



Cúram 8.1.3

Common Intake Guide

Note

Before using this information and the product it supports, read the information in [Notices on page 61](#)

Edition

This edition applies to Cúram 8.1, 8.1.1, 8.1.2, and 8.1.3.

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1 Common Intake Guide

Common Intake matches a client's needs to programs and community services. It helps agencies address client needs with a configurable intake process for needs-based programs such as cash assistance or unemployment benefit, and protection-based programs such as child welfare.

1.1 Introduction

Purpose

The purpose of this guide is to provide an overview of Common Intake (CCI). After reading this guide, the reader should have a clear understanding of CCI, the ways in which it can be used to match a client's needs to programs and community services, and how it helps agencies address these needs by providing a configurable intake process for needs based programs.

In order to best understand these concepts, the guide should be read in full. The guide is not intended to be used as a training or user guide.

Audience

This guide is intended for business analysts working within a social enterprise organization. It is assumed that this audience is familiar with the basic concepts of Social Enterprise Management (SEM) and has a strong knowledge of the organization's business requirements.

Prerequisites

The reader should be familiar with how the organization delivers benefits and services to clients. To better understand the topics covered in this guide, it is suggested that the reader has previously read the *Integrated Case Management Guide* and the *Cúram Participant Guide*.

Chapters in this Guide

The following list describes the chapters within this guide:

- **Common Intake Overview**

This chapter discusses the two-fold aim of CCI - to provide a means for the workers to carry out the functions required as part of the intake process and to provide a collaborative 'No Wrong Door' approach to the intake process for clients applying for benefits. The chapter also provides a high level overview of the main components within CCI.

- **Identifying the Client**

This chapter describes the process for searching for a client and registering him or her in the system. It also provides information on the intake process for an anonymous person, maintaining person and prospect person information, and the use of the citizen account in CCI.

- **Triaging a Client and Using the Results to Address Client Needs**

This chapter describes the process for triaging a client to identify the client's needs and responding to those needs in an expedient manner. The chapter also provides information on how to perform triage and how the results of triage can be used to respond to the client's needs.

- **Screening Clients to Determine Potential Eligibility for Programs**

This chapter provides information on the client screening process used to determine potential eligibility for one or more programs.

- **Life Cycle of a Client's Application for Benefits: From Creation to Disposition**

This chapter provides information on the life cycle of an application for benefits from creation to disposition. It also describes the various components of the application process and associated configuration settings.

- **Helping a Client Deal with a Life Event**

This chapter describes the process for recording a life event and how the results are used to recommend programs and services for the client.

- **Referring a Client to External Agencies and Service Providers**

This chapter provides information on what a referral is and how a referral is created and sent to a community service provider and/or external agency.

- **Case Worker Tools**

This chapter provides information on the tools that are available for workers throughout the intake process, including the advisor, notes, PCR (Priority, Complexity, Risk), alerts and user home page tools.

- **Defining the Intake Process**

This chapter provides an overview of the key elements of CCI that can be configured by an agency to meet its needs.

1.2 Common Intake Overview

What is Common Intake?

Most Social Enterprise Management (SEM) agencies, including agencies that deal with income support, child care, and family services, require clients to complete an intake process in order to establish a claim or case for the products and/or services provided by the agency. Traditionally, SEM agencies have had a siloed approach to product and service delivery, including the intake process. A single client may have to go through a similar intake process with several different agencies or intake workers in order to receive benefits or services. The same information may be captured multiple times, and time lags can ensue as clients wait for decisions on claims before deciding whether they need to apply for other benefits or services.

The aim of Common Intake (CCI) is two-fold. Firstly, it aims to provide a means for the workers in an agency to carry out the functions required as part of the intake process in a cohesive and usable manner. Secondly, it aims to facilitate agencies in providing a collaborative, 'No Wrong Door' approach to the intake process for clients applying for benefits. This reduces the number of contacts a client has to make in order to access benefits and/or services across multiple agencies, by providing workers with the facility to carry out the intake process across multiple programs.

Intake Process for Needs-Based Programs and Protection-Based Programs

Intake processes differ by agency. In particular, the intake process for needs-based programs such as cash assistance and unemployment benefits, differs greatly from the intake process for a protection-based program such as child welfare. For needs-based programs, the client is usually required to fill out an application form, and the agency determines eligibility for programs based on the information provided in the application. The intake process may include:

- triage
- screening
- application
- authorization of benefits

For protection-based programs, the process is triggered by a report of abuse or neglect, resulting in the agency potentially investigating the report, and putting measures in place to ensure that the client is safe and not at risk of further abuse or neglect. The intake process may include:

- allegation management
- safety, risk assessment and planning
- legal proceedings
- investigation management

CCI is primarily focused on needs-based program intake processes, and provides functionality for the following intake processes:

- triage
- life Events
- screening
- application
- referrals

CCI enables collaboration between needs-based and protection-based program agencies by providing external agency referrals to, for example, a child welfare agency as part of a needs-based program intake. Cúram provides a protection-based program intake as part of Child Services (CCS). See the *Cúram for Child Welfare Guide* for more information.

Configurable Intake Process

CCI enables an agency to define the intake process to meet its requirements. For example, an agency may wish to include the triage, screening, application, life events and referrals steps as part of its intake process. Another agency may want to include only the application step in its intake process. See [1.10 Defining The Intake Process on page 42](#) for more information.

No Wrong Door

The No Wrong Door approach provides clients with a universal gateway to community services and government programs. It enables clients to approach the agency with the problem they need to address, rather than a preconceived idea of the programs or services they think that they should receive. No Wrong Door provides workers with the capability to identify the client's needs upfront and identify the best way to proceed with the client, for example, to refer the client to an external agency or community service, to screen the client for eligibility, or to take an application

for benefits. No Wrong Door also incorporates the concept of Priority, Complexity, Risk (PCR), where the agency can provide a differential response based on the client's situation. For example, if a client is homeless and in urgent need of food and shelter, the agency may prioritize that client's application for benefits so it is processed quickly, and assign a specialized worker to work with the client.

CCI provides a flexible approach to the intake process, in that there is no set path that workers must follow. Each of the steps in the intake process is optional for a worker, and the worker decides on the best path based on the needs of the client. For example, if a new client presents at an agency with a number of needs, the intake worker may decide to start by carrying out a triage to identify the client's basic needs. Once the client's needs have been established, services and programs can be identified which address these needs. The intake worker may then continue with a screening to determine the programs for which the client is potentially eligible, and finally complete an application for one or more of the programs. Another client may approach the agency in order to apply for a specific program, in which case the worker can skip the triage and screening steps, and proceed directly to take an application for the program the client is requesting.

User Roles

An agency may have one or more user roles that perform all or part of the intake process. CCI provides for the following user roles:

- **Intake Worker**

This user is the first point of contact for the client in the agency, and is responsible for determining the client's needs and identifying the best path to address those needs. The intake worker can carry out triage, screening, life events, referrals and application processing.

- **Eligibility Worker**

This user is responsible for the final determination and authorization of benefits for a client. This user may also be responsible for the ongoing eligibility and outcome management for the client once the intake process is complete. See the *Integrated Case Management Guide* and the *Cúram Outcome Management Guide* for more information.

- **Intake Worker Supervisor**

This user is responsible for supervising and managing the workload of the intake workers in an agency.

Addressing the Client's Needs

Clients typically approach an agency with a program or service in mind that will meet their needs. This can result in clients applying for programs for which they are not eligible, or not being aware of the full range of programs or services that are available to them. CCI addresses this issue by providing features to aid the worker in identifying the needs of the client and then determining the best response for that client.

A client may approach an agency with one or more needs that he or she needs help to address. Client needs are broadly categorized as follows:

- food
- shelter

- safety
- health
- finance
- education

CCI provides a triage feature and a life events feature which workers can use to identify the client's needs and determine the best response for the client. Following on from a triage or life event, the worker can continue with a screening, determine the client's potential eligibility for programs provided both internally in the agency, and externally by other agencies. The worker also has the option to create a referral to a community service provider, or to continue with an application for benefits.

Identifying the Client

When a client approaches the agency, the worker searches to determine whether he or she is an existing client of the agency. If the client is new, the worker can register the client and proceed with the intake process. Alternatively, the worker can continue with a triage, life event, or screening for an anonymous client, if the client does not wish to identify themselves. See [1.3 Identifying the Client on page 14](#) for more information.

Determining a Client's Needs using Triage

Triage allows workers to quickly gauge a client's needs when they approach the agency. For example, a client may have an immediate need for food for his or her family. Triage will identify these needs and provide a list of suitable services and programs to help meet those needs.

Identifying Client Life Events and Dealing with them Effectively

CCI provides functionality which allows the agency to effectively deal with significant events in a client's life. For example, a client may contact the agency to report a life event, such as the birth of a child, marriage, or a change in employment. The process for managing life events differs based on whether the client has an active case(s) or not. If the client approaches the agency and tells the worker that a specific life event has occurred, and the client does not have an active case, the worker can select to run a triage-style script directed towards capturing information about the specific life event, and any other related life events that may have occurred.

If the client has an active case and reports a life event that impacts the case, the life event details can be captured and transmitted to any active case(s) that are affected.

Screening Clients to Determine Potential Eligibility for Programs

CCI provides the underlying architecture to allow an agency to screen for eligibility. Screening provides the worker with the capability to determine whether a client is potentially eligible for one or more programs based on answers that are provided to a set of high level questions. Based on the determination from a screening, the client can decide whether to proceed and apply for benefits.

Screening results are determined by a short set of eligibility rules, which are run on the answers that are provided by a client. CCI uses the Cúram Intelligent Evidence Gathering (IEG) infrastructure to enable agencies to configure the guided set of screening questions specifically for their programs.

Processing Client Applications for Programs

In order to file a claim for benefits for most programs, a client must submit an application. Clients must provide required information on personal details, household composition, income, expenses, employment, education, etc. This information becomes evidence on the client's application and is used to determine eligibility. An application can be submitted through the following channels:

- in the agency (face to face)
- by phone
- online via a citizen portal (either Cúram Citizen Portal, or an external system)
- by post
- agency to agency referral

When an application is submitted, there are a number of processing steps which are carried out either manually by the worker, or automatically by the system, depending on the agency and the program. The intake worker and the eligibility worker are both involved in this process.

Referring a Client for Services

A referral is an email which is sent to an external provider or agency, informing them that a client is in need of their services or benefits. The worker has the facility to create referrals for services or programs provided externally at any stage of the intake process. The worker may identify that the client would benefit from a particular service or program while going through the application or screening. There are also points in the process at which the system recommends services or programs based on information provided by the client, i.e., a triage and or life event. The worker can create referrals to these recommended services and programs provided by external agencies. For More information, see [1.8 Referring a Client to External Agencies and Service Providers on page 39](#).

1.3 Identifying the Client

Introduction

CCI facilitates the front line work performed by the intake worker by allowing them to quickly search for a client and register him or her in the system as soon as the client contacts the agency. At the time of initial contact, the intake worker can determine if the client is already registered in the system or if he or she is new to the agency. The client may not have all the necessary information for a full registration, so the intake worker can perform a quick registration using minimal client data. A full registration can be performed at a later date when all the required information is available. Alternatively, a client may wish to remain anonymous at the start of the intake process. In this instance, the worker can start intake for an anonymous person without entering any client data.

Searching for a Client

The intake worker kicks off the intake process by searching for the client in the system using minimal search criteria. The intake worker can review the search results and decide whether the

details of anyone already registered in the system matches the client. The intake worker has the option of registering the client as a prospect or a fully registered client.

