A KIT ON EFFECTIVE SCHOOL CASE MANAGEMENT

Strengthening Mental Health Programs for Secondary School Students with Support Needs

This kit has been adapted from the MindMatters Plus project developed by APACS (previously AGCA), (author Terry de Jong and project manager Coosje Griffiths) for strengthening mental health programs for secondary school students with support needs. The tools are applicable across education settings and areas of support need for students.

SECTION 1

Overview: MM+ Case Management Project

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Contents

Foreword

Teenage suicide and other mental health concerns have been on the increase in Australia for the last 100 years. This was an increase that could not be ignored. Since the early 1990's the federal and state governments of Australia have united behind suicide prevention and mental health strategies to curb this increasingly alarming growth. One initiative that was undertaken from these strategies was the development of the MindMatters resources and professional development in secondary schools.

MindMatters itself took a universal approach to mental health promotion through encouraging schools to review aspects of their whole-school system in terms of its support for mental health.

It became apparent that some secondary students were at greater risk of problems and they needed greater attention. To develop this, the MindMatters Plus Demonstration Project was created. This Project was established in 17 Secondary schools representing all Australian States, Territories and Education systems. The MindMatters Plus Project was funded by the Commonwealth Department of Health and Ageing (DoHA). The Australian Guidance and Counselling Association (AGCA) and the Australian Principals' Associations Professional Development Council (APAPDC) managed this initiative.

MindMatters Plus drew upon existing school strengths and resources, such as pastoral care frameworks and activities, alliances between staff, families and communities, links to other schools, and partnerships with mental health and other agencies. Its intention was to develop sustainable capacity-building models for schools to be able to respond in a comprehensive and flexible manner to students experiencing emotional difficulties.

This Resource on Effective School Case Management is a valuable Toolkit arising out the work on the MindMatters Plus Demonstration Project. It offers a comprehensive model of case management around secondary students with support needs in the area of mental health. Mental health specialists and school-based staff can use parts of the guidelines or the toolkit to examine and improve on their own practice. Using these guidelines and toolkit would enhance the system of care around the needs student. This would then be likely to improve the outcomes for the student and the people supporting the student.

Terry de Jong undertook the development of this Resource on Case Management. Coosje Griffiths, as the Project Manager, supported Terry in this work. Terry is to be commended on the task that he has done. This Resource is a valuable addition to the library of anyone engaged in supporting secondary students with support needs. At times these students do need intensive support. Now we have a manual that thoroughly maps out the principles and processes for effective school case management. Thank you Terry de Jong, Coosje Griffiths, and the many health profession people and educators who contributed to the development of this Resource!

Royce Herbert
Past President
Australian Guidance and Counselling Association May
2006

Acknowledgements

About this kit

This kit on Effective School Case Management is the product of the MindMatters Plus Project. The MindMatters Plus Project is aimed at increasing the capacity of secondary schools to better assist students with support needs in the area of mental health. MindMatters Plus (MM+) is jointly managed by the Australian Guidance and Counselling Association (AGCA) and the Australian Principals Associations Professional Development Council (APAPDC). The kit was based on three processes:

1. A review of Australian-based literature on effective school case management;
2. A consensus-building process which was implemented to validate, develop and refine the effective case management principles and processes identified in the literature review;
3. Feedback on the kit itself from health profession specialists and school-based personnel who have experience in school case management.

This kit articulates with another MM+ project on "Student Engagement". This work-inprogress consists of two phases, namely: (1) The production of a meta-analysis of existing studies of young people's views on issues that affect their engagement in education with a particular focus on the views of young people with support needs in the area of mental health (completed); and (2), The development of appropriate practical advice and resource/s based on phase one for use within and by schools (in progress). The importance of ensuring that the principles and practices of effective school case management embrace student views is emphasised throughout the kit.

