

MindMatters Plus: INFO SHEET NO.11

WHY SCHOOL CASE MANAGEMENT? WHAT RESEARCH AND PRACTICE TELL US

Use: Building a Whole School Capacity

Audience: Executive Team and Student Support Services Teachers

Intent: Intervention

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 case management and coordination in and across agencies is considered to be an essential strategy for the successful delivery of quality mental health services. The provision of quality case management continues to be a challenge though. For instance, it has been asserted that there is "a growing concern with the lack of case management services, or in some cases, poor quality case management".

Case management has been found to be essential to address the following problems: fragmented services; lack of co-coordinating mechanisms; and lack of accountability.

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

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

What is effective school case management?

The literature provides widespread endorsement of the process of case management itself as best practice in working with young people with support needs. A summary of Fuller et al's (1999) eight best practice strategies are as follows:

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

In summary, effective school case management is 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".

Effective school case management and student views

A key function and aim of case management is to enhance the engagement of students with support needs in meaningful learning. The literature indicates that to achieve this outcome, case management must empower the student to participate collaboratively in the process of establishing an integrated action plan.

Reasons for incorporating student participation where possible include the need:

- To counter their sense of alienation and powerlessness, and feeling that they are unable to influence their own situation and destiny;
- To enable students to be involved in making decisions about their own learning and future, have a greater sense of autonomy and have "control over their circumstances by being consulted, negotiated with and to share decision-making, particularly over the nature and timing of support"

"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". ... "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 practice is tempered by professional responsibility to student wellbeing and cases of impaired judgement with implementing duty of care, as well as suicide and risk management.

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Case Study– Girrawheen Senior High School

Girrawheen Senior High School is situated in the northern corridor suburb of Girrawheen. It is currently one of the most culturally diverse high schools in Western Australia with over one half of their students being born overseas. In addition to having a noteworthy number of Indigenous Australians (8%), the student population represents a community made up of Asians, Africans, non-English and English speaking Europeans, and non-Aboriginal Australian born people. With around 600 students and some 80 teachers and support workers the staff of this vibrant multicultural school take great pride in their educational responsibilities, as well as the importance of student wellbeing and expression through its pastoral care system and arts program that permeate the school community. The school is committed to working with parents as true partners in education and the belief that when teachers, students, parents and the community team up, the learning outcomes for students are greatly enhanced.

Through whole of school planning, curriculum, pastoral care structures, support staff and case management systems, the school recognises that cultural diversity needs to be developed in an inclusive way throughout every aspect of the school's operation. These are outlined in the School Handbook where the positive impact that cultural diversity plays in the learning of their students is acknowledged and embraced. This includes recognising that linguistic differences, institutionalised and interpersonal racism, ignorance and fear of cultural and religious difference, transience, and the socioeconomic status of some migrant and Indigenous families, can place some students' wellbeing and education at risk.

In the context of the whole school approach to health promotion outlined in MindMatters and as a demonstration school in the MindMatters Plus initiative, the school has enhanced its capacity to assist/provide for students with support needs in mental health and wellbeing. This is facilitated by a set of clear understandings, systems and processes on case management set out in a school handbook to ensure that students with support needs receive appropriate care and assistance.

The details of the process are described in the School Handbook as follows: Case Management is a procedure that allows a student to be identified, monitored and helped with issues that prevent them from reaching their educational potential. It is a continuous cycle of collaborative intervention, record keeping and feedback involving all stakeholders concerned about the education of an individual. The primary purpose of case management is to help students by supporting teachers. This is achieved by: Providing appropriate help for teachers from colleagues, Team Leaders, specialists and/or external agencies; and Including students and parents/caregivers in a coordinated plan, across learning areas, to maximise student learning. Therefore, classroom teachers play a key role in initiating the case management process at our school. Significantly, their expertise in identifying and acting on at risk behaviours and information is fundamental to the process being successful.

Typically, students are referred for case management because of such problems as classroom behaviour that impact negatively on learning including both disruptive and avoidance behaviours; emotional and social issues; and absenteeism. However, any issue that impacts on the learning of individuals, a teacher's ability to effectively teach, or the rights of other students to learn has the potential to start the case management process.

