




Standard 16:
Case Planning

See section 9 of binder

Learning Objectives - Case Planning

As a result of this session you should be able to:

- Ensure understanding of whose case plan it is
- Appropriately define goals that are measurable and realistic
- Ensure case plan targets criminogenic needs and defines resources to be used

What is Case Planning?

- Process by which the staff and the participant identify, agree upon and rank responsivity/criminogenic/ maintenance needs
- Based on validated risk and needs assessment tools and defines resources to be used
- Case plan addresses a broad range of participants needs and is NOT the treatment plan

Case Plan Components

- Fluid and dynamic document!
- Identify client risk level and criminogenic needs
- Defines participant responsibilities
- Target moderate/high need and responsivity factors first!
- Clearly/concisely articulate client goals related to his/her need – specific goals so participants know what is expected of them – build a roadmap
- Incorporate assessments of readiness for change
At minimum, case plan should be reviewed every six months

How do you develop a case plan and keep it their goals and not ours?



Responsivity Needs

- When participants first enter Treatment Courts....
- One of the most pressing goals is to ensure that they remain in treatment and comply with other reporting obligations
- Requires Treatment Courts to resolve symptoms or conditions that are likely to interfere with attendance or engagement in treatment

Responsivity Needs

- Severe Mental Illness
- Homelessness or Unstable Housing
- Trauma
- Motivation
- Withdrawal
- Anhedonia (diminished ability to experience pleasure)
- Other Basic Needs, (dental, eye sight, clothing appropriate for weather, child support, unpaid fines, food share, health insurance, STD testing, transportation, cell phone, medical needs etc.)
- Target these needs → to prevent participants from failing or dropping out of treatment early
→ increase retention
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Criminogenic Needs

- If not addressed– participants will have an increased risk to reoffend
- Deliver after the participant has stabilized, once responsivity needs have been addressed
- Criminal Thinking often leads to failure in Treatment Courts

Targeting “Criminogenic Needs” - Interim

Big Four

1. Anti-social cognition
2. Anti-social companions
3. Anti-social personality/temperament
4. Family and/or marital

Lesser Four

1. Substance abuse
2. Employment
3. School
4. Leisure and/or recreation

Maintenance Needs

- Some needs, such as poor job skills, illiteracy, or low self-esteem, are often the result of living a nonproductive or antisocial lifestyle
- Rather than the cause of that lifestyle
- Treating noncriminogenic needs before treating responsivity or criminogenic needs is associated with increased criminal recidivism, treatment failure, and other undesirable outcomes

Maintenance Needs –Later/Final Phase

- Medical and dental
- Educations and vocational
–could be criminogenic need
- Health risk behaviors
- Overdose risk

Maintenance Needs –Later/Final Phase

- Treat Responsivity and Criminogenic Needs first
- Address maintenance needs after a reasonable period of sobriety
- Require maintenance activities as a condition of graduation
- Assess changes → Treatment Courts must respond to changes in criminogenic needs, responsivity factors, and stability
- Explore new interventions that may be appropriate for participants

Development

- Who develops the case plan with the participant in your treatment program?

- A. Probation Agent
- B. Coordinator
- C. Case Manager
- D. Judge

Developing a Case Plan

- Function: Assessment
- Tasks:
 - Initial determination of participant's needs, wants, strengths, resources
 - Initial determination of participant's psychosocial situation

Developing a Case Plan

- Function: Planning
- Tasks – In collaboration with the participant and the team:
 - Define participant goals
 - Develop strategies for each goal
 - Identify who is responsible for each action in the strategy
 - Establish timeframes

Developing a Case Plan

- Function: Linkage
- Tasks:
 - Identify services and supports needed for the participant to meet his or her goals
 - Make referrals to appropriate services and supports
 - Provide the participant with information or assist the participant in accessing needed services

Developing a Case Plan

- Function: Monitoring
- Tasks – Maintain ongoing communication with services and supports, and conduct ongoing assessments of the participant's progress to determine:
 - Is the participant using the service?
 - Is the appropriate service being provided at an adequate intensity?
 - Is the participant benefiting from the service?
 - If not, return to planning and linkage functions

Developing a Case Plan

- Function: Advocacy
- Tasks – Help the participant access services for which he or she is eligible through:
 - Education of service providers
 - Persuasive communication
 - Negotiation
 - Use of policy and rights-protecting laws and rules

Review of Case plan

- How often do you review your case plan?
- A. Every individual session
 - B. Each week in staffing
 - C. Monthly
 - D. Quarterly

Please turn off your clicker when done!

Practice Points

- The language of the problem, goal, and strategy statements should be:
 - Specific
 - Understandable to the participant
 - Expressed in behavioral terms
- Case plan should include significant others and/or family members when appropriate.
- Case plan should be shared with prosocial supports by the participant as appropriate.

Practice Points

- The plan is a specific activity that links the problem with the goal.
- It describes the services, who will perform them, when they will be provided, and at what frequency.
- Case plan should be reviewed by a Treatment Court team member and the participant during all individual sessions.

Sample Case Plan

Case Plan

NAME: _____ OID #: _____ Date of Plan: _____

RISK/NEED AREA (LSI-R domain): _____

PROBLEM STATEMENT (Clear definition of risk/need factor): _____

LONG TERM GOAL: (Must be achievable within the time frame of program involvement) _____

SHORT TERM GOAL: (Must be achievable within thirty days) _____

Measurable Action Steps** <i>Specific and measurable steps to goal improvement</i>	Responsibility 1=Client/Inmate 2=PO/Case Manager 3=Other (specify)	Target Date (What will steps be taken toward completing the goal?)	Review Date (List date of meeting where the step will be reviewed)	Status*** 1=Achieved 2=Partially Achieved 3=Not Achieved 4=Satisfactory Progress 5=Unsatisfactory Progress	Actual Completion Date

Client Signature: _____ Date: _____
 Staff Signature: _____ Date: _____

Are there structural differences between different courts ?



Breakout 6

- Review and refine your treatment referral process
- Analyze the treatment services available in your community and discuss how to fill gaps
- Review and refine your case planning process