

Chapter 5 : OhioKAN Service Delivery

Quarterly Support Plan Review

When a Support Plan has been open for more than 90 calendar days, the navigator, coach, and caregiver or parent will conduct a comprehensive review of the Support Plan together to ensure that all needs have been identified and addressed with appropriate referrals and advocacy support. While similar to the structure of the Support Plan check-in process, the Quarterly Support Plan Review will revisit each aspect of the Support Plan with the family, discuss progress to date, and ensure alignment between the family's goals and the Support Plan.

Prior to Conducting the Quarterly Support Plan Review

The Navigator schedules a time to meet with the caregiver or parent to conduct the review together. A regularly scheduled Support Plan check-in may be repurposed for this activity. The Coach and Navigator review and discuss the OhioKAN Family's Support Plan to ensure understanding of the family's network of support, strengths, needs, referral history, and progress since opening their service episode. The Coach provides recommendations on how to approach specific sections and additional referral resources.

During the Quarterly Support Plan Review Meeting

The Navigator, Coach, and caregiver or parent review the summary notes from the Support Plan to confirm the Family's network of support, strengths, and needs identified when the service episode first opened. The Navigator asks if any events have occurred that have changed the make-up of the household. If yes, the navigator will update documentation accordingly.

The Navigator, with the Coach's additional support, will ask about each need and its referral(s) listed in the Support Plan to understand the following:

- How each referral addressed the identified need
- If there were any challenges or barriers to accessing each referred service
 - If the family cannot access a service, this should be documented as a service gap in the data system

- If a family does not intend to use a referral the service should be end dated in the data system
 - Example: if the family received multiple referrals to meet the same need such as three different childcare providers, and selects one of these services, the other two should be end dated
- How the Navigator provided navigation and advocacy support to ensure the Family accessed the service
- Whether additional referrals or advocacy support were needed to address the identified need.
 - If yes, Navigator, with Coach's support, suggest additional referrals and action steps for advocacy support. Revise the Support Plan to include changes accepted by the caregiver or parent.

After reviewing each need and its referrals in the Support Plan, the Navigator asks if the Family had any needs that were not identified in the Support Plan.

- If yes, the Navigator revises the Support Plan to document these needs. The Navigator, with Coach's support, suggests referrals to address these needs and revises the Support Plan to include those accepted by the caregiver or parent.
- If no, the Navigator asks if the caregiver or parent feels all their needs have been met at this time and if they are ready to close the service episode.
 - If yes, close the service episode
 - If no, Navigator confirms that the Support Plan is accurate and includes all the Family's needs (identified prior to and during the Quarterly Support Plan Review meeting)

Referral Considerations

The Navigator suggests service referrals that are responsive to the parent or caregiver's priority concerns and informed by the BASICS and Support Plan. If the family needs additional or different referrals, these should be chosen in collaboration and partnership with the parent or caregiver taking the family's Support Plan into consideration. The following are things to consider when making referrals:

- Refer to organizations near where the OhioKAN Family lives and/or works
- Take into consideration the participant's past experiences, whether positive or negative, with organizations in their area. If an OhioKAN Family has concerns about a referral or organization, accommodate those concerns by suggesting an alternative.
- Consider transportation access (e.g., if the participant is traveling on public transportation, select an organization that is easily accessible via public transit)
- If a warm hand-off by phone, email, or in-person is needed, ensure there is a plan or scheduled time to do so and document this in the SACWIS and in the Support Plan.

- If the family has multiple needs, provide referrals to address these needs. Then, as appropriate, build out a plan with them of when and how they will access those referrals and what support they will need (e.g., reminders, assistance filling out forms, language or transportation support). Record this all in the Support Plan, specifically in the Support Plan Table.
- Use the Support Plan to prioritize and sequence support for the most urgent referral needs first. Sequencing does not mean the referrals themselves are withheld until a later date. All referrals should be provided as soon as the need emerges. However, the advocacy support related to referrals may include a plan to target one or two referrals at a time so that the number of initial engagements with service providers does not overwhelm the family.

Advocacy Supports

Targeted advocacy and navigation support to assist the caregiver and parent in achieving their Support Plan goals and accessing the services they have been referred to. The navigator may provide the following advocacy support as part of their Collaborate Service Level delivery:

- **Warm hand-off referrals**
 - You can offer to call an agency with a family on the phone, or call an agency on a family's behalf to make the initial introduction.
- **Assistance with an application**
 - You can offer to assist a family with an application for a social service benefit (SNAP, childcare, SSI, etc.) virtually or in person if there are barriers to completing the application virtually.
- **Flexible Funds and Hard Goods**
 - If a family needs hard goods like clothing, beds, car seats, etc., for their kinship or adoptive children, you can offer to directly link families to organizations and agencies for short-term assistance in obtaining these items, and follow up support.
 - If you have exhausted all community-based options for a family to meet a need for funds or hard goods, you can apply for flexible funds and hard goods through OhioKAN.
- **Benefits coordination**
 - If the family has questions about eligibility, a benefits appeal process, or would like support with an application, or other benefits challenges that require more specialized expertise, you can offer to connect them with the OhioKAN Benefits Coordinator.
- **In-person services**
 - In select situations, you can offer to join a family in a meeting with the child's school, social worker, etc. in the community to provide extra advocacy for the family.
 - If there are barriers to providing virtual support, you may also offer to visit the family in their home to assist with applications, etc.

- **Collaboration with caseworker, state, or local agencies**

- You can offer to coordinate with the family's case worker, if they have one, or reach out to local/state agency contacts to advocate alongside them.