

CTI Forms & Processes Cheat Sheet



CTI Forms & Processes	Description/ Rationale	Phase 1 (Transition)	Phase 2 (Try-out)	Phase 3 (Transfer)
Active Service Linkages	<ul style="list-style-type: none"> > Working collaboratively with Veterans, the case manager links Veterans with VA and community resources that promote continuity of care, stability and social integration. 	<ul style="list-style-type: none"> > Establish Veteran's resource & support networks at their local VA facilities and in their communities. > Attend service appointments to advocate on Veteran's behalf and model help-seeking behaviors and skills to achieve goals. Follow up with Veteran about their satisfaction with each linkage. 	<ul style="list-style-type: none"> > Monitor the impact of resources on goal attainment and make adjustments as necessary. > Empower Veterans to maintain resources independently assisting when challenges arise and continue to teach Veteran how to self-advocate. 	<ul style="list-style-type: none"> > Consult on Veteran's goal achievement (rather than a direct helping role). > Transition support to established linkages in final meetings with Veteran's resources and supports. Plan for the future, including how to navigate ongoing threats to housing stability.
Time limited	<ul style="list-style-type: none"> > The initial 6 months in housing are a critical time for establishing skills, resources, and supports needed to achieve long term housing stability. > CTI does not replace long term case management. 	<ul style="list-style-type: none"> > Months 1 & 2 	<ul style="list-style-type: none"> > Months 3 & 4 	<ul style="list-style-type: none"> > Months 5 & 6
Transitioning support	<ul style="list-style-type: none"> > The case manager's support is reduced over time as the connections to Veterans' support and resource network are established. > Veterans' expectations for the program are managed up front and throughout the 6 months of CTI. 	<ul style="list-style-type: none"> > Weekly in person meetings at minimum >Remind Veteran what work together will look like in this Phase and program length 	<ul style="list-style-type: none"> > Two times per month in person meetings >Remind Veteran what work together will look like in this Phase and time remaining in the program 	<ul style="list-style-type: none"> > Monthly in person meetings >Remind Veteran what work together will look like in this Phase and time remaining in the program

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<p>Minimal Extensions/ No Early Discharges</p>	<p>> Extensions are granted in rare cases, typically when a linkage or support is imminent, but cannot be solidified before the 6 months of CTI ends.</p> <p>> Early discharges from the program are not permitted, even if Veteran is doing well – this ensures Veterans can get support within the initial 6 months in housing should it be needed.</p>	<p>> No early discharges</p>	<p>> No early discharges</p>	<p>> No early discharges</p> <p>> Examples of circumstances that may require extensions include pending benefits, employment, relocation, a hospitalization or other health-related crisis</p>
<p>Focused Goals & Phase Plan Form</p>	<p>> 1 – 3 focused goals (i.e., SMART goals) per phase.</p> <p>> Goals are connected to Veteran’s reason for becoming homeless.</p>	<p>>Phase Plan is completed at beginning of Phase 1 <u>and</u> end of Phase 1 (goal summary)</p>	<p>> Phase Plan is completed at beginning of Phase 2 (fresh version of form) <u>and</u> end of Phase 2 (goal summary)</p>	<p>> Phase Plan is completed at beginning of Phase 3 (fresh version of form) <u>but NOT</u> end of Phase 3 (use Closing Note instead)</p>
<p>Weighted Caseloads & Caseload Tracker</p>	<p>> Caseloads are weighted to account for the intensity of services across phases.</p> <p>>The weighted caseload tracker ensures manageable caseload of no more than 20 <i>weighted</i> cases.</p>	<p>> Update Weighted Caseload Tracker 1-2 times per month</p>	<p>> Update Weighted Caseload Tracker 1-2 times per month</p>	<p>> Update Weighted Caseload Tracker 1-2 times per month</p>
<p>Weekly Supervision & CTI Supervision Form</p>	<p>> Supervision is conducted weekly. Each case manager’s entire caseload is discussed at least once per month.</p> <p>> The CTI Supervision Form is used to guide discussion of Veterans’ progression through CTI.</p>	<p>> Weekly supervision with each CM’s entire caseload discussed once per month</p>	<p>> Weekly supervision with each CM’s entire caseload discussed once per month</p>	<p>> Weekly supervision with each CM’s entire caseload discussed once per month</p>

