Social Work, June 1988, 69(6): 388-392

Texas State Department of Human Resources

Child Protective Services case management project. Final report: Innovations in Protective Services

This document reports on a model of case management that clarifies what is expected from Child Protective Services (CPS) specialists. By conducting a literature review, studying the role of the CPS case manager, and developing a case management model, the Case Management Project attempted to eliminate misunderstanding of the CPS caseworkers' role. (1985, 88 pp.; \$9.90 including postage and handling)
ERIC Document Reproduction Service, 1-800-
227-3742. Document number: ED 264 000

Tobis, David; Greenblatt, Sarah B.

**Intensive Case Management Services:
Program description**

This document describes a case management program designed to provide personalized, comprehensive assistance to vulnerable families during the first few months of transition from an emergency shelter system to permanent housing. The Edna McConnell Clark Foundation is funding up to five agencies to provide this service to a total of 200 families in New York City. (1990, 8 pp.)

*Center for the Study of Family Policy, Hunter College, 695 Park Avenue, New York, NY 10021
Attention: Sarah Greenblatt; (212) 772-4450*

Wissow, Lawrence S.; Warshow, Michal; Box, Jean; Baker, Douglas

Case management and quality assurance to improve care of inner-city children with asthma

This asthma program, based at Johns Hopkins Hospital in Baltimore, had three components: assessment of individual patient care and feedback to primary care providers, periodic contact with parents, and provision of educational materials. The article concludes that it is feasible to identify patients at risk of receiving deficient preventive care, to gain their acceptance into the program, and to assess needs and potentially reduce health problems and unnecessary health care utilization.

American Journal of Diseases of Children, July 1988, 142(7): 748-752

Woodruff, Geneva; Sterzin, Elaine; Durkot

Serving drug-involved families with HIV infection in the community: A case report

This document describes case management services provided to a 27-year-old single woman with AIDS who is the mother of four children, ages six and under. The family was served by project WIN, a division of the South Shore Mental Health Center, a Boston-based demonstration project. The study demonstrates the extraordinary amount of time and effort required to coordinate services for families with HIV infection.

Zero to Three, June 1989, 9(5): 12-17

Woodruff, Geneva; Sterzin, Elaine; Durkot

**The transagency approach:
A model for serving children with HIV infection and their families**

Project WIN was created in 1986 to provide community-based services for drug-abusing families and their children at risk of or

diagnosed with AIDS. The Boston-based project uses a transagency service delivery approach—a case management system coordinating services for families involved with many agencies. This article summarizes the project, which has demonstrated that these children can be cared for at home by their families if comprehensive, family-focused, multiagency, community-based services are available and coordinated by a case manager.

Children Today, May-June 1988: 9-14

Zimmerman, Jerome H.

Negotiating the system: Clients make a case for case management

These findings emerged from a program evaluation sponsored by the Mississippi Governor's Commission for Children and Youth to provide integrated case management services for multi-problem children ages 5-15 and their families. Clients were asked to compare services they had received from professionally trained workers with those they received previously from predominantly untrained workers in public agencies. The data indicate that clients see differences in the two types of service and service givers and that they prefer professional social workers to paraprofessional case managers.

Public Welfare, Spring 1987, (45)2: 23-27



**NATIONAL CENTER
FOR CHILDREN
IN POVERTY**

The National Center for Children in Poverty was established to strengthen programs and policies for the five million children under six and their families who live in poverty in America. The Center assesses public and private sector initiatives in the areas of maternal and child health, family support, and early childhood care and education.

Judith E. Jones, Director