Person search functionality is provided which allows the intake worker to search across all the persons and prospect persons registered on the system.

Registering a Client

Client registration allows the agency to provide services and enroll clients in programs. The client registration process places a client in a specific role and defines the participant type of the client. In CCI, the registration process will result in the creation of either a person or prospect person participant role. The system stores information on the participant including personal information as well as Common Intake specific information relating to triages, screenings, applications, interviews, referrals, life events, notes and cases associated with the participant.

Participant registration validates that all necessary information is collected. It also checks to determine if a participant has already been registered. This prevents the same participant from being added to the system more than once.

Starting Intake for an Anonymous Person

A client may visit an agency to find out their potential eligibility for programs or services while remaining anonymous. The intake worker has the facility to carry out a triage and/or screening for a client to identify potential services and/or programs that may help them meet their needs without searching for the client or registering them in the system. If the client wants to proceed with the application process, he or she must then provide name and address details.

In CCI, an intake worker can start the intake process for an anonymous person. When the intake is begun, system will create a prospect person record for the anonymous person and assign a unique identifier to the client (for example, Anonymous Person 1). The worker can then perform triage and screening activities for the client.

Registering a Prospect Person

Individuals can be registered as prospect person participants when the agency does not have enough information to register them as person participants. Prospect persons can be registered using the Quick Registration process. This feature provides a way to register a prospect person by entering minimal information. A prospect person may also be registered as the result of the anonymous person registration process. Prospect persons are modeled similarly to person participants but there are fewer information requirements during Quick Registration. If the agency receives more information on the client after registering them as a prospect person, the prospect person can then be registered as a person participant. For more information on prospect persons, see the *Cúram Participant Guide*.

Merging a Prospect Person with a Registered Person Record

If it is found that a prospect person record and a participant record exist for the same client, the prospect person record can be merged to the participant record. This can be done via the search and clearance process.

Registering a Person

Individuals can be registered as persons on the system. The person registration process validates that all of the necessary information is collected during registration. It also checks to determine if a participant has already been registered to prevent the creation of duplicate person records.

When the worker has all of the required information for the client, the worker can select to complete the registration.

Maintaining Person and Prospect Person Information

Person and prospect person information can be maintained and updated after registration. This is performed manually for most categories of information so that users can keep the information accurate and up-to-date. For example, a user can add a new address for a person.

Several categories of information are added to and maintained automatically by the system. For example, triage records are automatically added every time the worker submits a triage on behalf of a client.

Information that is common to the person and prospect person participant types and specific to CCI, includes:

- triages
- screenings
- applications
- interviews
- referrals
- life events
- notes

Citizen Account

The Citizen Account is a facility within that provides the client with a fast and convenient way to securely apply for programs and for the caseworker to conduct triage and screening. It also provides the client with access to their home page, applications, screenings, triages, life events, referrals, activities, and contact information. Cúram Common Intake (CCI) provides the facility for the internal worker to create a Citizen Account on behalf of the client and link the account to the person's home page.

An account can be created for the client only if one does not exist already in the system. The system displays a wizard that allows the caseworker to enter the login credentials for the Citizen Account. After the caseworker enters this information, the Citizen Account is created. Citizen Accounts also can be linked to the client's home page.

Note: The functionality to create a Citizen Account is available only if the customer also is licensed for Universal Access.

Citizen Account

After clients create a secure Citizen Account, they have access to a range of relevant information, and can track and manage their interactions with the agency in the account.

1.4 Triageing a Client and Using the Results to Address Client Needs

Introduction

Identifying a client's needs and responding to those needs in an expedient manner is an essential function of any social services agency. In a social context, everyone has six basic needs: food, shelter, health, education, finance, and safety. All of these needs are intertwined in a complex relationship. When one of these immediate needs is not being met, it is likely that the person is suffering in other areas too. Triage allows the worker to quickly gauge a client's needs when they phone or visit by asking a core set of fundamental questions. The result allows the worker to understand the client's situation in relation to the core needs.

In CCI, Triage can be performed by the worker resulting in a list of suitable services, service providers, and programs to help meet the client's needs. For example, a client named John Smith has recently lost his job. He arrives at the agency and it is determined that he is behind on his monthly rent payments and has an immediate need for food for his family. Triage will identify these needs and provide a list of suitable services and programs to help meet those needs. In this example, John may be recommended to apply for rent relief and food assistance.

Triage can be performed at any time by the worker, but it is normally used when a client needs help and they are not familiar with the services and programs they are eligible to receive.

Running a Triage

As soon as the client arrives at an agency office or calls by phone, a triage can be performed to ascertain the client's needs. Triage can be performed for an anonymous person, prospect person, or registered person.

When performing a triage the worker asks the client a short set of questions which aim to capture information about the client's situation. Answers for triage questions are multiple choice which means a triage can be performed quickly. An answer must be provided to at least one of the triage questions to view the results.

Note: Once a triage has been started, it cannot be saved and opened at a later point. The worker can either complete or discard it.

Triage Results

Based on the answers the client has provided, a list of recommended community services, service providers, and/or government programs most appropriate to the client's needs are displayed to the

worker. Urgent alerts may also be displayed on the results page to highlight any emergency needs that the client may have. The results are derived using a Cúram Eligibility Rule set (CER) which runs after the worker has submitted the triage answers. From the results of a triage, the intake worker can do the following:

- create referrals to community services and/or external program agencies,
- continue to screen the client for potential eligibility for recommended programs,
- apply for benefits,
- respond to an emergency if one is identified.

A history of triage recommendations is kept for each completed triage. The history record stores the triage date and time, alerts, and the recommended programs and services. The sections below outline these features in more detail.

Alert Text

Based on the answers provided by the client, it may be necessary to alert the worker to important information. For example, if the client has responded that he or she has an emergency need then it may be necessary to inform the worker to call emergency services immediately. Multiple alerts can be displayed based on the client's responses. Alerts can be defined in the triage rule set and subsequently displayed on the triage results tab.

Mapping Services to Providers

CCI provides the worker with a list of recommended community services to address the client's basic needs. Recommended services providers are displayed in a map which allows the worker to easily select the most appropriate service. A number of preselected services are initially displayed which prevents too many providers from being displayed on the map.

The map displays providers specific to the agency and client location. The map also allows the worker to search for providers in a particular area. For example, if the worker enters 'Springfield' then all the providers for the selected services in the Springfield area will be displayed on the map.

Viewing Provider Details

CCI provides detailed provider information to allow the worker to find a provider best suited to the needs of the client. The provider details are accessed by selecting the provider on the map. Once selected, the intake worker can select to view more information about the provider.

Referring Clients to Community Services

In line with the No Wrong Door approach, workers can refer clients to community service providers who may be able to help meet their basic needs. The agency may not provide a program for the client's need or the client may be deemed ineligible for a program. In these instances, the worker can refer the client to a service provider that may be able to help.

Workers can create referrals to community service providers based on the triage results for the client. The referral is a simple form that is pre-populated with the provider information and any available client contact information. The name fields on the form are editable to facilitate the scenario where a referral is created for an anonymous person and the client wishes to provide

their name. The worker may send, edit or delete an unsent community service referral. By selecting to send a referral, the referral will be sent to the provider via email.

Recommending Government Programs to Clients

In addition to providing the worker with details of community services that meet the client's needs, the system also provides information on government programs for which the client may be eligible. From the results of a triage, a worker can screen, apply, or create a referral for a number of government programs that may meet the client's needs. Depending on the answers provided by the client in the question script, the CER rule set will identify programs provided internally by this agency, or externally by other agencies. For the recommended internal programs, the worker has the ability to screen or apply for benefits. For more information on screening and the application intake process, see [1.5 Screening Clients to Determine Potential Eligibility for Programs on page 19](#) and [1.6 Lifecycle of a Client's Application for Benefits: From Creation to Disposition on page 22](#).

When a program is provided by an external agency, the worker may choose to screen for the program or create a referral to the agency on behalf of the client. CCI provides the ability to create a referral to an external agency from the triage results page using a 2-step wizard process. The wizard is pre-populated with the program details and any available client contact information. The worker may send, edit, or delete an unsent program referral. These three actions can be performed on unsent referrals. By selecting to send a referral, the referral will be sent to the provider via email. For more information on referrals, see [1.8 Referring a Client to External Agencies and Service Providers on page 39](#).

Providing Context Sensitive Help To Case Workers

The advisor is a tool that provides context sensitive tips and reminders to the worker throughout the intake process. When the advisor is accessed from triage, it displays advice based on data that was entered during triage. The advice guides the worker towards areas that may require attention. For example, the advice may inform the worker that based on the most recent triage results the client should be screened for food assistance and cash assistance and will provide a link to suitable programs based on the triage results. From there, the worker can choose to complete the screening process for the recommended programs. For more information on the advisor, see [The Advisor on page 40](#).

Triage Notes

The worker can capture and maintain notes that are specifically related to a triage record. Notes functionality is accessed from the triage results tab. For more information on notes, see [1.9 Case Worker Tools on page 40](#).

1.5 Screening Clients to Determine Potential Eligibility for Programs

Introduction

This chapter provides details about screening for eligibility which allows a client to determine if he or she is potentially eligible for one or more programs based on a set of high level, guided questions configured by the agency.

The intake worker can perform a screening for an anonymous person, prospect person, or registered person. Potential eligibility for the selected programs is determined by running eligibility rules against the client's responses to the questions. CCI provides the infrastructure to allow an agency to plug in its own screening rules. A list of recommended government programs most appropriate to the client's needs are then displayed to the worker. Urgent alerts may also be displayed if the system identifies that the client has an emergency need.

Once a screening is completed, the intake worker has the option to apply for programs available in the agency, create referrals to programs available from external agencies, or respond to an emergency if one is identified.

A history of screening recommendations is kept for each completed screening and is accessed from the list of screenings for the person. The history record stores the screening date and time, alerts, and the recommended programs.

CCI does not have any preconfigured screening scripts or rules, however the underlying infrastructure allows an agency to configure its own scripts and rules for the programs it wishes to have available to its workers.

Screening a Client for Potential Eligibility

CCI provides flexibility to enable an intake worker to screen a client from a number of different areas in the application. The intake worker can screen for eligibility from the triage recommendations page. Alternatively, the intake worker can skip triage and go straight to screening for eligibility. Screening for eligibility is an optional step for the intake worker, he or she may decide to skip the step completely, or return to it at a later stage in the process. If an application has been received via the online portal, or in the mail, it's less likely that the intake worker would carry out screening for eligibility, as the client has already made the decision themselves to submit an application.

Screening for a Specific Program or a Range of Programs

Some agencies only perform one type of screening on their clients while other agencies may run multiple screenings. To address these varying requirements, CCI provides the facility to configure the use of single or multiple screenings in the system. For example, an agency may choose to configure multiple screening categories in order to run a health and human services screening and an unemployment insurance screening for their clients. When multiple screenings are configured in the system, the first step in the screening process is to select the screening category. If the single screening option is configured in the system, then the selection of the screening category is bypassed and the case worker is brought directly to a new screening. Here they can select the programs the client should be screened for.

Once the intake worker begins the screening script, a guided set of questions is asked (based on the agency's configured script), at the end of which the configured rules are run to determine potential eligibility for programs configured by the agency.

The screening results are an indication of potential eligibility and not a guarantee that the client will be eligible for anything. The results may form the basis of a decision by the client as to whether to proceed with the intake process or not. If the client chooses not to proceed, then the intake worker can point him or her to other agencies or service providers which may be able to help. If the client decides to proceed with a claim, then the intake worker can start the application for any program for which the agency has configured an application process.

