

Multiple and Complex Needs

Chair | Gillian Clark, VAADA

1. Expanding the toolbox for an ongoing challenge: the Comorbidity Project
2. (Re)imagining integrated care: exploring barriers and opportunities through co-design
3. Enhancing clarity in case management: the Windana case management manual



WINDANA
Life. Changing.

Enhancing Clarity in Case Management

The Windana Case Management Manual

Mark O'Brien, Chief Operations Officer
Thursday 13 February, 2025

Abstract



In a complex landscape where multiple client management systems are utilised, ensuring clear communication and understanding to support client care can be challenging.

Windana have developed the Windana Case Management Manual, aimed at establishing a shared language that minimises confusion and promotes consistency across service delivery.

This presentation will outline the development process of the manual, emphasising its role in creating a standardised framework that supports both clients and case managers. The rollout process and the initial findings from the manual's use and future directions will be discussed. Windana's experiences and insights can offer valuable lessons for organisations seeking to enhance clarity and effectiveness in their case management practices.

About Windana



Windana provides services across Victoria for adults and young people experiencing alcohol and other drug harms, family violence, mental health challenges and social disadvantage.

Our Model of Care puts clients at the centre of what we do to create positive change in people's lives. We work with families, communities and other organisations to deliver trauma informed, equitable, culturally safe and integrated services based on evidence and practice wisdom.

By intervening early and creating purposeful partnerships, we help clients achieve improved outcomes while reducing demand on acute services. And we are influencing policy, practice and research to help shape better systems for clients. Together, we influence the broader system for a more positive and connected future.

Strategic Plan 2024-26

Providing **connected services**
for more people in need



What this presentation will cover



- The background and how we arrived at the need for the Case Management Manual.
- How we developed the manual, emphasising its role in creating a standardised framework that supports both clients and case managers.
- The rollout process.
- The initial findings.
- Next steps.

The merger of Windana and TaskForce

November 2023 - Windana and TaskForce officially merge, combining services, resources, knowledge and skill.

A key benefit of this merger is the ability for clients to move between services, limiting the number of times they need to retell their story.

