Case Management Society of America Standards of Practice for Professional Case Management

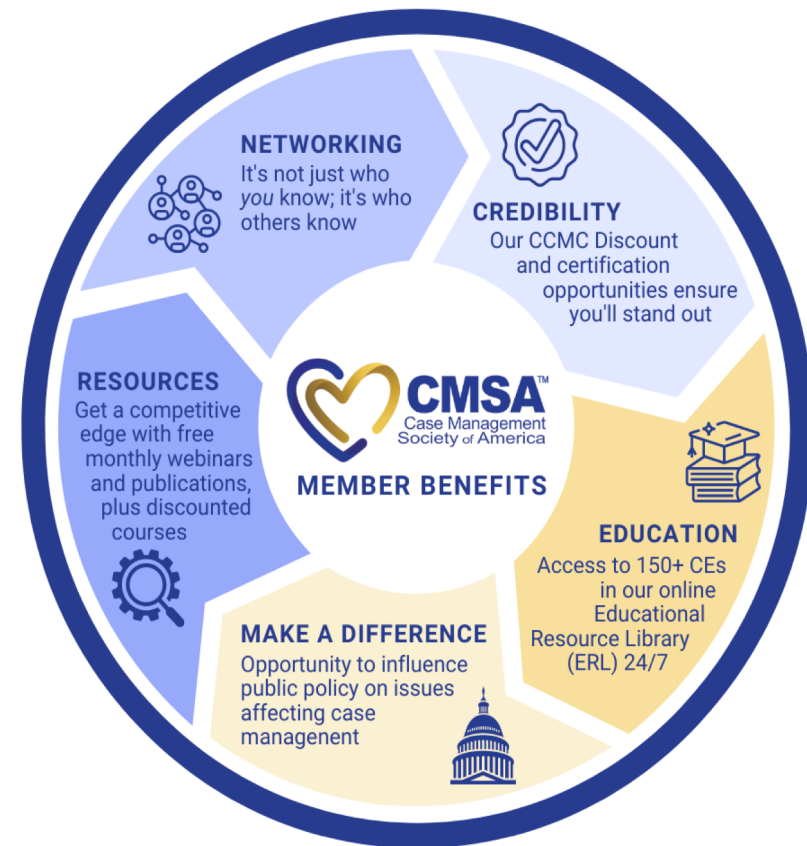Rebecca Perez, MSN RN CCM
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Case Management Society of America

www.CMSA.org

Who is CMSA?

The **Case Management Society of America** is an international, non-profit organization founded in 1990 dedicated to the support and development of the profession of case management through educational forums, networking opportunities and legislative involvement. Unique in its composition as an international organization with over 60 affiliated and prospective chapters in a tiered democratic structure, CMSA's success and strength is its structure as a member-driven society.

NETWORKING
It's not just who *you* know; it's who others know

CREDIBILITY
Our CCMC Discount and certification opportunities ensure you'll stand out

RESOURCES
Get a competitive edge with free monthly webinars and publications, plus discounted courses

CMSA
Case Management Society of America
MEMBER BENEFITS

EDUCATION
Access to 150+ CEs in our online Educational Resource Library (ERL) 24/7

MAKE A DIFFERENCE
Opportunity to influence public policy on issues affecting case management

CMSA's Definition of Case Management

Case management is a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote patient safety, quality of care, and cost-effective outcomes.

CMSA's Consumer/Client Definition

Case managers are healthcare professionals who serve as patient advocates to support, guide and coordinate care for patients, families and caregivers as they navigate their health and wellness journeys.

Philosophy of Case Management

The underlying premise of case management is based in the fact that, when an individual reaches the optimum level of wellness and functional capability, everyone benefits: the individual client being served, the client's family or family caregiver, the health care delivery systems, the reimbursement source or payor, and other involved parties.

Guiding Principles

The Guiding Principles are relevant or meaningful concepts that clarify or guide practice.

The professional case manager applies these principles into practice based on the individualized needs and values of the client

Guiding Principles

- Client-centric, collaborative approach

- Facilitate self-determination

- Holistic, comprehensive and compassionate approach

- Knowledge of diverse populations

- Implement evidence-based care guidelines

- Promote safety

- Promote behavior change

- Awareness and connection to community supports

- Safe and manageable healthcare system navigation

- Pursue knowledge

- Quality and health outcomes improvement

- Federal, state and local compliance

- Competency in applying the Standards of Practice

- Access to available and advancing technologies

Case Management Practice Settings

Case Management Roles and Responsibilities

- Advocacy

- Patient-centered

- Accountable

- Knowledge of funding, healthcare services, human behavior dynamics, healthcare delivery systems, resources, ethical and evidence-based practices, applicable laws, and expected health outcomes