This kit is considered to be a part of a school's pastoral care system. It designed to supplement the case management processes facilitated by mental health specialists and

school-based staff who are involved in one way or another in working with students who have support needs. It is recognised that schools have always been supporting these students, and that context plays a significant part in the range of good practices associated with school case management. As such, this kit is not meant to be a "quick fix" recipe, nor is it intended to be prescriptive, definitive, or exhaustive. Essentially, it offers mental health specialists and school-based staff a means to reflect upon the quality of their case management practice, and where appropriate, implement strategies that will develop and improve their practice.

There are three sections to this kit:

SECTION 1: Overview: MM+ Case Management Project

This section provides a brief background of and rationale for the project. It states the aim and process of the project, and concludes with a summary of the framework for effective school case management;

SECTION 2: A framework for effective school case management

This section encompasses the detailed version of what constitutes effective school case management. It has two main aims: firstly, to offer a resource to mental health specialists whose work involves school case management, such as school psychologists, school counsellors, social workers, youth workers, and G.P.'s; and secondly, to provide a comprehensive cross reference for school-based staff who are not specialists in the area of school case management but are involved in working with secondary school students who have support needs. These staff may include administrators (eg. principals, deputy principals, heads of departments, team leaders); student services personnel; and possibly teachers. Section 3, the kit on effective school case management practice, is closely aligned with the framework so that anyone involved in appraising their school case management practices, or developing an action plan to improve their case management, or facilitating a professional learning program, can make a quick, and easy reference to any specific detail in the framework as and when required.

SECTION 3: A kit for developing effective school case management practices

This section consists of a kit which is designed to engage school-based staff in consultation with mental health specialists in appraising and developing the quality of their school's case management practices. The kit comprises seven resources:

1. **Checklists** based on the framework in section 2, which require staff to appraise the extent to which they consider particular aspects of effective school case management practices to be undeveloped/developing/developed/well established in their school. They can be completed either as a paper version or online: http://mmplus.agca.com.au/escm.php ;
2. **Development Plan forms** which give staff the opportunity to target particular aspects of their case management practices for development and improvement;
3. **Summaries** of the main aspects of school case management, which can be used as part of a professional learning program (eg. distribution to participants; OHP);
4. **A pro-forma sample** of a case conference record;
5. **A Power Point presentation** of the main aspects of school case management which can be used as part of a professional learning program (available as a separate Power Point file);

6. **An example** of a school's process for case management (available as a separate Power Point file);
7. **A list of useful websites** which are associated with mental health in schools and case management.

Glossary of key terms

Students with support needs (in mental health and wellbeing) – this term replaces the notion of "at risk" students[1] – students who are emotionally, socially, physically, cognitively vulnerable (students move "in and out" of needing support) and who are in danger of not achieving their learning potential and outcomes. The focus here is on educational and environmental adjustments needed to address student mental health and wellbeing concerns.

Case conference – collaborative meeting of stakeholders involved in a case management process

Case coordination – sometimes used synonymously with "case management", but the main focus is on organisational and administrative tasks associated with case management

Case management - a collaborative process that aims to develop, monitor, disseminate, and evaluate a plan of action to enable students with support needs to function to the best of their ability and circumstances within and beyond the school system

Case manager – the person responsible for the case management process (convening, briefing, referring, communicating, monitoring, adjusting, reporting)

Health – more than the absence of illness. Involves striving towards optimal social, emotional, spiritual, and physical well-being

Health Promoting Schools (HPS) – Schools which recognise that health and learning are inextricably linked, and endeavour, by using a whole school approach, to create a school environment where students feel safe, valued, and engaged

Individual behaviour management plan (IBMP) – a detailed plan devised to support a student and his/her environment to modify his/her behaviour

Individual education plan (IEP)/ Individual learning plan (ILP)/ Learning development plan (LDP)/ Negotiated educational plan (NEP)/ Documented plan (DP) – a learning program designed to meet the specific learning needs of an individual

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[1] "At risk" is a problematic label which has been contested by young people in the "student voice" literature. They do not see it as being applicable to them, nor a useful descriptor, and consider it as being based on externally imposed criteria. Further, the term tends to emphasise a deficit approach to mental health which much of educational literature suggests can reinforce student alienation and thus impact negatively on learning outcomes (Holdsworth, 2005). This term is still used quite widely in Australian educational resources and literature. However, it is not used in this kit. The notion of "students with support needs" is applied instead. As a new emerging concept, this term is not widely used in the literature, and as a label is perhaps not entirely satisfactory either. The intention, though, is to use language that is more inclusive.

