

# **Appendix D. Case management observation guide**

OMB No. 0584-[NEW]

*Survey of Supplemental Nutrition Assistance Program (SNAP)  
Employment and Training (E&T) Case Management*

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## SURVEY OF SNAP E&T CASE MANAGEMENT CASE MANAGEMENT OBSERVATION GUIDE

Use this form when you are observing a case management meeting. Use a different form for each case management meeting observation you are conducting.

### Introduction and consent

[Use separately for both case manager and participant; if participant is accompanied by a friend or family member 18 years old or older, ask for their consent as well.]

My name is [NAME] and I am from a company called [Mathematica/SPR], which is a [describe organization]. We were hired by the Food and Nutrition Service at the U.S. Department of Agriculture to help conduct a study on SNAP E&T case management. With your verbal consent, we would like to observe and record this meeting to learn more about how case management works in this program in order to create research findings that can help improve the program for future participants. The study is voluntary and the decision to participate in the study is up to you. There are no penalties if you chose not to participate. If you give your consent to participate, you can choose to stop participating at any time. All information that is collected about you through the observation will be kept private to the extent permitted by law and will be used for research purposes only. Your names will never be used in any reports and no information will be reported in any way that can identify you, except as otherwise required by law. Do you consent to have me observe your meeting?

*[If participant or case manager says no:] Okay, thank you for your consideration. [Site visitor should leave the meeting space and wait for the next case manager and client to observe.]*

*[If participant or case manager says yes:] Great, thank you!*

I would like to record the observation so I don't miss anything. No one will hear the recording except for researchers. Is it okay with you if I record your meeting? If you want me to turn the recorder off for any reason or at any time, just say so.

*[If participant or case manager says no:] Okay, thank you for your consideration. For this study, we need to record the observations for our analysis, so we won't observe you today. [Site visitor should leave the meeting space and wait for the next case manager and client to observe.]*

*[If participant and case manager say yes:] Great, thank you!*

[IF PARTICIPANT AND CASE MANAGER CONSENT, TURN ON THE RECORDER.]

Do you have any questions?

*According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-xxxx. The time required to complete this information collection is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the following address: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22314, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.*

**Observation number:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Site visitor:** \_\_\_\_\_

**Site name:** \_\_\_\_\_

**Start time:** \_\_\_\_\_ **End time:** \_\_\_\_\_

**Setting for the meeting (privacy, virtual vs. physical setting, type of space, comfort):**

- In person                       Live web/video session (e.g., Skype)
- By phone                         Other: \_\_\_\_\_

Describe the meeting space (e.g., private office, cubicle, conference room, open space)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the setting appropriate for the nature of the discussion (e.g., sufficient privacy, quiet)? Y/N  
Why/why not?

\_\_\_\_\_  
\_\_\_\_\_

Describe how the case manager and participant are positioned (e.g., across a desk from one another, next to each other at a table, case manager behind a computer screen)

\_\_\_\_\_  
\_\_\_\_\_

If virtual setting is used, was a camera used by the participant and/or the case manager? Y/N  
Were there technical issues with the connection (e.g., ability to see or hear each other)? Y/N

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Notes during the meeting**

[*Note: Site visitor should use hand-written notes during observation rather than computer to minimize background noise.*]

1. Is anyone present at the meeting besides the case manager and the participant? Y/N

If yes, describe: \_\_\_\_\_

2. Does the meeting content include: (*Circle all that apply*)

- a. Program orientation/intake
- b. Assessment administration
- c. Assessment results review

