

Sample Case Management Case Plan

CLIENT: Im A. Recipient		Wisconsin Medicaid #: 1234567890	Case Manager: Im A. Case Manager, MSW			
CASE PLAN PARTICIPANTS: Im A. Recipient's daughter, Case Manager						
PROBLEM	GOALS/OUTCOME	SERVICE TYPE	UNIT COST*	PROVIDER	UNITS OF SERVICE	START DATE
Recipient is recovering from a broken left hip and cannot ambulate without assistance.	Independent ambulation (within six weeks)	Physical therapy	xxx.xx	Wisconsin Medicaid, PT-certified provider	2 PT appointments per week-6 weeks	2/24 to 4/1
Recipient has no means of transportation to medical appointments.	Access to all medical appointments	Medical transport services	xxx.xx	Safe-T Transport	As needed	Ongoing
Recipient is unable to manage her medications.	Evaluation of all meds and support for proper intake of all meds by 3-1	RN visit and evaluation with RX	xxx.xx	Visiting nurses	2 visits	2/24 and 3/1
Recipient cannot perform her own personal care, i.e., bathing, dressing, toileting.	Assistance and instruction to meet personal care needs	Personal Care	xxx.xx	Wisconsin Medicaid service provider	7 days/wk. 1 hr. a.m., 1 hr. p.m.	Ongoing
Recipient has no assistive devices in her home.	Occupational therapy evaluation for assistive devices at home by 3-5	Occupational therapy	xxx.xx	Wisconsin Medicaid, OT-certified provider	1 evaluation 1 installation	2/27 3/5

*State, if applicable, "Medicaid reimbursement" and indicate copayment amount when appropriate.

Case Management Care Plan Templates

Teresa Treiger, Ellen Fink-Samnick



Case Management Care Plan Templates:

Life Care Planning and Case Management Handbook Spilios Argyropoulos, Sam Forshall, David Nutt, 2004-05-10 Life Care Planning and Case Management Handbook Second Edition brings together the many concepts beliefs and procedures regarding life care plans into one state of the art publication This second edition of a bestseller is focused on prioritizing and managing the spectrum of services for people with serious medical problems and their families *The Integrated Case Management Manual* Roger G. Kathol, Janice Cohen, 2010-06-03 Designated a Doody's Core Title An ideal reference guide for case managers who work with complex multimorbid patients The Integrated Case Management Manual helps readers enhance their ability to work with these patients learn how to apply new evidence based assessments and advocate for improved quality and safe care for all patients This text encourages case managers to assess patients with both medical and mental health barriers to improvement in order to coordinate appropriate integrated health interventions and treatment planning Built upon the goals and values of the Case Management Society of America CMSA this manual guides case managers through the process of developing new and important cross disciplinary skills These skills will allow them to alter the health trajectory of some of the neediest patients in the health care system Key Features Tools and resources for deploying an Integrated Health Model physical and mental health treatment to the medically complex patient Complexity assessment grids a color coded tool for tracking patient progress and outcomes throughout the trajectory of the illness Methods for building collaborative partnerships in emerging models of care delivery within multidisciplinary health care teams Strategies for using an integrated case management approach to improve efficiency effectiveness accountability and positive outcomes in clinical settings Guidance on connecting multi disciplinary teams to assist with health issues in the biological psychological and social domains to overcome treatment resistance reduce complications and reduce cost of care

CMSA Core Curriculum for Case Management Hussein M. Tahan, Teresa M. Treiger, 2016-07-05 The fully updated CMSA Core Curriculum for Case Management 3rd edition is the definitive roadmap to an informed effective collaborative case management practice This comprehensive expertly written guide provides those directly or indirectly involved in case management with information about best practices descriptions of key terms essential skills and tools that fulfill the current Case Management Society of America's CMSA standards and requirements Addressing the full spectrum of healthcare professional roles and environments this is both a crucial certification study guide and vital clinical resource for the case management professionals in all specialty areas from students to veteran case managers This unique resource provides the core knowledge needed for safe cost effective case management with the following features NEW text boxes highlighting key information and vital practices in each chapter NEW and updated Standards of Practice implications in each chapter NEW and updated content on transitions of care community based care care coordination Value Based Purchasing ethics and social media the impacts of health care reform and digital technology NEW and updated content on accreditation in case