Mental health and well-being – includes thoughts, feelings and relationships, along a continuum ranging from a state of optimal health, to having an illness which might affect the latter (Hunter Institute of Mental Health, 2001, p. 1).

SECTION 1: Overview: MM+ Case Management Project[2]

1.1 Background and Rationale

Commissioned by the Australian Guidance and Counselling Association (AGCA), the School Case Management Project is located within the MindMatters Plus (MM+) initiative, which "aims to improve the capacity of secondary schools to cater for students who have support needs in the area of mental health" (MindMatters Plus Report, 2005, p.i). Considerable work is currently being conducted on capacity-building of mental health *programs* in secondary schools. A need to supplement this work with specific processes allied to mental health programs in secondary schools was identified. Effective school case management was one key area of MM+ which subsequently was targeted for further identification and development.

Figure 1 below presents a framework for a comprehensive whole school mental health program and illustrates the relationship between those involved in such a program, levels of intervention, and where case management is likely to be required.
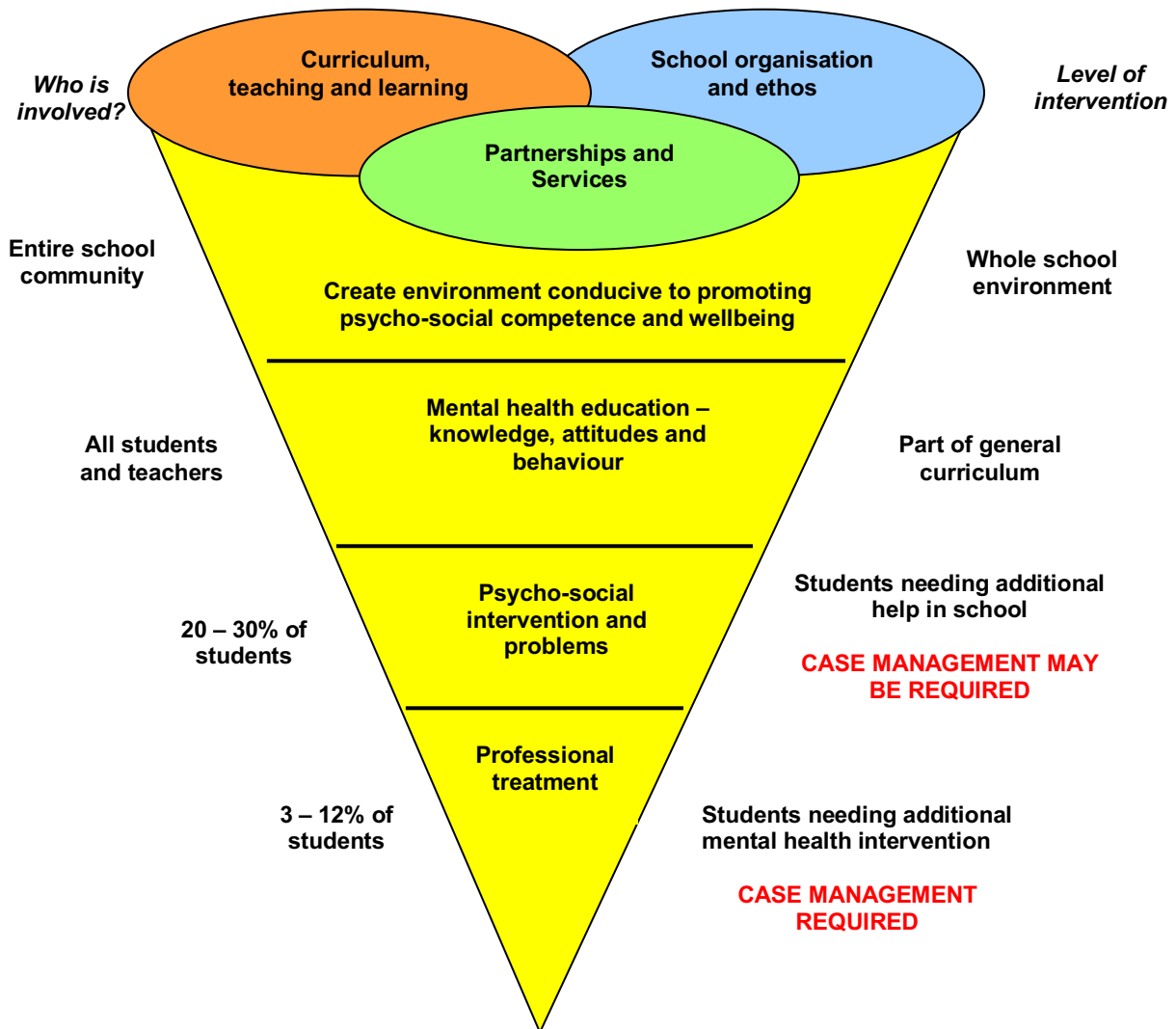