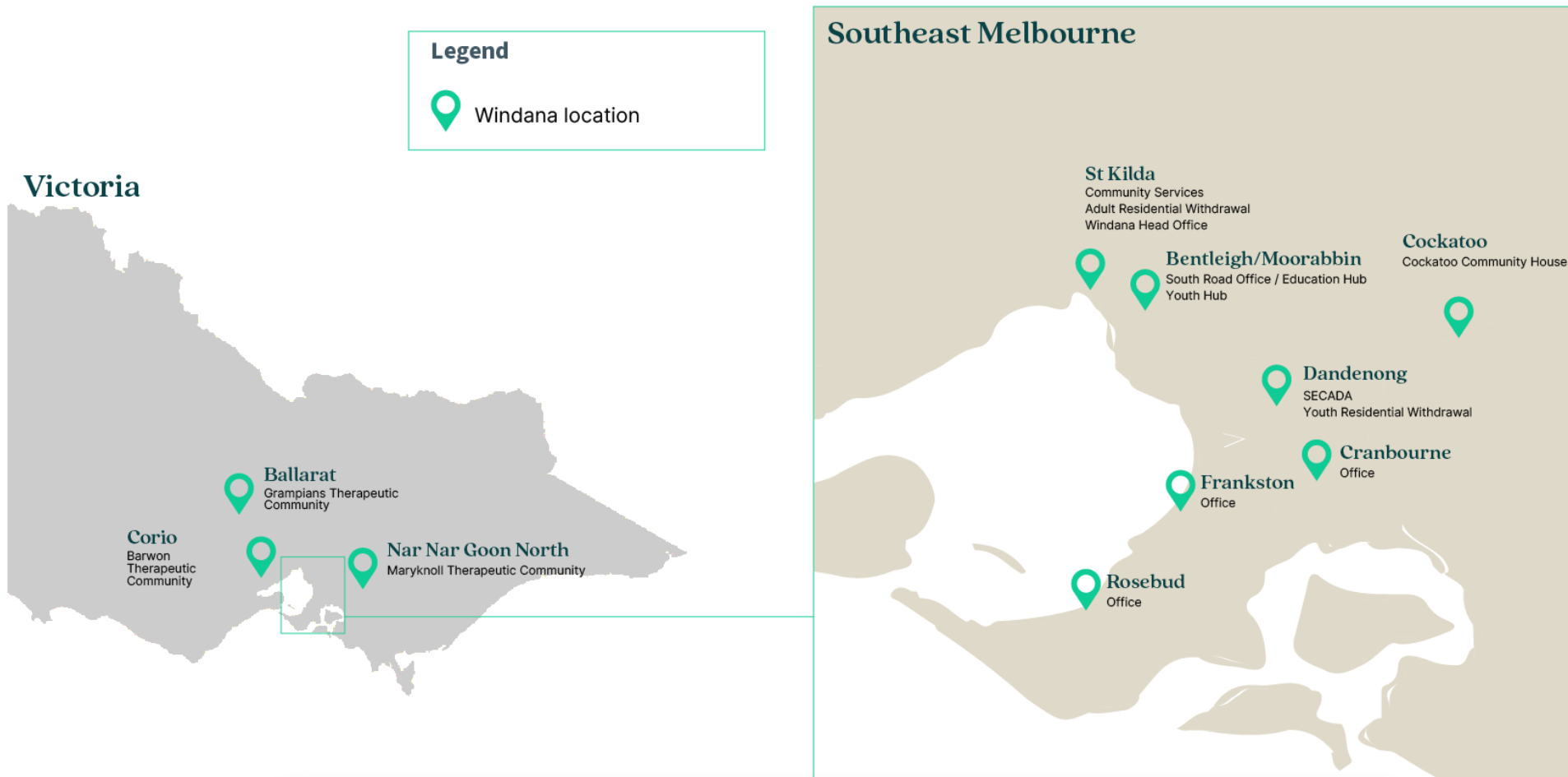


August 2024 - Windana launches updated Strategic Plan and organisational brand refresh, to provide connected services to more people in need.



WINDANA
Life. Changing.