The Continuum of Healthcare and Professional Case Management
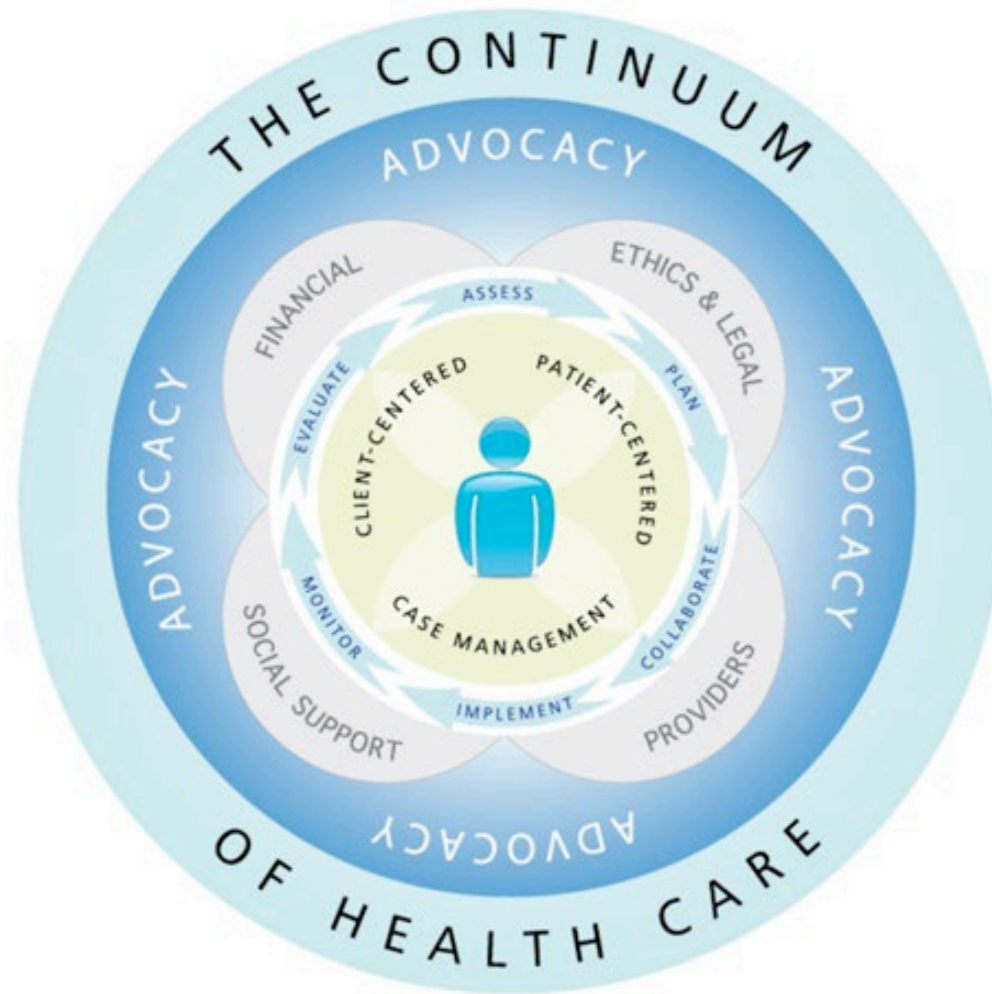
The Case Management Process

Components of the Case Management Process

1. Client Selection and Engagement in Professional CM
2. Assessment: Opportunity identification
3. Development of the Case Management Plan of Care
4. Implementation and Coordination of the Case Management Plan of Care
5. Monitoring and Evaluation of the Case Management Plan
6. Closure of Professional Case Management Services

Standards of Practice for Professional Case Management

A. Qualifications

B. Professional Responsibilities

C. Legal

D. Ethics

E. Advocacy

F. Cultural Competency

G. Resource Management

H. Health Information Technology

I. Client Selection

J. Client Assessment

K. Identifying Care Needs and Opportunities

L. Planning

M. Facilitation, Coordination, and Collaboration

N. Monitoring

O. Outcomes

P. Case Closure of Professional Case Management Services

Standards of Practice for Professional Case Management

Standard A. Qualifications

- Current, unrestricted professional license or certification in a health or human services degree

- Supervised field experience in case management

- Possession of education, experience and expertise

Standard B. Professional Responsibilities

- Incorporate current and relevant research findings into one's practice

- Accountability and responsibility for one's own professional development

- Participate in research, conduct innovative process improvement, present at conferences, disseminate findings and participate in professional organizations

