

# DSP Interim Intake Process

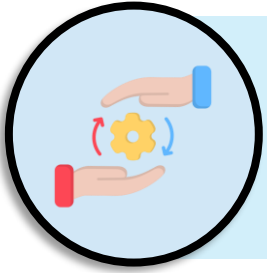
March 2024

# Changes to the intake process for the Disability Support Program



## 1. Different Paths for ESIA and DSP

- In December 2022, it was announced that the intake process for ESIA and DSP would take different paths, effective April 1, 2024.
- This means that the way applicants interact with DCS will vary based on whether they are applying for ESIA or DSP.



## 2. DSP Intake Transition

- The DSP intake function will transition from Consolidated Client Service Unit to the Disability Support Program.
- Due to the changes and priorities attached to the DSP Remedy, DSP will temporarily pause using CCM for intake applications, instead using ICM for now.



## 3. Deferred Implementation of Intake Process

- During the 6-8 month transition period, DSP Admins will record & register in ICM.
- The interim process calls for 3 Care Coordinators to focus exclusively on pre-screening applicants **before** assigning to regions for full assessment, cutting down on inappropriate referrals and unifying pre-screening for consistency.



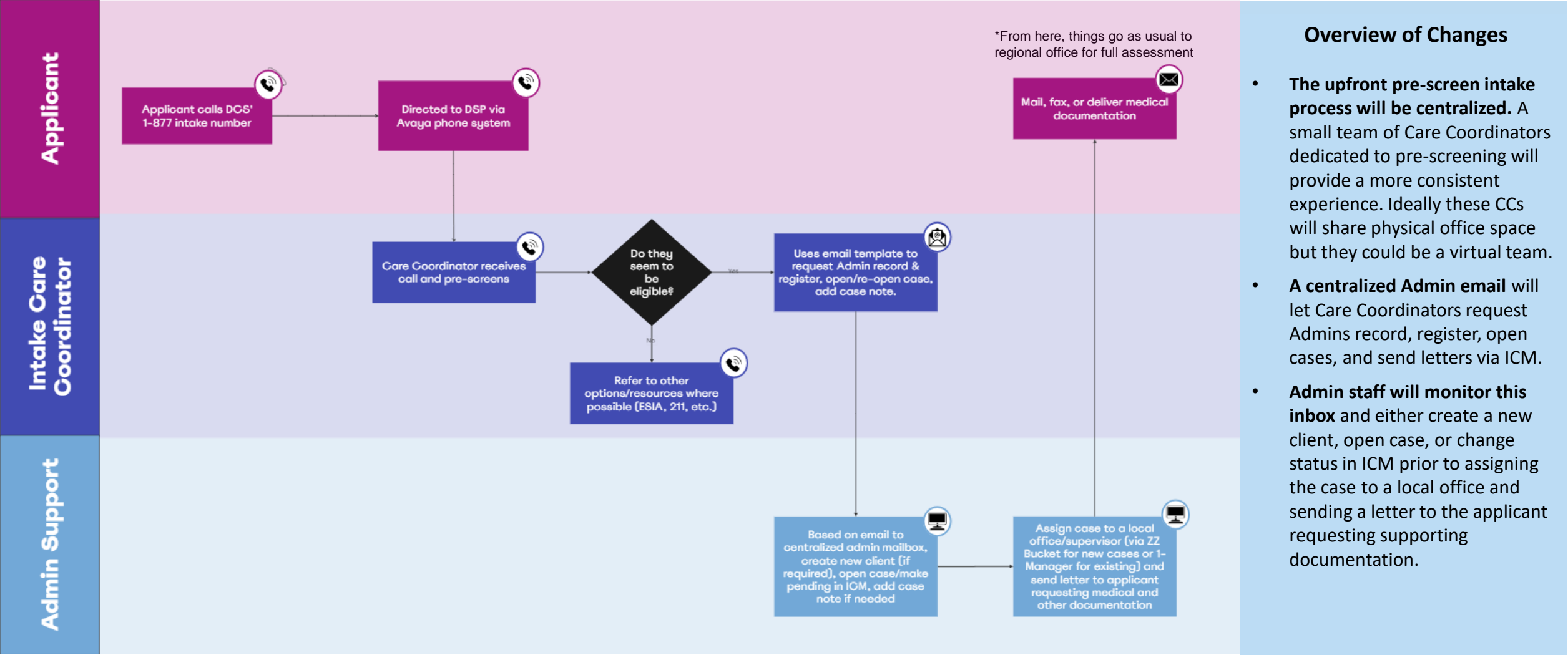
## 4. Future DSP-Specific Intake Process

- DSP is actively working on designing and developing a DSP-specific intake process as part of the Remedy roll-out.
- This new intake process, along with all new Remedy workflows, will be designed and implemented in CCM.
- Opportunities and mechanisms for feedback will be developed so this interim process can help inform DSP's future Remedy intake process.

# DSP Interim Intake Process

As a viable short-term option for the DSP intake process, we have designed a streamlined process that gets DSP applicants on the phone with a care coordinator earlier in the process, using the ICM system they're most familiar with today.

The process map below is the **upfront screening process** before applicants are moved to local office for eligibility and assessment, after which the process remains the same as today.



# DSP Prescreen Process

## What's Changing

- The biggest change is that instead of a central intake team sending a high volume of inappropriate referrals through to DSP, Care Coordinators who know DSP will talk with callers early in the process, setting the right expectations up-front or redirecting to more appropriate supports.
- The cases that do land in ICM will be pre-screened and much more likely to be eligible for DSP.
- Admin staff will use ICM to record and register in ICM according to Care Coordinators' requests. This happens after the pre-screen call, meaning fewer duplicate persons, fewer files to follow up on.
- The Avaya phone system will route callers to DSP offices. We will provide training and support in Avaya to those who need it.

## What's Not Changing

- After the pre-screening call, applicants moving forward will be placed in the ICM bucket of their nearest DSP office where a supervisor will assign the case to a Care Coordinator for full assessment.

## What's Needed

While we work to set up a team of Care Coordinators dedicated to pre-screening applicants, Care Coordinators in each region will need to answer calls and pre-screen applicants beginning April 2<sup>nd</sup>. Admin staff will need to record/register, re-open DSP cases, and send letters.

### 1. Care Coordinators in each region pre-screen applicants starting April 2<sup>nd</sup>

Training for those Care Coordinators next week will include:

- A brief overview of things to focus on during the pre-screen
- The email template to request Admin staff record & register in ICM
- The Avaya phone system, if necessary

### 2. Admin staff will do the record & register in ICM

- ICM security will be granted to Admins to fulfill CC requests to create people and open cases.
- We will provide step-by-step training in ICM.
- Admins will also be responsible for sending letters to screened applicants requesting medical documentation.