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<p><u>Closing Note Form</u></p>	<p>> Upon discharge, this form is used to summarize what occurred during the six months of CTI, and plan for maintaining housing stability after CTI.</p>	<p>N/A</p>	<p>N/A</p>	<p>> In 2nd to last or last meeting with Veteran</p>
<p><u>Case / Progress Notes</u></p>	<p>> Case notes are often entered into organization's existing reporting platform. To align with CTI, every case note documents interaction/work related to Veteran's current goals for that Phase.</p> <p>> Provides documentation of tapered support and helps case managers plan for the next phase</p>	<p>> Document every interaction or attempted interaction w/ Veteran</p>	<p>> Document every interaction or attempted interaction w/ Veteran</p>	<p>> Document every interaction or attempted interaction w/ Veteran</p>
<p><u>Phase Date Form</u></p>	<p>> Supervisor updated form that tracks CM's caseload across phases</p> <p>> Helps to ensure CM's activities for a Veteran are consistent with their current phase.</p>	<p>> Updated ongoingly in supervision</p>	<p>> Updated ongoingly in supervision</p>	<p>> Updated ongoingly in supervision</p>
<p>As needed CTI Forms</p>				
<p><u>CTI Informed Veteran Assessment</u></p>	<p>> Assesses biopsychosocial histories & assessment domains relevant to the CTI model.</p> <p>> While your organization may have a similar intake form, it is recommended to review the CTI Informed Assessment and make additions or adjustments to the organization's form to align with CTI.</p>	<p>> At intake/ beginning of Phase 1</p> <p>> The "Independent Living Skills Checklist" (page 9) assesses Veterans' independence upon program entry</p>	<p>> The "Independent Living Skills Checklist" (page 9) can be used to assess progression of Veteran's ability to live independently</p>	<p>> The "Independent Living Skills Checklist" (page 9) can be used to assess progression of Veteran's ability to live independently</p>

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<p><u>Veteran Resource List</u></p>	<p>> List of documents and contacts aligned with goal domains.</p> <p>> Serves as a source for documenting the support and resource network, personalized to each Veteran.</p>	<p>> Ongoing/ as needed throughout Phases</p>	<p>> Ongoing/ as needed throughout Phases</p>	<p>> Ongoing/ as needed throughout Phases</p>
<p><u>Harm Reduction Plan</u></p>	<p>> Plan to reduce harm associated with any risk behavior or threat to Veteran’s housing stability.</p>	<p>> As needed</p>	<p>> As needed</p>	<p>> As needed</p>
<p><u>CTI Self-Assessment</u></p>	<p>> The CTI Self-Assessment is a tool for highlighting areas of strength and identifying challenges related to a site’s implementation of CTI. It is meant to be a method for reinforcing CTI practices and eliciting collaborative team discussions and strategies to align with the CTI model.</p> <p>> While there is not a designated number of times this form should be completed, quarterly or biannually is recommended. For new staff more frequent use (monthly or every other month).</p>	<p>> Recommended quarterly or biannually and monthly/bimonthly for new staff</p>	<p>> Recommended quarterly or biannually and monthly/bimonthly for new staff</p>	<p>> Recommended quarterly or biannually and monthly/bimonthly for new staff</p>
<p><u>CTI Recourses and Processes Workbook</u></p>	<p>> The CTI Resources and Processes Workbook is designed for Aftercare case managers and their supervisors to document resources and processes available through their local VA and community partners. Since VAs and communities vary in services and resources and how to go about accessing them, documenting resources and processes creates an information hub for each GPD Aftercare site to refer to and orienting new Aftercare staff to local resources and services.</p>	<p>> As needed</p>	<p>> As needed</p>	<p>> As needed</p>

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<u>CTI SMART Goals Worksheet</u>	> The SMART Goals Worksheet is a tool designed to help case managers teach Veterans to develop and achieve Specific, Measurable, Achievable, Relevant and Timely (SMART) goals on their own. It may also be a helpful tool for case managers that are new to using SMART goals within their case management practice.	> As needed	> As needed	> As needed
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