CCI Screening enables the worker to discard the screening without saving it or save it for later completion. In order to prevent the creation of duplicate in-progress screening records, the user may not create a new screening for a program that already has an in progress screening. For example, the intake worker starts to screen a client for a social assistance program and saves the in progress screening script. Later, when the worker starts a new screening for child care and medical assistance programs for the same client, he or she must either resume or discard the existing in progress screening for the social assistance program.

Programs that Clients can be Screened For

The agency can configure the programs that clients can be screened for. The configured business rules are applied to the data gathered to determine potential eligibility for the programs. Each program should have its own set of business rules that are used to determine eligibility.

Capturing Client Evidence for a Screening

The agency can configure a wide range of evidence types for a screening. A screening can be submitted once the minimum required information has been entered. Groups of questions are presented sequentially, the answers to which are completed by the caseworker as the screening is progressed. The questions can be categorized, based on the type of information that is captured on the application, for example, household, benefits, income, resources, and expenses. CCI uses the Intelligent Evidence Gathering (IEG) infrastructure to enable agencies to configure the guided set of screening questions specifically for the available programs.

Recommending Programs for Clients based on Screening Results

Based on the answers the client has provided, the results for the programs that the worker selected for screening are displayed to the worker. The screening results tell the worker whether the client is potentially eligible for the program screened for, and give a short description of the eligibility determination. Urgent alerts may also be displayed to highlight important information. The results are determined using a Cúram Eligibility Rule Set (CER) which runs after the worker has submitted the triage answers.

Once a screening is completed, the intake worker can apply for programs available in the agency on behalf of the client, create referrals to programs available from external agencies, or respond to an emergency if one is identified.

Applying for Programs based on Screening Results

The system can be configured to provide information on government programs for which the client may be eligible. Information on programs for which eligibility could not be determined is also displayed. From the results of screening, a worker can view a list of programs available in the agency and programs that are available from external agencies.

Based on the results of the screening, a worker can apply or create a referral to a number of different government programs. The worker can start an application for the programs that are available in the agency. When a program is provided by an external agency, the worker may choose to create a referral to the agency on behalf of the client. CCI provides the ability to create a referral to an external agency based on the results of a screening using a 2-step wizard process. For more information on the referral process, see [1.8 Referring a Client to External Agencies and Service Providers on page 39](#).

Alert Text

Based on the answers provided by the client, it may be necessary to alert the worker to important information. For example, if the client has an emergency need then it may be necessary to inform the worker to call emergency services immediately. Multiple alerts can be displayed based on the client's responses.

Screening Notes

In CCI, the worker has the ability to capture and maintain notes that are specifically related to a screening record. For more information on notes, see [1.9 Case Worker Tools on page 40](#).

1.6 Lifecycle of a Client's Application for Benefits: From Creation to Disposition

Introduction

In order to file a claim for benefits for most needs-based programs, a client must submit an application, providing required information on personal details, income, expenses, employment, education etc. This information becomes evidence and is used to determine eligibility for programs.

When an application is submitted, there are a number of processing steps which are carried out either manually by the worker, or automatically by the system, depending on the agency and the program. The intake worker and the eligibility worker are both involved in this process. Depending on the organizational structure in the agency, an intake worker typically is responsible for gathering and validating all of the data on the application. Once the application is complete, it is passed on to the eligibility worker for determination and authorization of benefits.

Starting an Application

Depending on agency policy and configurations, the worker has the option to start an application from a number of different places in CCI. An application can be started from the following areas of CCI:

- Triage, life event, or screening results.
- The list of the client's applications.
- The advisor (if configured by an administrator).

If multiple application types have been configured by an administrator, the intake worker can select which application to proceed with. If multiple program types have been configured by an administrator for a particular application type, the intake worker can select which program(s) to proceed with.

An application is always started for one primary client, and, depending on the type of application, the worker might have the option of adding additional clients to the application, for example, the household members that reside with the claimant. Once the application has been started, the claimant cannot be changed.

Adding an Application to an Existing Case

The intake worker may also select to add an application to an existing case for an existing client on the system. For example, if the client has an existing food assistance case and decides to apply for cash assistance, the intake worker can select to add an application to the existing case for the client. The application then becomes associated with the existing integrated case, and any new evidence gathered on the application is added to the existing case. See [Establishing a Case for an Application on page 33](#) for more details.

Capturing Application Information

The basic information required to submit the application, such as client name and address, is captured through a set of guided questions. Groups of questions are presented sequentially, the answers to which are filled in by the case worker as the application is progressed. The questions can be categorized, based on the type of information being captured on the application, for example household, employment, expenses, resources. CCI leverages the Cúram Intelligent Evidence Gathering (IEG) infrastructure to enable agencies to configure application guided flows specifically for their programs.

Capturing Client Evidence

An application can be submitted once the minimum required information has been entered. For programs where an interview with the intake worker is also required, such as food assistance, the application and interview steps are merged, so the application details and the additional details normally captured during the interview stage, such as income or expense details, can be captured at the same time while completing the application. Alternatively, the intake worker can capture the remaining evidence using Cúram evidence management functionality, once the application has been submitted.

Note: Cúram evidence management functionality is only available if the evidence for the program is managed in Cúram.

Saving and Resuming or Discarding an In Progress Application

The intake worker can quit the application at any point while they provide answers to the application questions. The intake worker can either save the in progress application, so it can be resumed at a later stage, or discard the application completely, based on the client's wishes.

Submitting An Application

In order to register the application with the agency, the application must be submitted. The submitted application is an official record that the client has applied for the requested program(s). In most agencies, the client is required to agree to a set of rights and responsibilities specified by the agency, and also to confirm that the information provided is accurate and truthful when submitting the application. Any data found to be untruthful may result in a fraudulent claim.

Many agencies provide multiple channels for clients to submit applications for programs. CCI supports the following channels for application submissions:

- in the agency (face to face)
- by phone
- online through a citizen portal (either Universal Access or another external system)
- by post

Submitting an Application in Person or by Phone

When the intake worker captures an application for a client who is in the agency, or on the phone, the worker has the option to submit the application at any stage once the mandatory information is captured in the application.

Submitting an Application Online

An agency can configure that applications submitted online are routed to CCI for processing. The system can be configured to route the application to the intake worker or work queue when further processing is necessary. For some programs, unemployment insurance for example, the aim is to process the majority of online applications automatically without worker involvement. If the application has been completed by the client with no issues, or missing information, then the application can be processed automatically. For other programs, food assistance for example, the intake worker is always required to review and capture additional information on an application.

Submitting an Application by Post

When a client sends an application by post, the agency post room receives the application and routes it to the appropriate intake worker or work queue for processing. Some agencies might have scanning or document management systems in which case the application can be attached to an email or task and assigned to an intake worker or work queue. The intake worker reviews the details that are entered on the application and decides how to proceed. Most paper applications do not contain the same level of detail as online applications, and mandatory information cannot be enforced, therefore the intake worker must decide whether they have sufficient information to process the application. In most cases, the intake worker schedules an interview with the client to capture any remaining required information.

If the mandatory information that is required to submit the application is available, the intake worker can capture that information by filling out the answers to the questions in the application. The caseworker can set the application filing date to the appropriate date (based on agency policy for setting the filing date for applications received by post), and submit the application so the details are stored in the system.

Routing a Submitted Application

An application may be routed to a work queue, to a specific user or group of users based on how the agency has configured its routing policy.

The default setting for CCI is to route applications submitted online to an online applications work queue. The intake worker can access the work queue from their user home page, or via the work queues list from the worker's inbox. The worker can view the applications in the online application work queue, and assign the application to him or herself.

Applications submitted in the agency are by default assigned to the worker who submitted the application.

Recording Application Information

For applications that are processed in the agency, the application details, client information and evidence captured on the application is recorded in the system when the application is submitted. When the user selects to create a new application, an integrated case is created and associated with the application when it is submitted, and the evidence is stored on the case. If the user selected to add an application to an existing case, the evidence is recorded on the existing case. The intake worker has the ability to view and edit the data recorded on the application once it is submitted. The system also retains a read-only copy of the information submitted on the application for agency records.

Recording Application Details and Application Date

The system records application details such as the application filing date and the method of receipt. A record of the programs applied for are also associated to the application.

The application date is automatically set for applications submitted online. The date is set to today's date if the application is submitted within the business hours of the agency/local office. The date is set to the next business date if the application is submitted outside the business hours of the agency/local office. The business hours of the agency are determined based on the agency's root location, configured in Cúram Administration Manager (see the *Cúram Location Administration Guide* for more information).

The application date can be manually set by the intake worker for applications captured in the agency, but is defaulted to today's date. The intake worker can also edit the application date on applications that have been submitted.

Recording Client Information

The personal information provided by a client on the application, such as address, date of birth etc, is recorded on the system for the client. In addition, if the application captures any additional clients, for example, any other household members that reside with the client, the system records the personal details for these clients also. Additional clients are registered with a participant type of prospect when the application is submitted. The intake worker can search and match these clients with existing clients on the system once the application is submitted.

Recording Evidence

The evidence captured on the application is mapped to evidence records when the application is submitted, and is available for the worker to view and update.

Processing the Application in a Timely Manner

Most agencies impose time limits within which an application for benefits must be processed. For example, food assistance applications must be processed from submission to authorization within 30 days. CCI provides the capability for an agency to configure the time limits for processing the programs on an application. The application timers are set once the application is submitted.

Managing Application Information

When an application is submitted, the worker has the facility to view, add, remove, and update the information captured on the application including:

- clients
- programs
- timers
- interviews
- evidence
- eligibility checks
- related cases
- PCR
- notes
- attachments
- communications

CCI also provides an Application To Do list, which displays the outstanding tasks that the worker must complete in order to finish processing the application. The items displayed on the To Do list are determined and displayed by CER rules, running in the advisor Infrastructure. Examples of tasks that the worker may need to complete on the application include registering all of the prospect clients as persons, resolving evidence issues and capturing verifications.

Searching and Clearing the Clients on an Application

In order to process an application, all of the clients on the application must be registered on the system. If the client submitted an application online, or the intake worker completed a quick registration of the client, the client is registered as a prospect person. For programs concerned with the client's household, such as food assistance, all household members submitted on the application are also registered as prospects. The intake worker must resolve prospects by determining whether the prospect is a match with any existing registered persons on the system, or whether they should be registered as a new person. Additional clients can also be added to or removed from an application.

CCI leverages Cúram participant functionality for searching, matching and registering prospects as persons. See the *Cúram Participant Guide* for more information on the different participant types in Cúram.

This search and clearance process is described in the sections below.

Note: The claimant on an application is the person for whom the application is started. The household member evidence cannot be deleted for the client who is the applicant.

Searching for and Matching a Client

When an application is received, the intake worker searches for and identifies possible matches for the prospect. Upon reviewing the possible matches, the intake worker decides whether a registered person is a match for the client. If a match is found, the prospect details can be merged with the registered person details. The system creates additional records for the registered person if details such as the address and phone number are different between the prospect and the person. A message will be displayed to the intake worker to inform him or her of any new records.

Registering a Client as a Person Participant

If a match for the client is not found, then the intake worker registers the prospect client as a person, by capturing and verifying the client's personal details, such as name, address and date of birth.

Adding an Additional Client to an Application

Additional clients can be added to the application. For example, if the worker submitted an application for food assistance with only the minimum required information, the additional household members may not have been captured, so the worker can add them at a later stage, for example while interviewing the client.

The worker carries out an initial search for the additional client, and if the client is not already registered on the system, the worker registers the client as a person. The worker must also enter the date the client should be considered to be included on the application. For example, for food assistance, this would be the date the client moved into the household, if that date was after the application date.

