

# CTI Implementation Self-Assessment Form



Score Scale

Never or Rarely	Sometimes	About half of the time	Most of the time	Always
1	2	3	4	5

Main Components	Score:
<b>Time-Limited</b> 1. CTI lasts no longer than 6 months (from the date the Veteran started Phase 1).	
<b>Three Phases</b> 2. Beginning after Pre-CTI, the intervention takes place in three phases, each phase lasting two months.	
<b>Focused</b> 3. Case managers select 1-3 focus areas to develop goals in each phase.  4. All goals in each phase are selected from the list of predetermined CTI focus areas on the Phase Plan: benefits; employment; survival needs (e.g., food, clothing, furniture; childcare; transportation); education (child/adult); natural supports; budget management; health and mental health; children’s health and mental health; housing; legal concerns.  5. Focus areas are based on their relevance to the Veteran’s long-term housing stability.	
<b>Small Caseload Size</b> 6. Each case manager has no more than 20 weighted cases per month (using the Weighted Caseload Tracker).	
<b>Weekly Team Supervision Meetings</b> 7. Supervision takes place as a team, consisting of the supervisor and more than one case manager. (For agencies with only one case manager, ‘team supervision’ is between the supervisor and case manager).  8. Team supervision meetings are led by the supervisor, who is a clinician and has been trained in CTI.  9. Team supervision meetings take place weekly.  10. Supervision is used to reinforce practices consistent with the CTI model and to correct practices that are noted.	

11. During supervision sessions, the team discusses each Veteran in the context of his/her current phase in CTI at least once a month.	
12. Case managers give a case presentation at the supervision meeting for each new Veteran on their caseload.	
13. Some (~6-8) high priority Veterans are selected prior to each supervision meeting for in-depth discussion by the team.	
14. Supervisor monitors case managers' documentation regularly to ensure high quality and timeliness.	
15. Supervisors and case managers identify relevant VA and community resources together and discuss resource linkages during supervision meetings.	
<b>Decreasing Contact Over Three Phases</b>	
16. As Veterans progress through Phases and become connected to resources*, case managers decrease frequency of contact ** and shift to a mediator/monitor role.	
<b>No Early Termination</b>	
17. CTI does not end earlier than six months from the date the Veteran started Phase 1.	
<b>Phases of CTI</b>	<b>Score:</b>
<b>Phase 1</b>	
18. Case managers gather Veteran information to enable a best fit between the Veteran and VA and community resources, (e.g., his/her interests, skills, strengths, vulnerabilities, aspirations, and history, such as education, jobs, housing, and treatment).	
19. Case managers explore the Veteran's neighborhood with the Veteran in order to foster new community-based relationships and skills.	
20. During Phase 1, case managers have, on average, one contact per week with the Veteran and four of these contacts take place in the community (e.g., Veteran's apartment, service agency).	
21. Case managers work with Veterans to identify existing formal and informal VA and community resources and supports.	
22. Case managers actively link (e.g., accompany Veterans to appointments and services, or establish warm hand-offs with providers) Veterans to formal and informal supports where needed and strengthen relationships with existing resources.	
<b>Phase 2</b>	
23. During Phase 2, case managers have, on average, two contacts per month with the Veteran and at least 2 of these contacts take place in the community.	
24. Case managers mediate between the Veteran and his/her resources and support network.	
25. Case managers assess the strength of linkages by monitoring and recording the Veteran's interaction with his/her resources and support network.	
<b>Phase 3</b>	
26. During Phase 3, case managers have, on average, one contact per month with the Veteran and at least one of these contacts takes place in the community.	

27. Case managers ensure direct communication between members of the Veteran's support network.	
28. Before the end of CTI, case managers have a Transfer-of-Care meeting or call with members of the Veteran's support network with whom it is necessary to meet, (e. g., the case managers should engage in a warm hand-off with new case managers), but may not need to meet daycare providers. <i>(The Veteran should be present if possible.)</i>	
29. Before the end of CTI, case managers have a Closing Meeting with the Veteran to discuss his/her experience with CTI, relationship with case manager, expectations for the future, and long-term support network's contact information.	
<b>Case Manager's Role</b>	<b>Score:</b>
30. Case managers use a strengths-based, person-centered approach that incorporates shared decision-making in their interactions with Veterans (e.g., relate to them in genuine ways, ask about topics not related to treatment, normalize their feelings)	
31. Case managers take a harm-reduction approach to planning with Veterans, when applicable.	
<b>Documentation</b>	<b>Score:</b>
32. A progress note is completed for each contact with the Veteran and/or member of his/her support network.	
* "Resources" refers to both formal and informal supports and resources (e.g., VA providers if healthcare eligible, non-VA providers, family members, friends, neighbors, landlord, spiritual communities)  ** "Contacts" refer to case management meetings, via face-to-face meetings (office or community), video conferences, phone calls, texts, secure messages, or e-mails	
A. <b>TOTAL of Scores</b> for items 1 through 32	
B. <b>Average CTI Implementation Score</b> ('A' divided by 32)	

**Score Results**

Not Implemented	Poorly Implemented	Adequately Implemented	Well Implemented	Ideally Implemented
1.0 - 1.4	1.5 - 2.4	2.5 - 3.4	3.5 - 4.4	4.5 - 5.0