Needs and Program Referrals

Frequently Asked Questions 4/30/21

1. Do you have recommendations for how to gather all clients with Care Coordination activities that happened 10/1/20 and on for referrals that came in before 10/1/20?
    - There is a Care Coordination report available in Signify. This report will provide a list of contacts that have received Care Coordination activities. There is also a table provided within the report that splits care coordination counts by DSS staff members. Be sure to change the date filter to "is in range" starting on October 1, 2020 so that you're pulling all Care Coordination Activities that have been created since that date.
    - Dashboard > My Group Reports > Contracting Agencies > 1st Five > Care Coordination > Care Coordination Data

2. I'm working on clean up in Signify but have a question about information that was changed automatically by Signify when it changed from TAV. Are these done correctly or do we need to change them to connect to 1st Five somehow?
    - Only Needs & Program Referrals, within the 1st Five program, that were added incorrectly starting on 10/1/20 need to be deleted and added back correctly.

3. I am going through old clients to complete the data clean up. I came across a client that when the switch occurred from Barriers/Solution to the current Needs/Program Referrals the solutions were automatically put in the Programs Tab. There is currently nothing in the Program Referrals.
    - Anything that was completed related to Barriers and Solutions prior to October 1, 202 can be left alone. Only Needs & Program Referrals, within the 1st Five program, that were added incorrectly starting on 10/1/20 needs to be deleted and added back correctly.

4. Is there a new step-by-step tutorial on how to add Needs and Referrals?
    - Here is a recording of the training which was held the week of April 19th. This training provided an overview on how to add Needs and how to add Program Referrals. https://youtu.be/-oZ4hvAvlOQ
    - The Developmental Support Services Guidance also has an entire section focused on Needs & Program Referrals (Section 4). The DSS Guidance can be found on the MCAH Portal under the 1st Five tab. Please connect with your 1st Five Site Coordinator if you need the secure link to the MCAH Portal.

5. Is the report to track these Needs and Program Referrals being used to distinguish between provider-identified Needs and DSS-identified Needs by pulling by activity type (i.e. Referral activity and Care Coordination activity)?
    - Yes

- If so, do the Program Referrals for DSS-identified Needs need to be added to the same Care Coordination activity where the corresponding N originally identified, or would any Care Coordination activity do?
- Program Referrals should be added to the same activity in which the Need they are addressing "lives".

6. After a Need is identified and is now associated with the client's record, it is visible whenever you add Needs for any other activity. What effect would adding the Need to additional activities have on the report that 1st Five is attempting to pull? For example, if a Program Referral is attached to a later Care Coordination (CC) activity than the CC activity where the corresponding Need was identified, would it be possible to simply add the relevant Need to the CC activity that the Program Referral is attached to? Or would that simply duplicate the identified Need?
   - The Need should be added to the activity in which it was identified. The Program Referral follows the Need that it's addressing. If additional Program Referrals are made at a later time, go back through the timeline, find the Need it's addressing and add it to the Need's activity. Do not add duplicate Needs within the same 1st Five episode.

7. What effect does selecting a Program Referral that has already been made to be associated with an additional activity have on the report being pulled? Does it simply associate it with additional activities (by creating an additional "referral relationship" to that activity) or does it appear on the report as duplicate Program Referrals?
   - Program Referrals are made to address needs. The same Program can address multiple needs, hence the list of Needs mapped to a Program. For this reason, it's important that the Need is linked to the Program Referral when it is being made. When multiple Program Referrals are attached to a Need, each Program Referral is counted as a Referral "out". If a Program Referral is used to address a Need in the Referral Activity, but that Program Referral also satisfies another Need identified during Care Coordination, you may use the same Program Referral in both places. The Program Referral is counted each time it is linked to a Need.

8. Are there any complications with re-opening or deleting resolved Needs? We have the ability to make changes to these Needs, but it was hinted at during the training that there may be issues with this and additional notes, etc. may be required to justify these actions.
   - As long as the Needs were created or resolved by 1st Five staff, there is not a problem with them being deleted as they are incorrect.

9. Should we wait for Signify to delete Program Referral, Programs and Needs before we add them back correctly?
   - Yes. In order to reduce the likelihood that they might delete the newly added, correct Need or Program Referral, it would be best to wait until they have

completed your helpdesk request. They have been working very hard
to keep up with the requests coming in and the turnaround time has not b
very long.