Removing an Additional Client from an Application

Clients can be removed from an application. For example, if the client submitted an application online, with some additional household members listed in error, the worker can remove the household members if informed by the client that they are no longer valid. The intake worker can remove any client from the application with the exception of the claimant, who cannot be removed. To remove a household member from an application, the worker can delete all the household member's evidence and then close the created task based on deleting or end dating household member evidence.

Transferring an Application to an Existing Case

If any of the clients associated with the application already exist as a registered person on the system, any existing integrated cases that the client has must be reviewed by the intake worker, and he or she must decide whether the new application should be transferred to the existing case.

The option to transfer an application is not available until all prospect persons on the application have been either matched to an existing registered person or fully registered. When the worker selects to transfer the application, the application is associated with the existing case. The

application data, including participant data and evidence is transferred with the application. The evidence is added to the existing case with a status of in edit.

When an application is transferred, the evidence on the existing case and the evidence that has been transferred on the application must be manually reconciled by the intake worker. Evidence issues, such as conflicting evidence, can be identified by the advisor when the application has been transferred, and highlighted in the evidence workspace for the application (see [Managing Application Evidence on page 28](#)).

The intake worker can also undo a transfer, if he or she mistakenly transferred the application to an existing case. This removes the association between the application and the existing case, and reassociates the application with new integrated case that was initially created when the application was submitted. See [Establishing a Case for an Application on page 33](#) for more information on establishing a case for an application.

Scheduling a Client Interview

Intake workers can schedule client interviews in order to complete an application. For some programs, an interview is always required with the client before eligibility determination, for example, food assistance and cash assistance. For other programs, an interview with the client is only required if there are issues such as missing or conflicting information on the submitted application form, for example, unemployment insurance.

When the client is in the office with the agency worker or on the phone, the application and interview step can happen at the same time. When the client is not present in the office or on the phone at the time of application, for example, where an application is received from an external channel, the intake worker may have to schedule an interview with the client.

The intake worker can schedule interviews with individuals who are not present in the office or on the phone, and notify the required attendees of the interview date and time. The details captured for an interview include the attendees (both clients and agency workers), the date and time of the interview, and the location of the interview.

The list of interviews or the application calendar can be reviewed to see the interviews that are scheduled for that application. Alternatively, an agency worker who is invited to the interview can view the interview in his or her user calendar, from their Cúram Inbox.

The intake worker can invite attendees, edit, complete, or cancel a scheduled interview. The user can invite additional attendees to the interview after it has been scheduled. Editing the interview enables the user to reschedule the time or date, update the location, or update the attendees. Completing the interview indicates that the client and worker met and completed the interview. Cancelling an interview indicates that the interview did not occur, for example, if the client did not turn up.

Managing Application Evidence

Caseworkers can manage application evidence by using the evidence workspace once the application is submitted.

Working with Evidence in the Evidence Workspace

Evidence on an application is managed using the evidence workspace. The following views are provided in the evidence workspace:

- evidence dashboard view
- evidence type view
- evidence type list
- active evidence list
- in edit evidence list
- issues list
- verifications list
- incoming evidence list

For more information about the evidence workspace, see .

Maintaining Evidence

The intake worker can view, insert, and modify evidence, remove active evidence, or discard in edit evidence. Once the intake worker has finishing working on the evidence for an application, he or she can select to apply the changes, which activates any in edit evidence and removes any active evidence marked as pending removal. The agency can configure a supervisor approval step for evidence changes, if required. The intake worker also has the option to transfer evidence from one case to another, if configured by the agency.

Verifying Evidence

The intake worker has the ability to view and manage evidence verifications for a particular evidence type. The intake worker can view a list of all of the verifications associated with the evidence on an application. Verification information is also available at the evidence type level.

Note: Verifications are only available if the agency has the *Cúram* Verification Engine application module installed. See the *Cúram Verification Guide* for more information on the functionality available for managing evidence verifications in *Cúram*.

Managing Evidence across Applications and Cases

CCI works with the Evidence Broker to enable agencies to configure data sharing between applications and cases. An agency can configure the cases that share active evidence. CCI supports this at the application level so that evidence that's activated on an application can be shared with other case types via the evidence broker if configured by the agency. Evidence that is shared from another unrelated case with the application can be viewed by the intake worker and accepted or rejected from the Incoming Evidence list on the Evidence tab.

Checking Eligibility on the Application

The intake worker has the option to check the client's eligibility at any time after the application has been submitted and all of the prospect clients on the application have been registered. The eligibility check provides an indication of the benefits a client may be eligible for. The check is available at any stage of the application process, and runs rules on whatever active and in-edit

evidence is present on the application at the time. The intake worker can check eligibility multiple times.

Eligibility checking functionality is based on program specific eligibility rules. CCI provides infrastructure that enables an agency to use its rules for the Check Eligibility function. For example, if an agency configures CCI with Income Support, the Income Support eligibility rules will be used to check eligibility for food assistance applications.

An agency managing multiple programs may implement rules to check eligibility for all programs on an application, even for programs the client has not applied for. Based on the eligibility result, the client may decide to add a program to the application. For example, if an agency is processing food assistance and cash assistance applications, the intake worker can check eligibility for food assistance and cash assistance on the client's food assistance application and as a result the client may decide to add cash assistance program to the application if he or she is potentially eligible (for more information see [Managing Programs on an Application on page 30](#)).

The intake worker can review all of the eligibility checks completed for an application from the list of eligibility checks.

Setting the Application Status to Ready For Determination

When an application has been completed and the intake worker and client are satisfied with it, it can be marked as ready for determination. CCI provides a default routing for the application when it's set to ready for determination. The application is sent to the ready for determination work queue where it can be picked up by an eligibility worker for final processing.

Alternatively, an agency can configure that the application stays in the same state (i.e., leave the application assigned to the current user) or route the application to a specific user.

The default processing in CCI if an eligibility worker sets an application to ready for determination, is to leave the application assigned to the current assignee (i.e., it is not routed to the ready for determination work queue).

Managing Programs on an Application

Both the intake worker and the eligibility worker have the option of adding and withdrawing program requests associated with the application. For example, if a client had applied for food assistance, but was also potentially eligible for cash assistance, the worker could add cash assistance to the existing application. When a program is added to an application, the application timers are set for that program based on the date it was added to the application.

Adding a Program

The worker has the ability to add a program request by selecting the program type and date requested. The worker can add a program request for programs that are not currently associated with the application, or that have been previously withdrawn.

Withdrawing a Program

The worker can withdraw a program from an application at the client's request. In order to withdraw a program request, the worker must enter the withdrawal date, and a reason for withdrawal.

Managing an Online Withdrawal Request

If the client submits a withdrawal request online, the online withdrawal request is associated with the relevant application and the intake or eligibility worker has the option of confirming the withdrawal request. CCI also provides a default routing for withdrawal requests submitted online to the online withdrawal request work queue, where the request can also be viewed and confirmed.

Reopening a Program

A program that has been denied or withdrawn from an application can be reopened because the agency made an error, a client presents with necessary information after denial, an appeal decision has been made to reopen the program, or for some other reason.

The worker can reopen a denied or withdrawn program on an application that is set to a state of 'Ready for Determination' or 'Disposed'. Alternatively, a withdrawn program may be reopened on an application in 'Submitted' status. A user can select the reason for reopening the program and enter comments. The agency can configure the reasons that are displayed to the worker. When the program on the application is reopened, the program reverts to a state of 'Pending' and the state of the application itself reverts to 'Submitted' (unless it was already in that state).

The agency can view a history of reopen details and withdrawal requests associated with a program on the application.

A program can have an intake timer associated with it, for example, an agency may configure the use of a program timer to process the application within a certain number of days. When a program is denied or withdrawn, the associated timer is updated with a status of completed and the end date on the timer is set. The agency can configure the timer to resume when the program on the application is reopened. The agency can configure the date used to resume the timer as either the date the program on the application was denied or withdrawn or it can use the reopening date.

Determining Recommended Programs

The eligibility worker must determine which programs the client(s) are eligible for, based on the application data. The eligibility worker can review the existing eligibility checks on the application, or can select to run a new eligibility check to ensure that any changes in the evidence or data on the application are used in the determination. If there is at least one eligible decision on the application, the worker will continue to process the application and authorize the benefits.

Creating Referrals

If there are no eligible decisions for the application, the eligibility worker may opt to create a referral to another agency or community service, where the client could potentially receive additional help.

Assessing Priority, Complexity, and Risk for an Application

The priority, complexity and risk of the application is determined throughout the life cycle of the application. The agency can configure when a PCR assessment is triggered. A PCR assessment can be triggered in any or all of the following scenarios:

- when an application is submitted,
- when all prospects have been matched or registered on an application,
- when evidence is applied to an application,
- when an eligibility check is performed,
- when program requests are added to or removed from an application,
- when an intake worker or an eligibility worker manually select to run a PCR assessment.

Advice can be configured to be displayed upon completing a PCR assessment based on the PCR classifications for the application.

The PCR assessment becomes particularly relevant when the client(s) are determined to be eligible for one more programs on the application, as they are then likely to become ongoing clients of the agency. The PCR assessment enables the agency to deal more effectively with the client(s).

CCI does not provide sample rules or responses for PCR, however the infrastructure is available for an agency to implement custom PCR rules and responses.

Managing Contact with the Agency

The worker can create and maintain notes, attachments and communications on the application.

The worker has the ability to capture and maintain notes that are specifically related to an application. A history of notes is also maintained.

An attachment is a supplemental file, for example, a text document, that is attached to an application. The agency can attach scanned documents that provide information in support of an application such as a birth certificate or bank statement. A range of file types are supported including Microsoft® Word, Microsoft® Excel and PDF. The system does not restrict the file size of the attachment although the agency may wish to set a limit using an environment variable. Once the file is attached to the application, it may be accessed by other system users who have appropriate security privileges.

The agency can create and manage communications regarding clients on the application. Communications can include phone calls, emails, and letters. Communications can be free-form or based on templates. Additional communication features include the management of both incoming and outgoing communications, as well as support for displaying a list of communications that relate to the clients on the application. For more information on communications see the *Cúram Communication Guide*.

Managing Timeframes

Most programs have requirements around the processing time allowed for applications. Intake and eligibility workers must ensure that applications are processed in accordance with the

application timers. Application timers are tracked mainly for reporting purposes. Supervisors can see if a particular worker is not processing applications in a timely manner, and the agency itself may be penalized if its overall application processing timelines are not meeting the standards.

Note: Application timers in CCI leverage Cúram Milestones functionality. For more information on milestones see *Cúram Investigations Guide* and *Cúram Service Planning Guide*.

Authorizing and Declining Benefits

The eligibility worker can authorize and decline benefits on an application by selecting to review the eligibility results. The authorize/decline options are available for each eligibility decision or assistance unit, depending on how the agency has configured its eligibility rules and results.

When the user selects to authorize benefits, CCI provides an event which the agency can use to customize application processing. For example, some agencies may want to create a product delivery for the authorized benefit. Other agencies may want to create a service plan for the authorized benefit.

Appealing a Program Denial

A user can record and manage an appeal against a program applied for within an application that has been denied. The user can create a single appeal for one or more programs that have been denied within an application. For example, if the user submits an Income Support application for both Food Assistance and Cash Assistance and both programs were denied, the user can create a single appeal case for the two program denials. The user can also select to add a new program application appeal to an existing appeal case.