Diagram 1 represents the case management cycle at Girrawheen Senior High School. Teachers are made aware that steps in the cycle can be bypassed if the behaviour of a student indicates that higher level interventions are needed immediately. For example, a student whose work deteriorates suddenly and rapidly could enter the cycle at Stage 3.

Accurate record keeping of all known information, including the names of people and agencies involved in a student's education, is considered to be a crucial part of the Case Management process. Teachers are expected to use the proformas supplied for documentation.

Interagency liaison is also a fundamental component of the process. This is outlined in another section of the handbook entitled: 'Interagency links with schools – A policy for working with outside agencies', which is to be consulted by all staff before any contacts with outside agencies are made.

Through an ongoing process of reflection and improvement, the school strives to enhance student engagement and achievement within a culturally aware and sensitive school environment. The school's pastoral care and case management system and processes enhance the ability of staff to work collaboratively with students with complex support needs in mental health and wellbeing both within the school as well as with other agencies. The complexity and number of students requiring support is managed by the values permeating the school in that all staff understand their role in contributing to student wellbeing and the school's pastoral care and case management processes.

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CASE STUDY EXAMPLE

Michael, a Year 9 student, was presenting behaviours in class that indicated to his teacher that he was showing signs of distress, withdrawal and a disinterest in learning. In discussions with Michael, the teacher found out that he was ready to run away from home. The teacher referred Michael to his team leader who spoke to Michael and learnt that Michael's alcoholic and abusive father had recently been arrested for assault on his mother. Michael also indicated that there had been a history of Department of Community Development (DCD) interventions with his family. The team leader brought Michael's case to the Principal, and to the pastoral care (SAER-Counselling) meeting, where a Case Manager was appointed and an action plan developed. The School Nurse stated she was aware of similar issues with younger siblings at the local Primary School. The Youth Worker agreed to contact DCD to see if the family's case was an "active" one, and to find out what interventions they were planning. The School Psychologist contacted the Primary School Administration Team to facilitate a whole-of-family meeting with the mother to involve her and the children in expressing their needs and having them appropriately supported through the schools' possible interventions.

With the involvement of the Primary School Deputy (who knew the family well), the family meeting was facilitated. As a result, strategies were developed to link agency support for the children and ensure the best outcomes for the family. Police were contacted to determine the status of the assault charge and to ensure that the father was referred to Holyoake Drug and Alcohol Rehabilitation Centre if he was still at the family home. The Case Manager informed DCD of all current actions and the case was re-opened. There was a clear understanding that DCD and the schools would work collaboratively with the family. The pastoral care team met to share all information and actions and the Case Manager continued to liaise with school and agency staff. Michael was included in the Resourceful Adolescent Program (RAP) run by the School Psychologist. This small group program is an experiential, resilience-building program that has been designed to promote positive coping abilities in the face of stressful circumstances. In this context Michael learnt new coping skills and made stronger connections with his peers.

The immediate positive outcome was that Michael (and his siblings) was back in school in a supportive environment. He became more outgoing and engaged with his peers and learning. The pastoral care team continued to monitor Michael and the family situation and to follow-up on any developments. The classroom teacher and team leader were kept informed of actions and agreed to feed back on Michael's wellbeing and level of engagement with learning. The Case Manager maintained documentation (a running sheet) of all interventions, which was used to evaluate the integrated action plan as part of the pastoral care team planning meetings.

Conclusion

This Information Sheet illustrates how an effective case management process can significantly enhance the outcomes for students with support needs in mental health and wellbeing. Factors to ensure that effective case management is in place are interconnected and involve both a whole school and community approach as well as specific strategies to cater for the individual needs of the student.

For further information and resources on effective school case management, visit: <http://mmplus.agca.com.au/escm.php>

Relevant learning from the MindMatters Plus initiative:

"A positive school culture which celebrates and recognises is a platform for health promotion and intervention. This culture appreciates, utilizes and consults with students continuously."

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Diagram 1: Girrawheen Senior High School process of case management

