



# Needs and Program Referrals

## Frequently Asked Questions

- Which activities do we need to correct? Is it only on the new referrals since October 1, 2020 or is it for all care coordination done each month since October?
  - Both.
    - Corrections will be completed for Needs and Program Referrals made for all 1st Five referrals received beginning October 1, 2020. This will include correcting both the Referral Activity and Care Coordination Activities.
    - For 1st Five Referrals that were received prior to October 1, 2020, corrections will only be needed for Needs and Program Referrals in the Care Coordination Activities.
- Should Needs and Program Referrals be added to the Care Coordination Activity and the Referral Activity?
  - Each Need is housed within the activity in which they were identified. All concerns/needs indicated on the referral form by the Primary Care Provider will be added to the Referral Activity as a Need. All additional concerns/needs that were identified by DSS or shared by the caregiver, will be added to the Care Coordination Activity in which they were identified. The process for adding a need to a Referral Activity or Care Coordination Activity is the same, using the related content Add Need button.
- What do we do if we see Providers or Clinics that are duplicated in the Signify?
  - Submit a request to the Signify Helpdesk [signifycommunityhelpdesk@idph.iowa.gov](mailto:signifycommunityhelpdesk@idph.iowa.gov) including the specific names of the providers or organizations that need to be merged.
- If the needs already exist would we have to enter again under our program right?
  - Yes. The Need would have to be added to a 1st Five activity, either a Care Coordination Activity or Referral Activity.
- Do the needs and referral have to be in the same activity? What if the program referral wasn't made until later? Do they need to be saved together?
  - Yes. The Need & Program Referral have to be added to the same activity. You may add a Program Referral at any time (even after the Need has been added) to a Referral Activity or a Care Coordination Activity.
- If there is another Early Access that is not in our county, can we still use it if the correct need is listed
  - Use the Early Access program that you are planning to refer the family to. If the correct need is not listed as a need addressed by that program, submit a request to the Signify Helpdesk [signifycommunityhelpdesk@idph.iowa.gov](mailto:signifycommunityhelpdesk@idph.iowa.gov) requesting that they add the need to the program.
- For data cleanup, if we have several that need to be fixed due to program referrals being completed. Do they need to be sent individually to Signify or can we put it like a spreadsheet to send?
  - An individual request or a group request within a spreadsheet can be used for data clean up.
  - Use the Program Referral tab to gather the following information to include in your request:



- Contact ID
  - Program ID
  - Need
  - Date
  - Who from
  - Who to
  - Reason for the deletion
  - Specify if you would like them to remove the Need in addition to the Program & Program Referral
- What do we do for completing a need if a family declined or if they never responded to contact attempts?
    - As we know, not all needs will be addressed due to situations like no contact or declining services. For those contacts, there may be Needs that do not have any Program Referrals identified and that's ok.
  - If there is a need already linked to the client from a previous program or year, and we are starting a new referral that is the same need from previous year/time. Do we use that "old" need or start new?
    - If it's the exact same need, you would use the "old need" that was added previously. The same Need may be identified at multiple points in time for a client by various programs in Signify. You may add a Need any time to the client's Referral Activity or Care Coordination Activity when appropriate. The "being addressed" status of a Need does not mean you are unable to attach Program Referrals when you add it to a 1st Five Referral Activity or Care Coordination Activity. You are able to add the same Need as often as it is identified across 1st Five Episodes, and attach Program Referrals to the Need as you make those connections to community resources for the client.
  - We live in a rural area where some kiddos have lots of needs but we are unable to find a resource for some. What do you do then?
    - Sadly, this is the reality in some areas and some Needs will be difficult to address or unable to be addressed for this reason. Be sure to document this outcome within the referral activity's Referral Outcome and Reconciliation Outcome fields.
  - Is there a good Report to run to be sure we "clean up" all of the correct clients since last October? Is there the report that we can pull as Site Coordinators to have a list of contacts to review during this time frame, to make it easy to make corrections? I am trying to figure out how we can figure out who to review from that time frame.
    - There are several reports that site coordinators can use to assist with the clean up project. The reports will be unable to identify which Needs and Program Referrals are incorrect but it will help with providing a list of contacts within that time frame for review. Site Coordinators will be receiving guidance related to pulling these reports.



- Do we need to be listing ALL options for a given need that we offer to the parent? For example- Food- we give them several options/information. Before when barriers/solutions we would list all of them. Just double checking I am correctly entering.
  - All options shared with the parent/caregiver, should be documented in the “Staff Response” field in the Care Coordination Activity. All connections made to address Needs that have been identified should be documented as a Program Referral. A Program Referral is used to document a referral made to a community resource to meet a contact's needs.
- I noticed that when we add the referral to the care coordination note and/or Referral, it shows up on my Dashboard under Program Referrals Created and Program Referrals Assigned. Will this just continue to build up or will they drop off at some point. I use to use this section as a reminder for current clients, but if it's going to just keep adding on whether or not they are a current 1st Five client it will just become a massive list.
  - When you add a Program Referral, Signify assigns that Program Referral to you. At this time, we are unable to remove those “assignments” from a dashboard but it is something we'll be discussing further with Signify.
- I had Signify delete out the needs and program referrals for a client. Under Programs tab, the two programs are still listed there only and on the time line for the client. The needs are deleted and there is nothing under program referrals. Do these also need to be deleted or do I leave them there under Programs tab?
  - The Programs should be deleted in addition to the Needs and Program Referrals. When submitting your request, be sure to ask that the Program and Program Referral are both deleted.
- Can we just do a screen snip for signify request to delete program referral/need?
  - Yes. The contact ID and a snip of the need/program referral/program can be sent to Signify as your request. Please be sure not to include protected health information (PHI) in the snip.
- When submitting a clean up request to Signify, should we include the Program associated with the Need and Program Referral?
  - Yes. When submitting your request, be sure to ask that the Program and Program Referral are both deleted.
- Is there any specific need you want us to list “behaviors” under? There are several options we could list them under and we just wanted to make sure if there was a preference, we were following it.
  - We have no preferences related to what Needs you are selecting from the needs list. We ask that you make sure the Need you're selecting is "mapped" to the Program you choose to address that Need.
- For the signify clean up we are instructed to complete for Program Needs and Referrals would we put that on our time study as Care Coordination time?
  - Any time spent on the clean up project should be included in the DSS column of the Site Coordinator time study.