When a program application is appealed, an appeal case is created to manage the appeal. This starts a chain of events which include collating statements, scheduling hearings, deciding whether or not to overturn the program decision, and implementing the appeal decision accordingly.

The user can view a list of appeals associated with an application. This view displays any appeals associated with any program application within the application. Once an application is disposed, any approved program applications will be managed in an ongoing integrated case and the appeals can be viewed from there.

There are three appeal types in Appeals: hearing case, hearing review, and judicial review. Each of these appeal types is processed differently. The appeal processes are configured in the Administration application. For more information on the Appeals process and the appeals configuration settings, see the .

Establishing a Case for an Application

When an application is created the intake worker has a number of options for establishing a case and processing the application. The agency can configure how each application situation is handled. There are three main options for the intake worker when establishing a case for an application:

- create a new case,

- add an application to an existing case,
- transfer an application to an existing case where clients associated with the application already exist as a registered person on the system.

Whichever option the worker takes, all of the application processing is done via the application, rather than the underlying case. The agency can configure whether the action to add an application or transfer an application to an existing case is available for intake and eligibility workers.

Creating a New Case

When the application is submitted, depending on the agency configuration, one or more integrated cases are created and associated with the application. All of the evidence and clients captured in the application are added to the integrated case(s).

Depending on the agency configuration, the integrated case can be made visible to the user at different points in the application process, for example, after at least one program has been approved on the application. See [Creating a New Case for an Application on page 57](#) for more information on the configurations available to the agency.

Disposing the Application

The application status is automatically set to disposed when all program applications associated with an application have a state of approved, denied, or withdrawn. If programs have been approved (i.e., a decision was authorized from the eligibility results), the ongoing eligibility of the client(s) is managed on the established integrated case.

Notifying the Client of the Eligibility Determination

A notification can be sent to clients informing them of their eligibility determination once the application status is updated to disposed. This can be configured by the agency.

Application Ownership

An application is moved through its lifecycle by users with application owner privileges. The application owner is responsible for application processing. Typically, the application owner maintains application information, checks eligibility, makes the final determination and authorizes benefits for a client.

Application ownership can be assigned to any organization object, i.e. a user, organization unit, position or work queue. This enables the organization to implement its own application ownership strategy by allowing any user or users within an organization unit, position or work queue to perform tasks on an application. Assigning application ownership to an organization object or group provides visibility on the application to more than one user.

The application owner can be manually set to be any user or group of users within the organization. Common Intake provides event hooks pre and post owner change on the application to allow the agency to implement their own validations around which user roles have privileges to create a new application owner.

Application Statuses

An application can go through several changes of state throughout its lifecycle. The table below describes these changes.

Table 1: Application Status

Status	Description
In Progress	An application is set to a state of 'In Progress' when it is created and has not yet been submitted.
Submitting	When an application is submitted it moves into a deferred process and its status is set to 'Submitting'. Only applications with a status of 'In Progress' or 'Submit Failed' can move into a state of 'Submitting'.
Submit Failed	When the submit application deferred process fails, the application moves into a state of 'Submit Failed'. Only applications with a status of 'Submitting' can move into a state of 'Submit Failed'.
Submitted	When the deferred process ends the application moves into a status of 'Submitted'. Applications can also transition into the 'Submitted' state when a program is reopened on a 'Ready for Determination' or 'Disposed' application.
Cancelled	An application is set to a state of 'Cancelled' when an application is deleted. Only applications with a status of 'In Progress' can be cancelled.
Ready For Determination	An application is set to a state of 'Ready For Determination' when the application processing stage is complete. Only applications with a status of 'Submitted' can be set to ready for determination.
Disposed	An application is set to a state of 'Disposed' when all of the associated programs have been 'Approved', 'Denied' or 'Withdrawn' (i.e. there are no 'Pending' programs associated with the application).

The programs associated with an application also go through changes in state, which affect the overall status of the application. The program states are as follows:

Table 2: Program Status

Status	Description
Pending	A program is set to a status of 'Pending' when it is created and associated to an application. A 'Denied' or 'Withdrawn' program reverts to a status of 'Pending' when it is reopened.
Approved	A program is set to a status of 'Approved' following the authorization of the program by the user after determination. Only program applications with a status of 'Pending' can be approved.
Denied	A program is set to a status of 'Denied' when the user denies the program application following determination. Only program applications with a status of 'Pending' can be denied.

Status	Description
Withdrawn	A program is set to a status of 'Withdrawn' when the user enters a withdrawal request for the program application. Only program applications with a status of 'Pending' can be withdrawn.

When all of the programs associated with an application are either approved, denied or withdrawn, the application status is automatically updated to disposed.

Note: When an application moves into a deferred process the application case is created by the default user. This can be changed by a case ownership strategy defined by a workflow process that can be set up per case type.

Note: The setting of the program application status does not occur automatically. Individual solution implementations must respond to events raised by the authorization, or declination, of program recommendation results and set the program application statuses accordingly.

1.7 Helping a Client Deal with a Life Event

Introduction

A life event is a situation that occurs in a client's life which may result in a series of transactions between an individual and various public sector agencies (e.g. marriage, birth of a child, or a change in employment). Changes such as these may affect the benefits a client receives and as such it is important that these life changes are reported to the agency. The process for managing a life event differs based on whether the client has an active case(s) or not. Life events functionality is only available for registered persons, and is not available for prospects, as the purpose of life event functionality is to allow an existing client to tell the agency of a change or event in their lives. The intake worker can carry out a triage to determine the needs of a prospect person.

CCI does not have any preconfigured life event scripts or rules, however the underlying infrastructure allows an organization to configure its own scripts and rules for the life events it wishes to have available to its workers.

The section below describes life events functionality which is available in CCI.

Recording a Client's Life Event

The worker can choose to create a new life event from the list of available life events, or a life event can be created from the advisor. A description of the category and the life event are provided so that the worker can identify which life event will provide the information they need.

When selecting to capture a life event, the worker is presented with a guided set of questions. When the details of the life event have been captured, they are transmitted to the relevant case(s), if they exist, via the evidence broker. The case owner decides whether to apply the changes to the client's case.

Note: The system transfers the updated evidence to any case that is configured by the agency to receive updates from the evidence broker when a life event is reported.

Based on the answers a client provides about the life event, a number of recommendations are displayed.

Recording a Life Event for a Client with an Active Case

If the client has an active case and reports a life event that impacts the case, the life event details must be captured and transmitted to the case(s). The worker asks a set of guided questions to capture the details of the life event, plus any other related life events that may have occurred. For example, if the client reports that he or she has moved out of the house, then it is also possible that he or she has changed jobs, or his or her household composition has changed.

When the details of the life event(s) have been captured, they are transmitted to the relevant case owners who decides whether or not to apply them to the active case. The system also gives recommendations for the client in this scenario, as the client may wish to be referred to community services, or apply for additional benefits based on the life event. For example, if the client is already in receipt of food assistance and loses his or her job, he could apply for unemployment insurance benefits.

Recording a Life Event for a Client that does not have an Active Case

If the client approaches the agency and tells the worker that a specific life event has occurred, and the client does not have an active case, the worker can select to run a triage-style script directed towards capturing information on the specific life event, and any other life events that may have occurred. For example, if a client tells the worker that he lost his job and wants to claim benefits, the worker can select a life event for change in employment which runs a triage script with more directed questions around employment and the client's financial situation. The system then determines the recommendations for the client based on the answers given. This provides recommendations specific to a particular life event. Based on the recommendations, the worker can create a referral, continue to screen or apply for benefits, or respond to an emergency.

Recommending Programs and Services based on the Results of a Life Event

Based on the answers the client has provided, a list of recommended services, service providers, and government programs most appropriate to the client's needs are displayed to the worker. Alerts may also be displayed on the results page to highlight important information to the worker. The results are derived using a CER rule set which runs after the worker has submitted the life event answers. From the results, the worker has the option to create referrals to community services and/or external program agencies, screen the client for potential eligibility for recommended programs, apply for benefits, or respond to an emergency if one is identified at this point.

A history of life event answers and recommendations is kept for each completed life event. The history record stores the life event answers, the life event date and time, alerts, and recommended programs and services.

The sections below outline these features in more detail.

Alert Text

Based on the life event type, it may be necessary to alert the worker to important information. For example, if the client is having a baby and has active cases in the system this may impact their eligibility status or entitlement amount for benefits they are currently receiving. The system may display an alert to inform the worker that evidence changes for the pregnant person have been broadcast to the relevant cases. CCI provides the ability to configure the alerts that are displayed to the worker based on the life event type.

Services Map

CCI allows the agency to configure which community services and providers are displayed based on the life events answers. Recommended services and providers are displayed on the map. Preselected services are initially displayed. For more information on map features, see [Mapping Services to Providers on page 18](#).

Referrals

The worker can refer the client to community service providers who may be able to help meet their basic needs. The agency may not provide a program for the client's needs or the client may be deemed ineligible for a program. In these instances, the worker can refer the client to a service that may be able to help. For more information on referral features, see [1.8 Referring a Client to External Agencies and Service Providers on page 39](#).

Recommended Programs

In addition to providing the worker with details of community services that meet the client's needs, information is also provided on government programs for which the client may be eligible. From the results of a life event, a worker can screen, apply, or create a referral for a number of government programs that may meet the client's needs. Depending on the answers provided by the client in the question script, the CER rule set will identify programs provided internally by this agency, or externally by other agencies. For the recommended internal programs, the worker has the ability to screen or apply for programs. For more information on screening and the application intake process, see [1.5 Screening Clients to Determine Potential Eligibility for Programs on page 19](#) and [1.6 Lifecycle of a Client's Application for Benefits: From Creation to Disposition on page 22](#).

When a program is provided by an external agency, the worker may choose to screen for the program (if configured by the agency) or create a referral to the agency on behalf of the client. CCI provides the ability to create a referral to an external agency from the results of a life event using a 2-step wizard process. The wizard is pre-populated with the program details and any available client contact information. The worker may send, edit, or delete an unsent program referral from the list of Referrals. By selecting to send, the referral will be sent to the provider via email.

Life Event Notes

The worker also has the ability to capture and maintain notes that are specifically related to a life event record. The notes functionality is accessed from the Life Event Results tab. For more information on the Notes functionality, see [1.9 Case Worker Tools on page 40](#).

1.8 Referring a Client to External Agencies and Service Providers

What is a Referral?

A referral is a document which is sent to an external provider or agency, informing them that a client is in need of their services or benefits. The intake worker or eligibility worker can create a referral to an external agency or provider for programs or services that the client may benefit from. The worker may create a referral at any point during the intake process, but most frequently it is created at the end of the triage, screening, application, or life events processes.

Creating a Referral

Based on the worker's own knowledge or on system recommendations, the worker can create a referral. A referral can be created from several points in the application, including:

- referrals list/client home page,
- screening results,
- triage results,
- life events results.

Selecting a Service Provider

CCI allows the worker to create referrals to community service providers. Providers can be selected on the map based on the results of a triage or life event. By doing so, the system pre-populates the referral form with the selected provider details. The first and last name of the client must be entered on the referral form before it is saved.

A community service referral may also be created from the referrals list. In order to create a referral, the worker performs a search for a provider in the system. Once found, the worker enters the client's contact details and creates the referral. The referral creation date is stored in the system.

Selecting an External Agency

A worker can choose to create a referral to an external agency when certain benefits and programs are not provided by the agency. To create a referral to an external agency, the worker performs a search for an agency and once found and selected, the worker enters the client's contact details and creates the referral. The referral creation date is stored in the system.

