

Methods and Timeframes for Responding to MFP Re-Referrals:

Non-Colbert Agencies

A “Re-Referral” is an additional referral made for a potential MFP participant with an existing MFP case in CRM. Due to the MFP Referral Policy, an unlimited number of referrals may be made for the same person. Re-Referrals may come from any source: the potential participant, family, friends, Ombudsmen, nursing facility staff, physicians and others. Re-Referrals may be made for many reasons including: the referring individual being unaware that other referrals have been made; the absence of any apparent response to the original referral; or changes to the status of the referred individual.

A re-referral on an existing MFP case is assigned to the same, active agency and to the same owner of the existing case. CRM creates a “Task” for the TC to address the re-referral. The “Task” will remain on the TC’s “My Activities” list until there has been follow-up and the “Task” is marked as “Complete.” Note: Agency supervisors can go to “All Activities” to see re-referrals for all users at their agency.

All re-referrals require follow-up within 10 days of receiving the “Task.”

Face-to-face follow-up is required on all re-referrals for participants who have **not** been seen face-to-face within the past six months.

Telephone follow-up with the participant or guardian is acceptable when:

- The most recent case note on the case shows that the participant has been seen face-to-face within the past six months.
 - TCs are to contact nursing facility staff to assist with completing telephone follow-up with participants when the TCs have been unable to reach the participant after three attempted calls.

Telephone follow-up with facility staff is acceptable when:

- The most recent case on the case shows that the participant has been seen face-to-face within the past six months; and
- The participant has previously been determined to be ineligible for transition due to severe dementia or to having physical or mental health needs which cannot be adequately and safely met in the community. The purpose of this follow-up is to determine if the individual’s situation has changed or improved enough to warrant another face-to-face assessment.

MDS-Q Specific Guidelines:

- Face-to-face follow up is required on all re-referrals for participants whose re-referral is due to a positive response to the MDS-Q question asking if the participant wants to talk with someone about the possibility of a transition to the community.
- HOWEVER, cases involving individuals who have previously been determined to be ineligible for MFP transition due to severe dementia or to the presence of physical or mental health needs which cannot be adequately and safely met in the community *do not* require a face-to-face follow-up in response to an MDS-Q referral.
 - In these instances, a telephone follow up is sufficient to determine if the individual's situation has changed or improved enough to warrant another face-to-face assessment.

Documentation of the follow-up contact should be done by:

- Completion of a Case Note in CRM for all re-referral follow-ups for cases in any stage, noting the type of follow-up and the outcome;
- Completion of a Form A for all face-to-face re-referral follow-ups on cases in "Contact" stage; and
 - ****PLEASE NOTE:** After any re-referral follow-up, ensure that the Form A on the case is accurate and reflects the individual's current status of, "Yes" or "No" under "Individual is considering MFP."
 - While a case note is sufficient to document a telephone re-referral follow-up on a case in "Contact" stage, if the "Yes/No" status under, "Individual is considering MFP" changes, it must be documented with a Form A reflecting that update.
- The "Task" on the TC's "My Activities" list should be marked as "Complete."

****PLEASE NOTE:** The above guidance and timelines are specific to MFP re-referrals. Face-to-face follow up on **all new MFP referrals** must still be completed within 10 days and documented with a Form A.