management NEW chapter that lists key additional resources by topic Official publication of the Case Management Society of America connecting CMSA core curriculum to current CMSA Standards of Practice Easy to grasp detailed topical outline format for quick scan of topics Complete updated core knowledge required of case managers with expert descriptions and direction on areas including Case management roles functions tools and processes Plans clinical pathways and use of technology Transitional planning Utilization management and resource management Leadership skills and concepts Quality and outcomes management legal and ethical issues Education training and certification Health care insurance benefits and reimbursement systems Practice settings and throughput Interdisciplinary teams needs in hospitals community clinics private practice acute care home care long term care and rehab settings palliative care and hospice settings Up to date guidance on case management specialty practices including nursing life care planning workers compensation disability management care of the elderly behavioral health transitions of care subacute and long term care utilization review management primary care and medical health home and more Essential content for academic reference training certification study case management models design performance or program evaluation Life Care Planning and Case Management Across the Lifespan Tanya Rutherford-Owen, Mary Barros-Bailey, Roger O. Weed, 2023-11-23 Celebrating 25 years since its first publication the fifth edition of this best selling text is the most up to date and complete resource available on what a life care planner does how the life care planner does it and issues that affect the day to day role of a life care planner Now featuring new material on pediatric life care planning and case management including brachial plexus injuries and neurodevelopmental disorders this new edition provides guidance and planning for cases across the lifespan It begins with a series of chapters examining ten different professional specializations that often contribute to a life care plan before providing critical information for developing life care plans for individuals with different physical mental and cognitive conditions including spinal cord injury brain injury and chronic pain Uniquely comprehensive the book also includes chapters on the forensic and legal context of life care planning as well as equipment technology evidence based literature resources and special education special needs planning relevant to pediatric life care planning Also including chapters dedicated to life care planning methodology and life care planning research this is an essential resource for anyone practicing or studying life care planning or managing the needs of those requiring chronic medical care over the lifespan Family Law Handbook 2014 Jane Sendall, 2014 This handbook takes a practical approach to the essential law and procedure at the heart of family law Using case studies a wealth of pedagogical features and complemented by online resources the text focuses on the law relating to relationship breakdown money and property children and domestic violence **Family Law Handbook 2012** Jane Sendall, 2012-01-12 This handbook takes a practical approach to the essential law and procedure at the heart of family law Using case studies a wealth of pedagogical features and complemented by online resources the text focuses on the law relating to relationship breakdown money and property children and domestic violence *Family Law Handbook 2013* Jane

Sendall,2013-01-10 This handbook takes a practical approach to the essential law and procedure at the heart of family law Using case studies a wealth of pedagogical features and complemented by online resources the text focuses on the law relating to relationship breakdown money and property children and domestic violence COLLABORATE(R) for Professional Case Management Teresa Treiger, Ellen Fink-Samnack, 2015-04-15 This book is about the progressive improvement of case management beyond that which it exists to that of a practice specialty focused on professionalism and collegiality across all practice settings Our desire to produce a framework for such practice began when we connected several years ago It was a result of a dialogue the sharing of our stories and experiences Separately we were already passionate about and committed to case management excellence Together our vision coalesced to form this competency based framework for advancing case management captured by an acronym which defined the essence of professional practice COLLABORATE We spent hours discussing the implications of a perceived epidemic involving less than productive interactions between individuals working under the title of case manager with consumers providers and clinical colleagues These accumulated experiences heightened our commitment to lead much needed change Our conversation endured over many months as we realized a shared Respect for case management s rich heritage in healthcare across professional disciplines and practice settings Concern for those factors which devalue case management s professional standing Agreement that while the practice of case management transcends many representative professional disciplines and educational levels each stakeholder continues to cling to their respective stake in the ground and Belief of the importance for case management to move from advanced practice to profession once and for all COLLABORATE was borne from a vision the mandate to solidify a foundation for case management practice which combines unique action oriented competencies transcends professional disciplines crosses over practice settings and recognizes educational levels The ultimate focus is on improving the client s health care experience through the promotion of effective transdisciplinary collaboration COLLABORATE recognizes the hierarchy of competencies and practice behaviors defined by the educational levels of all professionals engaged associate bachelors masters and doctoral degrees across practice disciplines Through this approach every qualified health and human service professional has a valued place setting at case management s ever expanding table Each of the competencies are presented as mutually exclusive and uniquely defined however all are complementary and call on the practitioner to conduct work processes in a wholly integrated manner While appearing in order for the acronym s sake they are not necessarily sequential Ultimately case management is an iterative process When united in a comprehensive and strategic effort the COLLABORATE competencies comprise a purpose driven powerful case management paradigm The agility of this model extends to use of key concepts that include both action oriented verbs and nouns which are significant elements in any professional case management endeavor To date case management practice models have been driven by care setting and or business priorities Unfortunately this exclusivity has contributed to a lack of practice consistency due to