Viewing a List of Open Referrals

The worker can view a list of all the community service and external agency referrals associated with a person. The system displays the referral details for each record in the list. The worker can edit, delete, or send the referral. The worker can also create a new referral from the list of referrals for a person.

What Happens after a Referral is Created?

Once a community service or external agency is recorded for the referral it is sent to the provider or agency when there is an email address on file. If there is no email address recorded for the provider or external agency, the referral will remain unsent. The worker may then print out the referral and give it to the client to bring to the provider or external agency, or it may be sent by post.

1.9 Case Worker Tools

Case Worker Tools

A number of tools are provided that aid the worker during an intake. The following tools are available for workers throughout the intake process:

- advisor,
- notes,
- PCR,
- alerts,
- user home page tools.

The sections below provide more information on each of these tools.

The Advisor

The advisor is a dynamic caseworker tool that provides context sensitive tips and reminders to the worker throughout the intake process. It is built upon the Cúram Express Rules (CER) Engine. The advisor analyzes data that is entered (or known if the client was previously registered on the system) and guides the worker towards areas that may require his or her attention. Users can action a piece of advice by clicking on the link displayed within the advice text. This will then bring the user to the area requiring attention.

In CCI, the advisor provides assistance in the following areas:

- **Intake process**
The advisor prompts the user as to what the next step in a particular intake could be and provide options if there is more than one potential path through an intake.

- **Evidence capture**

The advisor displays issues and reminders during evidence capture. For example, if an application with missing mandatory data is submitted online by the client, the advisor can display issues for the mandatory data, if configured by the agency.

The agency can configure the rules and text that is displayed in the advisor.

Notes

Throughout the intake process, the worker has the facility to capture notes about the client. CCI provides an on-screen tool which allows the worker to enter a note at any stage in the process including from the person home page, triage results, screening results, life events, application, etc. Notes are used to capture additional information about a client that may not be covered in the scripts or evidence. For example, if a client is acting in an aggressive manner, the worker might want to make a note of it to warn other workers to be aware of it when dealing with the client. A history of notes is maintained.

Priority, Complexity, Risk

Priority, Complexity, Risk (PCR) is a mechanism which enables agencies to provide a differential response when dealing with a client. PCR is defined as follows:

- **Priority**

The time in which a case or application must be dealt with.

- **Complexity**

The complexity of the situation based on, for example, the number of household members, or the number and type of issues that the client needs help with.

- **Risk**

The potential impact to the agency, for example, a potentially long term claim could be considered high risk to the agency.

PCR enables the agency to match its response to a client's situation to the level and severity of the problem. The CER Engine allows an agency to define its own PCR rules sets and responses. The triage, screening and life events processes are also inherently PCR assessments of the client and situation, as the results and recommendations from each of those are based on rule sets defined by the agency. CCI provides hooks for specific key events in the application process, where an agency can specify the PCR rules and responses, based on the data gathered on the application.

Alerts

Based on the answers recorded by the intake worker as part of the triage, life events, and screening processes it may be necessary to alert the worker to important information. For example, if, during triage, the client has responded that he or she has an emergency need then it may be necessary for the worker to call emergency services immediately. Multiple alerts can be displayed based on the client's responses. Alerts can be defined in the triage, screening, or life events rule sets using the rules editor and subsequently displayed with the results.

User Home Page Tools

From the user home page the worker has the ability to search for a client, start the intake process for an anonymous person, and view application and work queue summary information.

Find Client

CCI provides a quick way for the user to search for a client and to start an intake for an anonymous person from the user home page. The system allows the user to search for a client using basic search criteria. If there is only one positive match found, then the system displays the person home page for the client. If there are multiple records found, the system displays a list of the possible matches. Once the anonymous person is registered as a prospect person, a unique reference number is created for the client. The worker can also begin an intake at this point.

Assigned Applications

Intake workers and eligibility workers can see a summary view of applications that are assigned to them by due date from their user home page. This allows the workers to easily see which applications are overdue or due soon and then process those applications accordingly.

Online Applications Work Queue

Once a client submits an online application for processing a task is created in the online applications work queue. The intake worker can view summary information of the tasks that are in the queue, see which tasks are overdue or due soon, and navigate to a list of the tasks in the queue where he or she can reserve the tasks from the queue.

Applications Awaiting Determination Work Queue

Once the intake worker sets the application to a state of ready for determination, the application enters into the applications awaiting determination work queue. The eligibility worker can view summary information for the tasks that are in the queue, see which tasks are overdue or due soon, and navigate to a list of tasks in the queue where he or she can reserve the tasks from the queue.

Online Applications Work Queue for Supervisor

The intake worker supervisor can view a summary of the tasks in the online applications work queue by processing deadline. This allows them to easily see which tasks are overdue or due soon and then redirect these tasks to the best equipped worker.

1.10 Defining The Intake Process

Introduction

CCI enables an agency to define the intake process to meet its requirements. For example, an agency may wish to include triage, screening, application, life events, and referral processing as part of its intake process. Another agency may want to include only the application step in its intake process. By providing configuration settings, CCI is flexible enough to meet the requirements of any SEM agency with a needs-based intake process.

CCI provides configuration settings for several elements of CCI including triage, screening, application, life event, referral, and PCR processing. An agency may have one or more user roles that perform all or part of the intake process. Functionality can be configured by user role. CCI provides sample intake worker, eligibility worker, and intake worker supervisor user roles.

More information on these configuration possibilities is provided below.

Defining Triage

Triage can be performed for an anonymous person, prospect person, or registered person. Triage captures information with a question script created using IEG. IEG administration functionality enables the agency to configure the information captured on the triage script.

Based on the answers the client provides to the triage questions, the system displays a list of recommended community services, service providers, and government programs most appropriate to the client's needs. Urgent alerts may also be displayed to highlight important information. These results are determined using CER which runs when the intake worker submits the triage script. Common Intake provides a sample triage CER rule set, but the agency may configure these rules to meet their needs.

The Provider Map

Based on the results of a triage or screening, CCI provides the worker with a list of recommended community services to address the client's basic needs. Recommended services providers are displayed in a map which allows the worker to easily select the most appropriate service. A number of preselected services are initially displayed which prevents too many providers from being displayed on the map. A system property is provided to configure the number of services that are preselected. For example, if the preconfigured number is set to 10, then the first 10 services are preselected and the providers of those services are displayed on the map. On the other hand, if 10 services or less are returned then all the services are preselected. However, the user is not prevented from selecting more than 10 services.

The map displays providers specific to the agency and client location. A number of settings are provided to configure the area of the map to display initially. For example, a configuration setting is provided which allows an agency to define a central point where the map will open. By default, the map opens centered on the client's address. An additional area can be defined which dictates the north/south/east/west boundaries within which the providers should be returned. Any providers who are beyond this boundary will not be displayed on the map.

The map feature also provides a zoom level that can be configured to dictate the zoom level of the map when the results page is initially displayed. Setting the zoom level dictates whether the icons representing the providers are visible or not. A high setting will display a very large area in the map. For example, setting it at the State level will not display the provider icons. On the other hand, a low setting will display only a small number of providers on the map making it difficult for the worker to see all the providers close to the client.

Configuring the display of Google Maps for internal triage

Configure triage results, specify pre-selections, and specify how service providers are displayed in Google Maps.

Longitude and latitude details are included in the data that is recorded for a participant address. Address insert and modify both support the capture and storage of longitude and latitude. The recording of this detail allows implementation of mapping features such as Google Maps.

To enable the retrieval and storage of geocodes for participant addresses, set the property `curam.miscapp.geocode.enabled` to true. Cúram supports the retrieval of geocodes and the display of addresses with geocodes on Google maps by implementing either the Google Maps API or the Google Maps for Business API. The Google Maps for Business API uses the same code base as the standard Google Maps API but provides more features such as higher usage limits.

To use the Google Maps API, use the property `curam.miscapp.geocode.googlemapsapikey` to store the API key. Using an API key enables monitoring of the application's Google Maps API usage, and ensures that Google can contact the key holders about the application if necessary. To use the Google Maps for Business API, use the properties `curam.miscapp.googlemapsapi.client.id` to store the Client ID and use `curam.miscapp.googlemapsapi.client.key` to store the Cryptographic Signing Client Key.

Note: Enabling the `curam.miscapp.geocode.enabled` property triggers the use of the Google Geocoding API V3. If you use the Google Geocoding API, you are deemed to have accepted Google Maps Terms of Service. Review the Google Maps Terms of Service before you enable any properties. For more information, see the *Google Maps APIs Terms of Service* section of the *Google Maps APIs* related link.

Related information

[Google Maps APIs](#)

Generating an API Key for Google Maps

Generate an API Key by using the Google Maps API website.

Before you begin

You must have a Google account, for example a Gmail account, to complete this task.

About this task

An API key is a unique identifier. Each time that you use the Google Maps API, you must include a key, or other credentials, to validate your request. For more information, see the *Using the Google Maps APIs* related link.

Note: Ensure that the API key is configured to view Google Maps with JavaScript™.

You need a license for Google Maps to enable the triage map to display.

Cúram supports the retrieval of geocodes and the display of addresses with geocodes on Google maps.

Procedure

1. Go to the *How do I get a new API key?* section of the [Google Maps APIs](#) website.
2. Select **GET A KEY**.
3. If you are not already logged in, log in to your Google account.
4. On the **An Enable All Maps and Places APIs/SDKs and Get a Key** dialog box, click **Select or create project > My Project**.
5. To accept the Google Maps Terms of Service, click **Yes**.
6. Click **ENABLE API**.
The API key is in the format `AIzaSyBdJ88HN7LTGkHHK5whfaVv8a5oz1x2E_k`.
7. Copy and retain the API key.
8. Click **DONE**.

What to do next

Use the API key to set the Cúram application property
`curam.miscapp.geocode.googlemapsapikey`.

Related information

[Using the Google Maps APIs](#)


Setting an API key for Google Maps

Enter the API key in the Google Maps API key application property.

About this task

Update the Google Maps API key application property with the API key that you got from Google.

Procedure

1. Log in to Cúram as system administrator (sysadmin).
2. Click **System Configurations > Shortcuts**.
3. Click **Application Data > Property Administration**.
4. Search for the application property `curam.miscapp.geocode.googlemapsapikey`.
5. Click the


icon for the **Google Maps API Key** property and select **Edit Value...**
6. Enter the API key that you got from Google in the **Value** field and click **Save**.
The API key is displayed in the **Value** column of the **Google Maps API Key** property.


Enabling the retrieval of the latitude and longitude of addresses

Activate and publish the geo-code enabled property to trigger the Google Geocoding API V3.

About this task

Activating the geo-code enabled property allows Google Maps to retrieve the latitude and longitude of a specified address.

Procedure

1. Log in to Cúram as system administrator (sysadmin).
2. Click **System Configurations > Shortcuts**.
3. Click **Application Data > Property Administration**.
4. Search for the application property `curam.miscapp.geocode.enabled`.
5. Click the

icon for the **Geo-code Enabled** property and select **Edit Value...**
6. Enter **YES** in the **Value** field and click **Save**.
7. Click **Publish...**
8. Click **Publish** in the **Publish Changes** dialog box.

Specifying the default latitude and longitude values for Google Maps



Enter the latitude value in the `curam.intake.map.default.center.latitude` property.

Enter the longitude value in the `curam.intake.map.default.center.longitude` property.

About this task

Cúram uses the latitude and longitude Google map properties to configure the default latitude and longitude of the center of the Google map that is displayed on the Service Provider window.

