



## **DSS Guidance - FAQ - 10/12/2020 Edition**

1. Does the DSS Guidance replace our internal agency protocols?

No. DSS staff should follow internal agency protocols and internal supervisory guidance/direction (or, if working in a subcontracted agency, follow the protocols established by the lead agency).

The DSS Guidance is intended to be useful, provide support, and address gaps in guidelines. Agencies may find it helpful if they are considering adjustment to their protocols and for internal continuous quality improvement efforts. If this occurs, the timing may not be immediate following issuance of the DSS Guidance.

Following the DSS Guidance as an agency will assist the agency with assuring that all necessary documentation is completed consistently and thoroughly.

In the event that data from an agency is incomplete, the IDPH 1st Five Consultant will refer the agency to the DSS Guidance as the primary resource for improving the data. If 1st Five data is incomplete overall, the DSS Guidance will be revised to address needed improvements.

2. Is it okay if we are uploading additional items, beyond what the DSS Guidance has included?

Yes. The DSS Guidance doesn't restrict or discourage uploading relevant appropriate information within a record.

3. Are closing provider letters required.

Yes. One letter to the provider at the end of the case to inform the provider of the child's progress is required. This should be an individualized letter and not a form letter nor checklist. Upload this letter into Signify.

4. Do we need to go back through old cases to make changes based on the DSS Guidance?

No. The DSS Guidance is issued to begin October 1, 2020. It is a guidance document to provide support to assure appropriate work steps are clear. It is a recognition that past guidance has left some staff and agencies with gaps in information about the correct way to complete DSS work and documentation.

5. Is the length of a case strictly limited?

No. Case length will vary based on identified client needs and other factors. 1st Five is not an ongoing case management service; therefore, suggested time parameters are included as a guideline.

6. Some of the guidance presented is different from the past and has changed (again).

This is an accurate observation. At this time, the DSS Guidance offered represents the most current guide for DSS work within the initiative. As continuous quality improvement and program evaluation efforts reveal needs for revision, the DSS Guidance will be adjusted. The date in the footer will signal the current version.

7. Is it possible to develop new reports within Signify that will show agencies their data regarding needs and program referrals?

Yes. Please share ideas for reports that would be helpful with your Site Coordinator who can then pass it along to their IDPH 1st Five Consultant.

8. Please clarify the usage of the DSS Guidance and the 1st Five Signify Manual in the Signify Library.

The DSS Guidance includes the steps and timeline parameters in carrying out Developmental Support Services work, including the Signify entries that occur with each step. As of October 1st, 2020 the IDPH 1st Five Signify User Manual is specific only to the location of Signify entries, but doesn't provide a chronological approach to making entries. The two guides should not conflict with one another. If conflicts exist, this is an error. Please bring that to the attention of your Site Coordinator so that they can share it with the 1st Five Consultant assigned to your agency, and we can make adjustments.

9. Please address Welcome Letters and the first Care Coordination Activity and whether those two items can be documented as one item in Signify.

The Welcome Letter is separate from the first Care Coordination Activity. The Welcome Letter will be documented as a Send Letter Activity. The first interactive contact with the client's parent/caregiver will be documented as a Care Coordination Activity.

10. The timing and content of letters in the DSS Guidance is different from our agency protocols.

The DSS Guidance represents the current recommendations. Developmental Support Specialists should follow agency protocols and supervisory direction of their agency (or, if a subcontracted agency, follow direction from the lead agency). Agencies should use the DSS Guidance as a reference point for development of or revision to internal protocols according to the timing and needs of each agency. The 1st Five Site Coordinator is welcome to reach out to the IDPH 1st Five Consultant for assistance individualized to an agency.

11. What is included in one Care Coordination Activity? And, what needs to be documented as a separate Care Coordination Activity?

Care Coordination Activity is used to document when you are able to connect with a client and/or a referral resource in reference to your client. Each interaction should be documented as a separate Care Coordination Activity. For example, a contact with a representative of ABC Community Food Bank is a separate Care Coordination Activity from a contact with someone at the Local AEA.

12. What am I required to upload: provider letter, screening results, etc.?

All Referring Provider Updates/Letters must be uploaded. This is the only type of document that must be uploaded in Signify.

The results of the standardized developmental screening do not need to be uploaded - this is not required. However, you must choose an entry in the Screening Type field to document the type of screening that was completed or that no screening was completed. The Screening Type field also requires an entry for Surveillance Type. So, there will always be two selections in the Screening Type field. This is required and is important for the agency's performance measure.

13. What documentation is required for surveillance?

In the Screening Type field, choose the surveillance tool that was used. If no surveillance tool was used, choose Surveillance - None.

14. What documentation is required for standardized developmental screening?

In the Screening Type field, choose the standardized developmental screening tool that was used. If no screening tool was used, choose Screening - None.

#### 15. What documentation is required for Release of Information

Always follow internal agency protocols regarding Release of Information. Ideally, the referred child's parent (or other legal guardian if applicable) will sign the referral form at the well-child exam, and this signature will be included on the 1st Five Referral Form. Sometimes, the provider will indicate on the form that the parent has given permission for the provider to refer. When in contact with the parent/caregiver/guardian, you may seek a signed release of information through the mail. However, since 1st Five doesn't routinely see clients in person, verbal consent via phone contact is acceptable.

Other community resources to which you refer the child may require a signed release of information, allowing them to report any results to you. By working with the community resource to understand their needs, you may be able to assist them in obtaining the necessary release or obtain it via mail from the parent/caregiver.

Note: "Consent" is a different item from release of information. 1st Five does not require "consent"; however, other programs that are operated by your agency may need to assure that they have a signed consent before they are able to perform some direct services.