



Minnesota Interagency Task Force On Homelessness

Case management for persons experiencing homelessness or those at risk of homelessness¹

The Minnesota Interagency Task Force on Homelessness has identified the following required components of case management in order to standardize the use of this term within homelessness programs in Minnesota.

This framework for case management will be used with the following programs: the Department of Children, Families, and Learning's homelessness programs; the Department of Human Services' Projects in Assistance for Transition from Homelessness (PATH); the adolescent Transitional Housing Program, and the Minnesota Housing Finance Agency's Family Homeless Prevention and Assistance Program (FHPAP).

Within the context of an Agency's mission and objectives, case management **must** be a collaborative effort with each household, and must include the following activities:

- Assessment – identify, with a person, their strengths, resources, barriers, and needs in the context of their local environment.
- Plan development – develop an individualized service plan, with specific outcomes, based on the assessment.
- Connection – obtain for the person the necessary services, treatments and supports.
- Coordination – bring together all of the service providers in order to integrate services and assure consistency of service plans.
- Monitoring – evaluate with the person their progress and needs, and adjust the plan as needed.
- Personal advocacy – intercede on behalf of the person or group to ensure access to timely and appropriate services.

¹ Much of this definition is derived from: "A Review of Case Management for People who are Homeless: Implications for Practice, Policy, and Research." By Gary Morse.

The activities listed above are the activities that, taken together, make up case management. These case management activities will vary in a number of ways. The following variables are related to *how* case management is provided as opposed to what case management actually is.

- intensity (frequency of contact, client-staff ratios),
- duration (from brief to time-limited to open-ended),
- focus (from narrow and targeted to comprehensive),
- availability of staff (from scheduled office hours to 24-hour availability),
- location of services, and
- staffing patterns (from individual case loads to interdisciplinary teams with shared caseloads) depending upon the needs of the client.

In addition to the above components of case management, there are additional activities that are often offered that enhance the core case management activities. These activities can be divided into two broad categories, client specific activities and system activities.

Client Specific Activities:

- Outreach – to attempt to enroll persons not currently accessing services.
- Direct service – to provide services directly to the client (examples may include: budget counseling, housing search assistance, etc.)
- Crisis intervention – to assist persons in crisis to stabilize through direct interventions and mobilizing needed supports and/or services.
- Follow-up or post-completion services – to maintain contact with the participant after completion of the program in order to track stability and provide needed services.

System Activities

- System advocacy – to intervene with organizations or larger systems in order to promote more effective, equitable, and accountable services to a client group (to be distinguished from advocacy above).
- Resource development – to attempt to create additional services or resources to address the needs of people.