Procedure

1. Log in to Cúram as system administrator (sysadmin).
2. Click **System Configurations > Shortcuts**.
3. Click **Application Data > Property Administration**.
4. Search for the application property `curam.intake.map.default.center.latitude`.
5. Click the

icon for the **Default latitude of Google map** property and select **Edit Value...**
6. Enter the latitude value in the **Value** field.
For Salt Lake City, Utah, the latitude value is 40.768109.
7. Click **Save**.
8. Search for the application property `curam.intake.map.default.center.longitude`.
9. Click the

icon for the **Default longitude of Google map** property and select **Edit Value...**

10. Enter the longitude value in the **Value** field.

For Salt Lake City, Utah, the longitude value is 111.901147.

11. Click **Save**.

Setting the service area

Use the **Add Zip Codes...** control on the service area pane to set the zip code for a service area.

About this task

Use service areas to add the zip code for the location.

Procedure

1. Log in to Cúram as administrator (admin).
2. Click **Administration Workspace > Shortcuts**.
3. Click **Universal Access > Service Areas**.
4. Click the

...

icon for the **Service Area** you want to set and select **Add Zip Codes...**

In this scenario, Salt Lake is the service area.

5. Click the check boxes for the zip codes you want to set in the **Add Zip Codes** and click **Save**.

In this scenario, 84101 is the zip code.

6. To verify the zip code is added, select the down arrow for the service area.

The county and zip code headings are displayed.

Setting the geocoding bias area

Use the + and - icons on the **Geocode Bias** pane to drag the Google map to include the applicable location.

About this task

Geocoding is the process of converting addresses into geographic coordinates. For example, the address 1500 Fifth Avenue, New York, NY converts to the geographical coordinates latitude 40.80321 and longitude -73.944646. You can use geocoding to place markers on a map or to position the map. For more information about geocoding, see the *Google Maps APIs* related link.

Procedure

1. Log in to Cúram as administrator (admin).
2. Click **Administration Workspace > Shortcuts**.
3. Click **Universal Access > Geocoding Bias Area**.
4. Select **Edit Geocode Bias...**
5. Use the + and - icons on the **Define Geocode Bias** pane to include the location. You can also drag the map to include the location.
In this scenario, the map is centered on Salt Lake City.
6. Click **Save**.

Related information

[Google Maps APIs](#)


Selecting the service

Enter the reference value for the applicable service. For example, enter the reference value Shelter for the Child Care service.

About this task

Associate a service with a service area.

Procedure

1. Log in to Cúram as administrator (admin).
2. Click **Administration Workspace > Shortcuts**.
3. Click **Provider Management > Services**.
4. Click the

icon for the **Service** you want to set and select **Edit...**
In this scenario, **Child Care** is the service.
5. Enter a value in the **Reference** field of the **Edit Service** pane.
In this scenario, the value is Shelter.
6. Click **Save**.

Configuring Service Groups

Add the new service group and select the service category to which it belongs.

About this task

Use the left- and right-arrows to add or remove service categories to or from the service group.

Procedure

1. Log in to Cúram as administrator (userid: admin).
2. Click **Administration Workspace > Shortcuts**.
3. Click **Provider Management > Service Groups**.
4. Click **New Service Group...**
5. Enter the details of the new service group in the **New Service Group** pane.
In this scenario, the name of the new service group is Childgrp.
6. In the **Services** pane, select the applicable service categories for the new service group from the left menu.
For example, select **Child Care**.
7. Use the left- and right-arrows to add or remove service categories to or from the service group.
8. Click **Save**.
The new service category is displayed in the **Services Groups** pane.

Enrolling providers

Confirm that the provider is not already enrolled, complete the mandatory fields, and enter the provider's primary address.

About this task

Enter the details for the new provider in the **Enroll Provider** pane.

Procedure

1. Log in to Cúram as a resource manager (userid: cpmmanager).
2. Click **Providers and Services > Shortcuts**.
3. Click **Providers > Enroll Provider...**
4. To confirm that the provider is not already enrolled, enter at least one search criteria, and select **Search**.

If no results are displayed in the **Providers** pane, the provider is not enrolled.

Note: If the provider is already enrolled, do not duplicate the enrollment.

5. Click **Next**.
6. Enter the details for the new provider in the **Enroll Provider** pane. The following mandatory fields are marked with an asterisk (*):

- **Provider Name**
- **Preferred Language**
- **Preferred Communication**
- **Payment Method**
- **Currency**
- **Frequency**
- **Provider Category**
- **Provider Type**

Note: Ensure that you enter the primary address of the provider. While it is not mandatory for enrolling the provider, entering the provider's address is required to display the applicable Google map. Set the provider's address to a valid address within the geocoding bias area that you previously defined. For more information, see the *Setting the geocoding bias area* related link.

7. Click **Finish**.

The details of the added provider, including a link to the provider's address in Google Maps, are displayed in the provider's home page. To view the provider's address in Google Maps, click **Map**.

8. Repeat steps 2-7 to enroll a second provider.

Related tasks

[Setting the geocoding bias area on page 47](#)

Use the + and - icons on the **Geocode Bias** pane to drag the Google map to include the applicable location.

Enrolling provider groups

Confirm that the provider group is not already enrolled, complete the mandatory fields, and enter the provider group's primary address.

About this task

Enter the details for the new provider group in the **Enroll Provider Group** pane.

Procedure

1. Log in to Cúram as a resource manager user (userid: cpmmanager).
2. Click **Providers and Services > Shortcuts**.
3. Click **Provider Group > Enroll Provider Group...**
4. To confirm that the provider group is not already enrolled, enter at least one search criteria, and select **Search**.

If no results display in the **Provider Groups** pane, the group provider is not enrolled.

Note: If the provider group is already enrolled, do not duplicate the enrollment.

5. Click **Next**.
6. Enter the details for the new provider group in the **Enroll Provider Group** pane. The following mandatory fields are marked with an asterisk (*):

- **Provider Group Name**
- **Preferred Language**
- **Preferred Communication**
- **Payment Method**
- **Currency**
- **Frequency**

Note: Ensure that you enter the primary address of the provider group. While it is not mandatory, entering the provider group's address is needed to display the applicable Google map. Set the provider group's address to a valid address within the geocoding bias area that you previously defined. For more information, see the *Setting the geocoding bias area* related link.

7. Click **Finish**.

The details of the added provider group, including a link to the provider group's address in Google Maps, are displayed in the provider group's home page. To view the provider group's address in Google Maps, click **Map**.

Related tasks

[Setting the geocoding bias area on page 47](#)

Use the + and - icons on the **Geocode Bias** pane to drag the Google map to include the applicable location.

Adding the service and approving providers

Select the provider, add the service, for example Child Care, and approve the provider.

About this task

Use the **My Providers** pane to add a service to the appropriate provider. For information on adding a service, see the *Selecting the service* related link.

Procedure

1. Log in to Cúram as a resource manager user.
2. Click **Providers and Services > Shortcuts**.
3. Click **Providers > My Providers**.
4. Select the provider from the **Reference** column on the **My Providers** pane.
5. Select the **Services** tab of the provider.
6. Click **New Service...**
7. In the **New Service** pane, select the magnifying icon for the **Service** field.
8. In the **Service Name** of the **Service Search** window, enter the name of the service that you want to add.
In this scenario, the service is Child Care.
9. Click **Search**.
Your search results are displayed.
10. For the applicable service, click **Select**.
The **New Service** window is displayed. The service that you selected is displayed in the **Service** field.
11. Click **Save**.
The provider's home page is displayed. The service that you selected is listed in the Name column.
12. Click the
...
icon for the service.
13. Click **Approve...**.
The **Approve Provider Service** dialog box is displayed.
14. Click **Yes**.
On the provider's home page, the Status column displays Approved for the applicable service.

Related tasks

[Selecting the service on page 48](#)

Enter the reference value for the applicable service. For example, enter the reference value Shelter for the Child Care service.


Adding the approved provider to the provider group

From the provider group's home page, add the approved provider to the provider group.

About this task

Use the **My Provider Groups** tab to add the approved provider.

Procedure

1. Log in to Cúram as a resource manager (userid: cpmmanager).
2. Click **Providers and Services > Shortcuts**.
3. Click **Provider Groups > My Provider Groups**.
4. From the **Reference** column on the **My Provider groups** pane, select the provider group to which to add the group.
5. On the Provider group homepage, click the

icon and click **New Provider...**
6. Select the magnifying icon for the **Provider** field of the **New Provider** page.
7. Using the search criteria on the **Provider Search** window, search for the approved provider.
8. For the applicable provider, click **Select** from the Action menu.
The **New Provider** window is displayed. The provider that you selected is displayed in the **Provider** field.
9. Click **Save**.
The provider group's home page is displayed. The provider that you selected is listed in the Name column. The listing indicates that the provider is now part of the provider group.

Displaying Google Maps in internal triage

Submit the triage script where the client is eligible for community services. Based on the triage results, the **Community Services** tab details the services and service locations available to the client. A corresponding Google map with the service locations is displayed.

Before you begin

Ensure that the GPS coordinates you use are valid. You can search for a place by using its latitude and longitude GPS coordinates. For more information, see the *Google Maps Help* related link.

About this task

Use the **Care and Protection** tab on the home page of the registered person to create a new triage.

Procedure

1. Log in to Cúram as an eligibility worker user.
2. Register a person in Income Support.

Note: Ensure that the primary address you enter includes a valid zip code.

3. For the primary address you entered when you registered a person, set the geocoding bias area.

For more information, see the *Setting the Geocoding Bias Area* related link. In this scenario, the primary address is 128 Broadway, Salt Lake City, UT 84101, USA. When valid latitude and longitude coordinates are entered, a client map is displayed for the client.

4. On the home page of the person you registered, click the **Care and Protection** tab.

The **Cases** panel is displayed.

5. Click **Triages**.

The **Triages** panel is displayed.

6. Click **New Triage...**

The **Cúram Internal Application** window is displayed. The window lists six categories of questions. For example, Food and Shelter, Finance, and so on.

7. Complete the triage script where the client is eligible for community services.

8. Click **Submit**.

The **Community Services** tab is displayed. Based on the triage results, the **Community Services** tab details the services and service locations available to the client. A corresponding Google map with the service locations is displayed. In this scenario, the Google map shows the Child Care service at the address 128 Broadway, Salt Lake City, UT 84101, USA.

Related tasks

[Setting the geocoding bias area on page 47](#)

Use the + and - icons on the **Geocode Bias** pane to drag the Google map to include the applicable location.

Related information

[Google Maps Help](#)

Defining Screening

Some agencies only perform one type of screening on their clients while other agencies may run multiple screenings. To address these varying requirements, CCI provides the facility to configure the use of single or multiple screenings in the system. When multiple screenings are configured in the system, the first step in the screening process is to select the screening category (such as an income support screening or unemployment insurance screening). If the single screening option is configured in the system, then the system bypasses the screening category selection and proceeds directly to the program selection, where the worker selects the program for which the client wants to be screened. CCI also provides the facility to configure the programs that are associated with each screening category.

The screening data is captured via an IEG script in the same manner as a triage. The IEG administration section enables the agency to configure the screening script questions and structure.

Based on the answers the client provides to the screening questions, the system displays the potential eligibility results for the programs screened for. Urgent alerts may also be displayed to highlight important information. These results are derived using a CER rule set which runs when the intake worker submits the screening script.

Defining Applications

Agencies may require to have one or more applications available to intake workers, e.g. income support, unemployment insurance, etc. The agency can configure to have multiple applications available. In CCI, the application process is comprised of several sub-processes. CCI provides the ability to configure many of these sub-processes to meet the agency's requirements. This section provides more information on the application configuration settings.