- d. Goal setting
  - e. Goal review
  - f. Service planning
  - g. Service plan review
  - h. Participant reimbursement provision
  - i. Referrals. Specify type: \_\_\_\_\_
  - j. Progress monitoring
  - k. Program compliance
  - l. Follow-up and retention services
  - m. Other. Describe: \_\_\_\_\_
3. If assessments are given or discussed, which type of assessment: *(Circle all that apply)*
- a. Informal (e.g., conversational)
  - b. Specific formal assessment (e.g., TABE, WorkKeys)
- Specify name of tool: \_\_\_\_\_
- c. Initial assessment
  - d. Reassessment
4. If setting or reviewing goals or plans, is an individual plan (e.g., individual development plan or individual employment plan) tool used? Y/N
- a. If yes, describe the discussion and how the tool is used (e.g., does the case manager fill out the tool on paper or on her computer, does the participant fill it out by hand, do they review it together on paper or on the computer)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
5. Are other specific case management tools or forms used? Y/N If yes, which ones and how are they used?
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
6. If referrals to other partner or community programs are made:
- a. To which programs? \_\_\_\_\_
  - b. How much assistance is provided with the referral (e.g., is the participant simply given a name and address or does the case manager set up an appointment for the participant with the referral agency?)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

7. If participant reimbursements are discussed:

- a. Which types? \_\_\_\_\_
- b. How are they described?  
\_\_\_\_\_  
\_\_\_\_\_
- c. Are funding amounts or limits discussed? Describe:  
\_\_\_\_\_  
\_\_\_\_\_

8. If other support services are discussed:

- a. Which types? \_\_\_\_\_
- b. How are they described?  
\_\_\_\_\_  
\_\_\_\_\_

9. If selecting SNAP E&T components is discussed:

- a. Which components?  
\_\_\_\_\_  
\_\_\_\_\_
- b. What guidance or advice does the case manager provide on selecting a component?  
\_\_\_\_\_  
\_\_\_\_\_
- c. To what degree is the participant choice being honored?  
\_\_\_\_\_  
\_\_\_\_\_
- d. Are any agreements reached?  
\_\_\_\_\_  
\_\_\_\_\_
- e. What is the basis for those agreements (e.g., information provided by staff, assessment results)?  
\_\_\_\_\_  
\_\_\_\_\_
- f. Is there any evidence that the participant wants to make a choice (e.g., select a training or educational program) with which the case manager disagrees? Vice versa? Is the disagreement resolved? If so, how?  
\_\_\_\_\_  
\_\_\_\_\_

10. What next steps are suggested to occur after the meeting?  
\_\_\_\_\_

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11. Does the participant appear satisfied with the meeting? Describe:

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12. Does the participant seem to need or want additional assistance that is not being provided? Describe: \_\_\_\_\_

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13. Assess the extent of the relationship between the participant and the case manager:

- a. Describe the body language and facial expressions you observe of both the case manager and the participant.
- b. How comfortable with each other do they seem?
- c. Is the participant forthcoming about his or her circumstances or issues?
- d. Does the participant appear to trust the case manager?
- e. Does the participant appear engaged?
- f. Is the case manager sensitive/supportive of the participant's needs?
- g. How courteous are they to one another?

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14. What case management approaches or techniques do you observe? (*Circle all that apply*)

- a. Directive case management (e.g., case manager prescribing activities for the participant)
- b. Motivational interviewing (e.g., using open-ended questions, reflective questions, and empathy)
- c. Teaming (e.g., staff from different organizations or agency units working together)
- d. Coaching (e.g., nondirective interactions focused on goal setting and participants interests)
- e. Other. Specify: \_\_\_\_\_

For each circled, provide examples of what you observed:

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15. Were there distractions during the meeting (e.g., office noises, children present)? Y/N

Describe:

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**After the meeting**

If possible, have a short debrief with the case manager after the observation. Ask the case manager about anything in the meeting you did not completely understand (e.g., unfamiliar acronyms, unclear procedures that were discussed). Then ask:

- What did you expect to happen at your meeting today?
- Did it meet your expectations?
- Was this a typical type of meeting? If not, what was different?
- *[If applicable]* Why was a virtual setting selected for the meeting?
- How long have you been working with this participant?
- Was this a typical meeting with this participant? If not, what was different?

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**Additional notes**

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