Standards of Practice for Professional Case Management

Standard C. Legal

- Adherence to all federal, state, and local laws and regulations

- If an employer's directives contradict applicable legal requirements, the law will prevail

- Adhere to federal, state and local laws and policies that apply to confidentiality and privacy

- Case managers must demonstrate compliance with laws and regulations, and communication of any actions to all stakeholders

Standard D. Ethics

- Adhere to the tenets of the code of ethics that underlie their professional discipline

- All practice and documentation shall demonstrate awareness of the five fundamental ethical principles
  - Autonomy
  - Beneficence
  - Fidelity
  - Justice
  - Nonmaleficence

Standards of Practice for Professional Case Management

Standard E. Advocacy

- Promote the patient's self-determination, informed and shared decision-making, autonomy, and self-advocacy

- Recognize, prevent, and eliminate disparities

- Recognize that advocacy can sometimes result in conflict

Standard F. Cultural Competency

- Pursue sensitivity and awareness of cultural differences and preferences

- Be responsive to the cultural and linguistic diversity of patient populations

- Identify the appropriate resources related to culture and language that will enhance the patient's health outcomes and well-being

Standards of Practice for Professional Case Management

Standard G. Resource Management

- Align the most effective and efficient use of health and behavioral services with financial resources

- Evaluate the safety , effectiveness, cost, and anticipated outcomes with the needs of the patient

- Communication of available resources

- Transparency in cost and financial responsibility to the patient

Standard H. Health Information Technology

- Use of technology intended to improve communication, patient care, reduce costs, increase efficiencies and improve patient outcomes

- Assist patients with access to technologies

- Understand where information is sources, how it is used and where it is stored

Standards of Practice for Professional Case Management

Standard I. Client Selection

- Use screening criteria that include
  - High emergency department use
  - High outpatient utilization
  - Avoidable hospital admissions
  - Complex health needs
  - Multiple chronic conditions
  - Barriers to accessing care and services
  - Developmental disabilities are complicated by complex or chronic illnesses
  - History of mental illness, substance use, suicide risk, or crisis intervention
  - Impaired functional status or cognitive deficits
- Identify patients that will benefit from case management engagement and intervention

Standard J. Client Assessment

- Use of thorough, individualized, patient-centered assessments
- Focus on the evolving needs of the patient through out the case manager-patient relationship
- Use empathy, patient-centered interviewing skills to identify the patient's needs, capacity for self-management, strengths, and challenges

Standards of Practice for Professional Case Management

Standard K. Identifying Care Needs and Opportunities

- Identification of needs that would benefit from case management interventions

- Identify socioeconomic needs

- Identify potential risks for worsening health

Standard L. Planning

- Work with the patient, family or caregiver to determine achievable goals for health improvement

- Document that the plan of care is based in evidence, includes clinical practice guidelines, includes the patient's care needs, preferences, and role in shared decision-making

- Document the patient's progress for achieving goals and any changes made to the plan of care.

Standards of Practice for Professional Case Management

Standard M. Facilitation Coordination, and Collaboration

- Support transactions of care through communication and active listening with patients, patients' families and caregivers, providers, and all other entities involved in the patient's care continuum

- Evidence of problem-solving skills and techniques to manage any differing points of view

- Ensure care transactions are carried out timely with accompanying documentation

Standard N. Monitoring

- The patient's response to the care plan is documented and shared with the patient, family, caregiver, providers, and any other relevant stakeholder

- Evaluate if care goals and interventions remain appropriate, relevant, and realistic

- Maintain collaboration with the patient and family or caregiver

Standards of Practice for Professional Case Management

Standard O. Outcomes

- Measurements of case management impact:
  - Clinical
  - Financial
  - Quality of Life
  - Patient satisfaction with care
  - Physical functioning
  - Psychosocial and emotional well-being
  - Engagement and Self-management

- Demonstrate efficacy, efficiency, quality, safety, and cost-effectiveness of the professional case manager's interventions

Standard P. Case Closure of Professional Case Management Services

- Case closure is appropriate if
  - The patient has achieved anticipated goals and health improvements
  - The patient or family/caregiver are capable and willing to self-manage
  - Evidence of a conflict of interest
  - Change in reimbursement or health coverage
  - Death of a patient
  - The patient no longer wishes to engage in case management services
  - The patient is not engaging in case management, does not return communications, or the patient cannot be located

Skills, Knowledge, & Ethical Standards

All professions have unique skills, knowledge, and ethical standards that guide the professional in what knowledge and responsibilities are required and how to execute what has been learned.

Three features characterize a profession and professional values:

1. Specialized training
2. Recognition of the need for standards of practice
3. Commitment to provide a service that goes beyond the personal interests of the professional

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The leading membership association providing professional collaboration across the health care continuum.