Capture Application

CCI provides the underlying infrastructure to run one or many IEG application scripts. IEG administration functionality enables the agency to configure the application script questions and structure.

Submit Application

An agency may allow the client to apply for one or many programs. To cater for this, CCI provides the following configuration options:

- single program/single application
- multiple programs/single application
- multiple programs/multiple applications

The sections below provides more detailed information on these application configuration settings.

Single Program/Single Application

This configuration type is used when an agency is not collaborating with another agency and has implemented only one program. This is the most straightforward scenario, for example, the agency only processes subsidized child care assistance applications.

Multiple Program/Single Application

This configuration type is used when the agency manages multiple programs, but has a combined application form which covers all programs. For example, the agency processes cash, food and medical assistance applications, and has one form which captures the data for all of them. This configuration is also used when the agency has configured to have separate cases for one or more of the programs on a single application. In this scenario, when the application script is submitted, separate applications are created with a status of submitted, and a unique reference number is generated for each application.

Multiple Program/Multiple Applications

This configuration type is used when the agency is managing multiple program intakes and multiple applications. For example, the agency processes cash, food and medical assistance on one application form and processes unemployment insurance on another application form. If a client wants to apply for food assistance and unemployment insurance, the intake worker takes the food assistance application and then takes the unemployment insurance application. Any duplicate data can be pre-populated on the second application script so that the intake worker does not have to enter the same data twice. This supports the No Wrong Door approach to intake.

Route Application

An agency may route an application to either a work queue or a user.

Route Application to Work Queue

CCI allows an agency to route an application to a work queue based on the channel it was received, e.g., online applications are always routed to an online application work queue. An application may also be routed to a work queue based on the application and program type, e.g., medical assistance only applications are always routed to a medical assistance work queue. Medical assistance, food assistance, and cash assistance combined applications are routed to a combined application work queue. The agency may also configure the work queues (for example, set up different work queues and assign the user to one or more work queue) using Cúram work queue functionality. For more information on work queues, see the *Cúram Workflow Overview Guide*.

Route Application to User

An application can be routed to a specific user, if configured by the agency. When this is configured, the application will be automatically assigned to the user and will appear in his or her My Applications list. If the specified user is out of the office, the agency may configure an allocation strategy to route the applications to another user. For example, the applications may be routed to the supervisor if the intake worker is out of the office.

Record Application

In CCI, the system records the details that are submitted on the application form, including application details, clients, and evidence. The agency can configure whether the application date is defaulted to today's date or set based on the local office business hours for online applications.

The mapping of the information that is collected in the set of application questions to the case that is created when the application is submitted can be configured, based on the agency's requirements. For example, an agency that has installed CCI and Income Support can configure the mappings from the application set of questions to Income Support evidence and participant records.

Establish Existing Case

The agency can configure whether the action to add an application or transfer an application to an existing case is available for intake and eligibility workers. Additionally, there are a number of configuration options available to the agency for configuring case lists. For example, the agency may want to filter the case lists to only display open integrated cases of type income support.

Application List

CCI provides a list of applications associated with a person which is accessible from the person home page. The system displays summary information about the application on the list. The agency can configure the applications displayed on the applications list based on application status and application type. Additionally, the agency can configure whether a preview panel should be displayed. The content of the preview panel can also be configured based on the application status and type.

Maintain Evidence

When an application is submitted, the evidence captured is mapped to the associated integrated case. CCI allows the agency to configure the application data mappings by using the data mapping engine. For more information about the data mapping engine, see the *Cúram Data Mapping Engine Administration Guide*.

Evidence can be maintained by using one of the evidence management options, including the evidence dashboard, in edit evidence list, active evidence list, or the verifications list. For more information about evidence configuration, .

Program Recommendations

Administrators can configure the programs included in applications, the order in which the programs are displayed, and the eligibility date used to determine eligibility for a program. The eligibility date can be configured to be either the application date or the program request date.

CCI allows the user to view the results of application eligibility checks. Administrators can configure the ordering of the programs displayed for eligibility results. The user may also configure the dates to be used in the decision period.

The eligibility and entitlement rules are determined using the CER rules editor. These rules are configurable by the agency.

Set Application Status

The agency can configure the action that occurs when the user selects to set the application status to ready for determination based on user role. For example, when an intake worker sets the application status, the application may be routed to the applications awaiting determination work queue.

Reopen a Program

CCI allows the worker to reopen a program on an application that is in a state of 'Denied' or 'Withdrawn'. By providing configuration settings the agency can configure which programs can be reopened (for example, Cash Assistance can be reopened, but not Food Assistance), the number of times a program can be reopened, and the reasons for reopening a program.

A program may have an intake timer associated with it. When a program on an application is denied or withdrawn, the timer is updated to a state of 'Completed' and the end date is set. The agency can configure an intake timer to resume when a denied or withdrawn program on an application is reopened. By providing configuration settings, the agency can configure to resume a timer by program and can also configure the date used to resume the timer as either the date the program was denied or withdrawn or the date the program on the application was reopened.

Manage Business Time Frames

CCI allows the agency to configure a timer for a business action to be completed within a certain time period. CCI leverages Cúram milestone functionality to implement timers for an application. The agency can configure whether a timer can be extended by an intake or eligibility worker, and configure whether approval of timer extension is required for a timer. For more information on milestone functionality, see the *Cúram Investigations Guide and Cúram Service Planning Guide*.

Creating a New Case for an Application

There are a number of configuration options available to the agency for submitting applications and associating them with new cases. These are described in the table below.

Table 3: Application And Case Creation Configurations

Configuration	Example of Usage
Single application for a single program, single case created	A client presents at an agency office and applies for child care via a single application and for a single program.
Single application for multiple programs, single case created	A client presents at an agency office and applies for income support. The agency has more than one income support programs available, and a single case is created for all the programs applied for on the application.
Single application for multiple programs, multiple cases created	A client presents at an agency office and applies for income support, where the agency has an application form for more than one program (e.g., food assistance, cash assistance and medical assistance). Each program is managed on a separate case.
Multiple applications for multiple programs, multiple cases created	A client presents at an agency office applying for income support and child care. The client must complete two application forms to apply for income support programs and child care separately. One case is created for the child care application and one or more cases are created for the income support application.

The agency also has the option to configure when the integrated case is made visible to intake and eligibility workers in the agency. All of the functionality required to process the application to completeness is available on the application itself, so the recommended approach is to make the integrated case visible when at least one program on the application has been disposed, as that is the case from which the ongoing eligibility of the clients will be managed. However, the agency does have the option to configure the case searches and lists to return the newly created integrated cases before the application is disposed if the agency wants the intake and eligibility workers to have access to the cases from an earlier stage in the application lifecycle, for example, immediately after the application has been submitted.

Notifying the Client of the Eligibility Determination

CCI provides the ability for an agency to configure a notification of eligibility determination to inform the citizen of the approved programs, benefit amounts, conditions or an ineligibility decision. The notification is sent once the application status is updated to disposed.

Defining Life Events

CCI provides the underlying infrastructure that allows an agency to configure its catalog of life events, scripts, and rules for the life events it wishes to capture.

The agency can configure the life events that are available to the user once he or she selects to capture a new life event. Life events can also be categorized in CCI administration so that a life

event can be identified easily. For example, change of employment and change of income can be categorized under employment. A description of the category and the life event can be entered so that the worker can identify which life event is required.

Life events captures information with a question script created using IEG. IEG administration functionality enables the agency to configure the life events script questions and structure.

The agency can also configure the CER rules which are run on life events answers to determine the recommended services and programs. See [The Provider Map on page 43](#) for more information on the configurations available for the community services map.

CCI provides the infrastructure to transfer evidence updates via the evidence broker to any active cases affected by the reported life event. The system allows the agency to configure which cases receive updates from the evidence broker when a life event is reported.

Defining PCR

CCI provides hooks for specific key events, in the applications process, where an organization can specify the PCR rules and responses based on the data gathered on the application. The following sections describe the available PCR configurations.

Rules

PCR rules determine the PCR ratings and classifications for a case. The rules check the participant data, case data, evidence, or any other specified data items to determine the overall PCR rating and classification for a case. A rule can have an associated weighting which is added to the overall PCR calculation if it succeeds. The rules then determine the overall rating and classification of the case. For example, a rule checks whether the expedited flag is set to true. If the rule succeeds, then the following weighting is added to the overall PCR calculation: Priority 80, Complexity 40, and Risk 60. The rules can be configured by case type.

Events and Manual Functions

The agency can configure whether PCR is invoked by an event, or manually invoked. PCR can be assessed when a defined event occurs during the intake process, for example application submission, or evidence activation. CCI provides a number of pre-defined events that an agency can leverage to invoke it's PCR rules (see [Assessing Priority, Complexity, and Risk for an Application on page 32](#) for more details). An agency can also configure users to be able manually trigger a PCR assessment, or manually enter the PCR classification for the application.

Classification

PCR classifications can be configured by application type, for example, high priority.

Range

The PCR range of values can be configured. The same range can be configured for priority, complexity, and risk or a different range for each one. The sample range is set as follows: Low = 0-40, Medium = 41-80, High >80. The ranges may also be configured by case type.

Response

The sample PCR response displays the PCR rating and classification on the application home page and on the PCR tab on the application.

Defining Referrals

An agency can configure community service referrals and external agency referrals. The configurations for referrals to community service providers are available in Provider Management (CPM). For more information on CPM, see the *Provider Management Guide*.

1.11 Conclusion

Summary

The following is a summary of the main concepts covered in this guide:

- CCI provides a means for the worker to carry out functions required as part of the intake process in a cohesive and usable manner.
- CCI uses a 'No Wrong Door' approach that provides clients with a universal gateway to community services and government programs. It enables clients to approach the agency with the need they need to address, rather than a preconceived idea of the programs or services they think they should receive.
- CCI facilitates the case worker's day to day work by allowing them to quickly search for a client and register them in the system.
- Workers can use triage to quickly identify community services close to the client's home and also easily identify government programs which meet their needs.
- Workers can screen clients to determine their potential eligibility for government programs.
- Workers can submit applications for programs on behalf of the clients.
- Changes in client circumstances can be easily reported using life events, thereby quickly determining whether existing benefits are affected.
- Workers can refer the client to community service providers and/or external agencies who may be able to help the client meet their basic needs.
- CCI provides an infrastructure for agencies to implement their own eligibility and advisor rules and a configurable set of intake functions that can be tailored to meet its requirements.

Additional Information

Additional information on topics covered in this guide are covered in several related documents:

- **Cúram Integrated Case Management Business Guide**
This guide covers the basic concepts of integrated case processing.
- **Child Services Business Guide**
This guide covers the basic concepts of child services case processing including intake process.

- **Cúram Participant Business Guide**
This guide covers the basic concepts of participant functionality.
- **Cúram Outcome Management Business Guide**
This guide provides an overview of outcome plans.
- **Merative Cúram Universal Access Business Guide**
This guide provides an overview of the universal access functionality.
- **Cúram Intelligent Evidence Gathering Guide**
This guide provides an overview of the intelligent evidence gathering.
- **Cúram Service Planning Business Guide**
This guide provides an overview of service planning.
- **Cúram Investigations Business Guide**
This guide covers the basic concepts of how investigations are used to resolve allegations or incidents that are reported during screening or case processing.
- **Cúram Verification Business Guide**
This guide provides an overview of the verification engine.
- **Cúram Evidence Guide**
This guide covers the basic concepts of evidence functionality.
- **Provider Management Business Guide**
This guide provides an overview of provider management.
- **Evidence Broker Business Guide**
This guide discusses evidence sharing and the evidence broker.

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