Figure 1: A Framework for a Comprehensive Whole School Mental Health Program
(adapted from the MindMatters Kit (Commonwealth Dept of Health and Aged Care, 2000)

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[2] An electronic version of this kit is available at http://mmplus.agca.com.au/escm.php

1.1.1 Why use case management in a school setting?

Having different people around me that I know I can go to for different things that happen for me really makes me feel safe. Sometimes in other schools in the past, when I went to see one person about a problem, they didn't know the answer or where to find out about it for me. Having people working together for me gives me a sense of calmness when things go wrong and knowing who I can turn to and get things happening gives me a lot of confidence in the system around me. I am learning a lot about how to cope in different areas of my life from different people around me. Having someone gather together these people so that I can access them is something I really appreciate.

Year 12 Student
Cyril Jackson Senior Campus
March 2006

Schools are found to be key settings to support young people's mental health and well being. Young people with support needs in mental health can be placed at greater risk if the school environment does not develop connections, relationships and provide educational adjustments. It is evident from the literature that on a general level case management and coordination in and across agencies is considered to be an essential strategy for the successful delivery of quality mental health services. For instance, in *Case Management. A better approach to service delivery for people with disabilities* (Office of the Public Advocate, 1992, p.6), it is asserted that there is "a growing concern with the lack of case management services, or in some cases, poor quality case management". The publication presents a rationale for case management, and recognises three major problems which case management could address: fragmented services; lack of a co-ordinating mechanism; and lack of accountability.

More recent publications acknowledge that these challenges are intrinsic to quality delivery of mental health services in schools. For example, A Report for the Victorian Full Service Schools Program *Building Scaffolds of Support: Case Management in Schools* (O'Dowd, Ryan, & Broadbent, 2001, p.14) states that the study undertaken sought to examine ways in which case management can "contribute to a more systemic approach to planning pathways", to identify how different stakeholders negotiate and coordinate their efforts to developing pathways plans, and to determine which strategies stakeholders implemented to ensure accessibility of services for students and their families.

There are a number of other publications which profess the significance of case management in Australian schools. In a research report on innovation and best practice associated with "at risk" youth in schools (Department of Education, Training and Youth Affairs, 2001b), schoolbased case management is highlighted as being a key student focused initiative which contributes to the successful retention of young people with support needs. Likewise, *Turning Lives Around: Effective service responses for young people with intensive support needs* (ACT Department of Education and Community Services, 2002) identifies case management as being a very important aspect in addressing support needs of young people. This report refers to an evaluation of Victoria's *High Risk Adolescent Service Quality Improvement Initiative* which identified intensive case management service as being one of four key service delivery components in improving young people's outcomes. Case management is considered by South Australia's Department of Education, Training and Employment (2000) as being a central strategy associated with issues at school affecting students' care and learning, including effective problem-solving. In a project conducted in 1996 to ascertain elements of practice which contribute to successful outcomes for students at educational risk (SAER) in West Australian

government schools, the Education Department of Western Australia (2000) pinpointed case management as being a core element of *interagency collaboration*, one of the nine successful practice areas the project identified. In order to meet its objectives, ACT's Youth Services Branch has developed an integrated case management framework for all its service areas (ACT Education, Youth and Family Services, 2004).