shifting organizational and regulatory priorities However this is only one reason for a fragmented case management identity COLLABORATE recognizes and leverages these important influencers as critical to successful practice and quality client outcomes Interprofessional education and teamwork are beginning to emerge as the means to facilitate relationship building in the workplace Through this approach health care practitioners absorb the theoretical underpinning of intentionally work together in a mutually respectful manner which acknowledges the value of expertise of each care team stakeholder This educational approach provides the opportunity to engage in clinical practice that incorporates the professional standards to which we hold ourselves accountable Innovative and emerging care coordination models defined by evidence based initiatives appear across the industry Each promotes attention to interprofessional practice in order to achieve quality patient centered care Herein lies an opportunity to demonstrate the value drawn from diverse expertise of case managers comprising the collective workforce However a critical prefacing stage of this endeavor involves defining a core practice paradigm highlighting case management as a profession The diverse and complex nature of population health mandates that case management intervene from an interprofessional and collaborative stance While inherent value is derived from the variety of disciplines this advanced model unifies case management s unique identity Now is the time to define and adopt a competence based model for professional case management COLLABORATE provides this framework This text is presented in four sections Section 1 Historical validation of why this practice paradigm is critical for case management to advance to a profession Section 2 Presentation of the COLLABORATE paradigm with a chapter devoted to each distinct competency and the key elements Section 3 Practical application of the book s content for use by the individual case manager and at the organizational level and The Epilogue Summarizes the COLLABORATE approach in a forward looking context For the reader with limited time reviewing Section 2 provides the substantive meat associated with each of the competencies Our ultimate desire is that the COLLABORATE approach provides an impetus for all stakeholders e g practitioners educational institutions professional organizations to take the necessary steps toward unified practice in order to facilitate the transition of case management considered as a task driven job to its recognition as being a purpose driven profession The book provides a historical validation of why this new practice paradigm is critical for case management to advance as a profession presents the COLLABORATE paradigm with a chapter devoted to each distinct competency and the key elements and covers the practical application of the book s content by individual case managers and at the organizational level **Nursing**

Diagnosis Handbook - E-Book Betty J. Ackley, Gail B. Ladwig, 2010-02-18 Use this convenient resource to formulate nursing diagnoses and create individualized care plans Updated with the most recent NANDA I approved nursing diagnoses Nursing Diagnosis Handbook An Evidence Based Guide to Planning Care 9th Edition shows you how to build customized care plans using a three step process assess diagnose and plan care It includes suggested nursing diagnoses for over 1 300 client symptoms medical and psychiatric diagnoses diagnostic procedures surgical interventions and clinical states Authors

Elizabeth Ackley and Gail Ladwig use Nursing Outcomes Classification NOC and Nursing Interventions Classification NIC information to guide you in creating care plans that include desired outcomes interventions patient teaching and evidence based rationales Promotes evidence based interventions and rationales by including recent or classic research that supports the use of each intervention Unique Provides care plans for every NANDA I approved nursing diagnosis Includes step by step instructions on how to use the Guide to Nursing Diagnoses and Guide to Planning Care sections to create a unique individualized plan of care Includes pediatric geriatric multicultural and home care interventions as necessary for plans of care Includes examples of and suggested NIC interventions and NOC outcomes in each care plan Allows quick access to specific symptoms and nursing diagnoses with alphabetical thumb tabs Unique Includes a Care Plan Constructor on the companion Evolve website for hands on practice in creating customized plans of care Includes the new 2009 2011 NANDA I approved nursing diagnoses including 21 new and 8 revised diagnoses Illustrates the Problem Etiology Symptom format with an easy to follow colored coded box to help you in formulating diagnostic statements Explains the difference between the three types of nursing diagnoses Expands information explaining the difference between actual and potential problems in performing an assessment Adds detailed information on the multidisciplinary and collaborative aspect of nursing and how it affects care planning Shows how care planning is used in everyday nursing practice to provide effective nursing care

Agent-Based Technologies and Applications for Enterprise Interoperability Klaus Fischer,Jörg Müller,Renato Levy,2012-02-27 The ATOP Agent Based Technologies and Applications for Enterprise Interoperability workshop series focuses on technologies that support interoperability in networked organizations on successful applications of these technologies and on lessons learned In particular ATOP brings together research combining ideas from MDA and SOA with agent technologies The ATOP 2009 and 2010 workshops were held at the AAMAS conferences in Budapest Hungary in May 2009 and in Toronto Canada in May 2010 The 11 papers presented here were carefully reviewed by three members of the international Program Committee and selected out of 25 contributions to the workshops The topics covered are modeling interoperable systems semantic approaches to enterprise interoperability and interoperable business processes and business interactions These papers are completed by an invited contribution reporting on OMG agent standardization The main goal was to collect approaches for the application of agent technologies in these areas Current trends in the development of agent technologies are compared with recent developments in service oriented and model driven system design with respect to their ability to solve interoperability problems

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