In summary, the literature suggests that there are four good reasons why case management should be used in schools:

1. Case management offers a coordinating mechanism which promotes a systemic approach to establishing an integrated action plan for students with support needs;
2. Case management empowers the student and all stakeholders to participate collaboratively in problem-solving, ensuring accessibility of support and services, and ultimately developing an integrated action plan;
3. Case management encourages clearer processes of accountability and appraising outcomes associated with an action plan;
4. Case management contributes to the successful retention of students with support needs.

1.1.2 What is *effective* school case management?

The notion of *effective* case management appeared to be used quite liberally in the literature. In general, this concept was not clearly defined though, nor supported by evidence-based research.

Is effective school case management judged by the extent to which it meets its aims? If so, what are the *strategies* employed by school case management that contribute to the effectiveness of the process? It is the latter question that seemed to be implicit in the literature when reference was made to *effective* case management. The emphasis on strategies was often implied through the use of terms such as "ingredients", "features", and "approaches". Some of the literature made explicit reference to strategies of effective school case management practice though. For example, O'Dowd et al (2001) discuss nine strategies central to the implementation of an effective school model of case management.

The idea of *best* and *good practice* was evident in the literature too. The *Turning Lives Around* report (ACT Department of Education and Community Services, 2002) referred to a "Good Practice Framework" while the Department of Education, Training and Youth Affairs (2001a) talked about case management itself as being best practice in working with young people who have support needs.

Further, s*uccessful* case management was used synonymously with *effective* case management in the literature. For instance, the Education Department of Western Australia (2000) considered effective case management as being key to the successful practice underpinning interagency collaboration. The Department of Education, Training and Youth Affairs (2001b, p.48) made reference to *successful* case management for young people who have support needs when presenting a summary of Fuller et al's (1999) eight best practice strategies:

- An holistic perspective which views young people in the context of their social family;
- Continuity of staff with someone prepared to support the young person over an extended period of time;
- A comprehensive individualised assessment;
- A coordinated service plan;
- Routine monitoring and follow-up;
- Interagency collaboration between school, and health and community sector;
- Time set aside to review practices; and

- Documentation.

Although not specific to school settings, the *National Standards of Practice for Case Management* (The Case Management Society of Australia, 2004) provides "a framework that will enable case managers to evaluate their effectiveness" (p.1). This comprehensive document presents a detailed structure of case management standards which reflects "the approach and function of case management (Standards of Practice) and the expected practices present within case management (Standards of Performance)" (p.8).

In summary, for the purposes of the Project, *effective* school case management was defined as being a collaborative process intrinsic to the delivery of quality services designed to successfully meet the needs of secondary school students who have support requirements. Put differently, school case management that is effective meets each of its seven core aims (see page 7) successfully.

1.1.3. Effective school case management and student views

A key function and aim of case management (see pages 3 and 7) is to enhance the engagement of students with support needs in meaningful learning. The literature indicates that in order to achieve this outcome, case management must empower the student to participate collaboratively in the process of establishing an integrated action plan. What does this mean, and why is it imperative?

From a legislative perspective, schools are obliged to ensure that *procedural fairness* is applied in any process that involves changes to a student's curriculum, such as teaching and learning adjustments, flexible programming, and specific behavioural strategies. Basically, procedural fairness means "that all deliberations must be unbiased and inclusive, and the people affected given a fair hearing" (DETWA, 201, p. 9). However, including student views is much more than this.

For secondary students in general, but particularly those with support needs, alienation as a condition and process in the schooling context can be a common experience (Withers & Russell, 2001). Alienated students often experience *powerlessness* when they feel that the school system is controlling and manipulating them, and they are unable to influence their own situation and destiny. Conversely, when students are involved in making decisions about their own learning and future, and have a greater sense of autonomy and internal locus of control, they are more likely to be engaged in their school and education (Geraldton Regional Community Education Centre Association, 1995; Withers & Russell, 2001).

Associated with the development of student engagement in learning is the notion of embracing the views of students. In an extensive literature review on this topic, Holdsworth and Blanchard (2005) indicated that some studies emphasised the importance of going beyond consultation with young people by linking "voice" to "action". "Student voice" is not merely the provision of data for others to make decisions for the student concerned, but is seen to be "integral to encouraging young people's active participation in shared decisions and consequent action about their own present and futures" (p. 4). In their analysis of the literature, they identified five key messages from young people with support needs about engagement with school. One of these is "**Control over circumstances**: to be consulted, negotiated with and to share decisionmaking, particularly over the nature and timing of support" (Holdsworth, 2005, p. 1).

The School Case Management Framework and Kit make numerous references to including the student in the process of establishing an integrated action plan. The idea of *active participation in decision-making* is integral to the first principle of effective school case management ("The

promotion of the student's health and well-being"). It is the basis of one of the core aims of school case management too. The second principle ("An individualised process") and fourth principle ("An efficient and purposeful management process") encapsulate the notion of *collaboration* in the development and management of the individualised action plan. The definition of effective school case management embraces the idea of collaboration while many of the strategies emphasise the importance of student inclusion in the process.

Given that empowering the student to participate collaboratively in decision-making and planning is central to good case management practice, it follows that the views of the student should not only be actively elicited and heard, but appropriately incorporated in the shared process of shaping the way forward. This will encourage the student to have a sense of ownership and control over the case management process and its intended outcomes. This assumes that the greater the internal locus of control for the student, the more likely it is that the intended outcomes of the case management process and its action plan will be successfully met.

It is important to note that actively eliciting and hearing the views of students in a case management process must always be promoted within a clear understanding of the developmental needs of adolescents, particularly those who have support needs. Young people do not always have a well developed capacity for making decisions and choices that will best serve their needs. Students with support needs, such as those with a mental health illness (eg. Psychosis), may at times be incapable of making rational judgements. There may be occasions when it is inappropriate to agree with a student's perspective, especially if it threatens the well-being of the student or others. Embracing the views of students does not necessarily mean that everything the student says and wishes to do is supported. It may be essential to challenge the student and encourage him or her to consider alternative perspectives. However, embracing student views does mean being respectful and concerned with student growth and empowerment. Advocating for the views of the student should be balanced by professional responsibility and constantly tempered by Duty of Care, which is an integral part of one of the principles of effective school case management, namely the "Maintenance of legal and human rights, privacy and confidentiality".

1.2 Aim of the project

The overall aim of the project was to produce a practical resource on the principles and practices of effective school case management for staff (eg. student support personnel, school administrators, school psychologists, mental health workers) who work with secondary school students who have support needs in the area of mental health.

1.3 Process

The project consisted of two phases:

Phase one: A review of effective school case management practice

This phase was guided by the following question:

> What in the Australian context is considered to be effective school case management practice, especially in relation to secondary school students who have support needs in the area of mental health?

Two procedures were conducted in order to answer this question:

1. A review of Australian based literature on this topic. This included research-based literature, resources on case management, policies, and approaches adopted by all the education jurisdictions in Australia (State, Territory, Government and Non-Government Education Departments);

2. Building consensus about effective school case management practices using the Delphi Method (Rayens & Hahn, 2000; Linstone & Turoff, 2002). This involved inviting experts in the field, such as school psychologists, mental health workers, academics, and student services personnel to offer critical comment on what emerged from the literature review. A primary task of the Project was to identify the *strategies* employed by effective school case management. Given the lack of evidence-based research in this area, the project implemented this process to validate, develop and refine the effective case management strategies identified in the literature review so that they could be applied to school settings.

Phase two: Production of a practical resource on the principles and practices of effective school case management

Informed by the review, this phase involved the development of this kit on the principles and practices of effective school case management. This included obtaining feedback on the kit itself from health profession specialists and school-based personnel who had experience in school case management.

1.4 Summary of the framework

Based on the review of Australian literature on effective school case management practice and the subsequent "Delphi" consensus-building process, a framework of principles and processes associated with effective school case management was developed. This framework is summarised below according to the structure presented in Table 1: *A framework for effective school case management*. This framework consists of four key areas related to the principles, definition, aims, and processes of effective school case management. For a full version of the framework, consult section 2 of this kit.

Principles of Effective School Case Management	
A *Definition* of Effective School Case Management	
Aims of Effective School Case Management	
Processes of Effective School Case Management	
Establishing a system	**Strategies**

Table 1: A framework for effective school case management.

1.4.1 Principles

Effective school case management practice should be guided by 5 principles:

1. The promotion of the student's health and well-being
2. An individualised process
3. Maintenance of legal and human rights, privacy and confidentiality 4. Non-discriminatory and culturally appropriate practice

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5. An efficient and purposeful management process.

1.4.2 A definition

Effective school case management is primarily a **collaborative process** intrinsic to the delivery of quality services designed to **meet the needs** of school students who have support requirements. Mindful of including **the views of students**, it is **student focused** and aims to develop, monitor, disseminate, and evaluate a **plan of action** to enable these students **to function to the best of their ability and circumstances** within and beyond the school system despite having support needs.

1.4.3 Aims

There are seven *core* aims of school case management, namely:

1. To enable **students to function to the best of their ability** and circumstances within and beyond the school system despite having support needs
2. To contribute to engaging students in **meaningful learning**
3. To develop, monitor, disseminate, and evaluate a **plan of action**
4. To achieve a seamless service delivery through the **coordination of and collaboration** between service providers
5. To ensure that the student with his/her parents/caregivers has **access to these service providers**
6. To actively involve and empower the student(s) and their parents/caregivers in **decisionmaking processes**
7. To assist **teachers and school staff in their work** with students who have support needs.

1.4.4 Processes

The processes associated with effective school case management involve two main areas of focus: firstly, *establishing a school-based system*, and secondly, applying a range of *interconnected and cyclical strategies*.

1.4.4.1 Establishing a school-based system

Establishing a school-based system entails eight key elements:

1. Using **a whole school approach** to mental health promotion and suicide prevention (eg. a Health Promoting Schools Framework), **a school case management (SCM) team or equivalent** (eg. student services or welfare team) is established
2. The establishment of the SCM team requires the **strong support of the school executive** and school community in general
3. The SCM team is primarily responsible for **collaboratively devising an integrated action plan** for individual students with support needs. This involves actively engaging the student him/herself, parents/carers, and school community partners in planning and decision-making so that the needs of the student are adequately addressed within and beyond the school (a "wrap-around" approach)
4. The **membership of the SCM team** will vary according to the main support needs of the school student population and individual students, and available resources
5. Ideally, **the SCM team should constitute** a school administrator; a student services/pastoral care staff member; the school psychologist/counsellor and other allied heath services where appropriate

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6. The **roles and responsibilities** of the members of the SCM team should be determined, clearly understood, and communicated to the school community 7. The SCM team should ideally develop a **shared vision**
8. The SCM team needs to be **adequately resourced**.

1.4.4.2 Strategies

There are seven interconnected and cyclical strategies associated with effective school case management practice:

1. **Case Identification**: Identifying the eligibility of the student for case management process
2. **Referral**: Linking the student to a team member who establishes a professional relationship with the student
3. **Assessment**: Endeavouring to understand the student's perspective, and identifying and assessing the student's needs
4. **Planning**: A collaborative and dynamic process of establishing a coordinated action plan with key stakeholders
5. **Implementation**: Executing, coordinating, and monitoring the action plan
6. **Transition or Closure or Completion**: Developing a transition plan to move to minimal or no case management
7. **Evaluation**: Determining the effectiveness of the case management processes and the action plan.