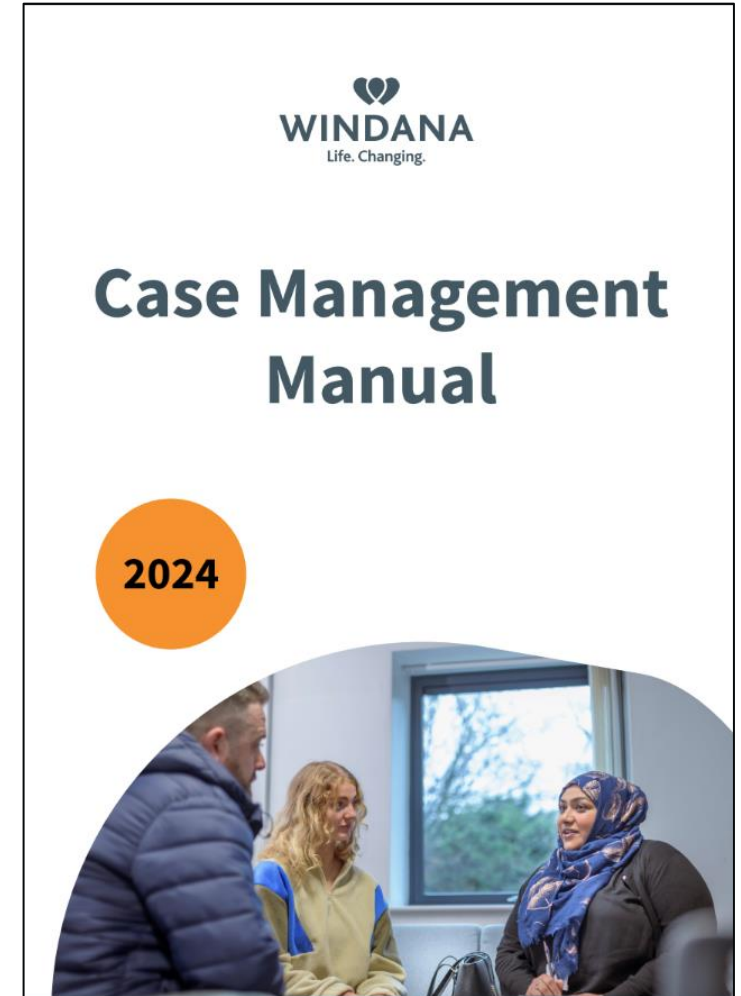
Initial assumptions & known knowns



Development of Windana's Case Management Manual

- Literature review
- Professional standards reviews
- Review of Guidelines from state/federal agencies etc
- Review of Internal policies/procedures
- Workshops with senior staff across each program
- Usability testing with senior staff
- Clinical Governance Review
- Applicability and interface with VADC etc reporting
- Digital interface and capacity to meet funding requirements
- Outcome measures capacity

Key principles - Clear language, easy to use, clients being able to transition across services without the need for reassessment.



Case Management Manual – Version 1

Contents

3	Defining AOD Case Management
4	Introduction to AOD Case Management Elements
5	Objectives of AOD Case Management
6	How does Case Management fit into the broader AOD treatment and recovery process?
7	Case Management, and Windana's Model of Care
8	Legal and Ethical Considerations
10	Ethical principles and standards for AOD Case Management
12	Assessment and Screening Principles
15	The Life Domains Framework
17	Therapeutic Community Case Management Goals per phase
18	Community Case Management Goals
19	Case Example 1: John's Recovery Journey
20	Case Example 2: Maria's Substance Use and Family Dynamics
21	Care Planning and Goal Setting
23	Strategies for engaging clients in the goal-setting process
25	Interventions and Treatment Modalities
27	Strategies for incorporating these interventions into care plans
29	Stakeholders
30	Monitoring and Evaluation
31	Strategies for adjusting care plans based on ongoing assessment
33	Appendices
33	Crisis intervention techniques and resources
35	Documentation and Record-Keeping
35	PDR, Supervision and Self-Care
35	Forms, tools, checklists and templates
36	Vulnerability Index

We embrace the diversity of our community and the wider communities that we touch.
We acknowledge the Traditional Owners of the lands on which our communities reside and pay our respects to their Elders past, present and emerging.



Case Management Guidelines
March 2024
Owner: Windana Operations

Domains	Orientation Phase 2 Goals	Rehabilitation Phase 1 2 Domains, 4 Goals	Rehabilitation Phase 2 3 Domains 6 Goals	Rehabilitation Phase 3 5 Domains 6 Goals
Alcohol and/or drug use	Nil use	Nil use	Nil use	Nil use
Health (physical)	Walk, jog, gym, garden, paint, attend psychoeducational session on health.	GP review, walk, jog, gym, garden, paint	Engagement in works programs.	Lead works programs.
Health (Mental)	Breathe, listen, reflect, and attend mental health group programs at TC.	Mental health programs attendance, review of medications if applicable. Strategy development for high prevalence disorders.	GP medication review, Mental health plan development, referral to area mental health or psychologist for post support started.	Referral/contact with mental health service for post support in place. Mental health support groups identified.
Social life and friends	Attend group Psychology programs on social connection.	Continue with group programs.	Identify social connection pathways based on TC experience.	Commence engagement and planning with Case Mgr to increase capacity for social engagement post TC.
Relationships/ Family	Attend group programs on relationships and family.	Continue with group programs, scoping family reconciliation approach.	Planned for or started a family connection.	Family meetings or outings.
Housing	Application to public housing if applicable.	Develop post-TC housing plan, meet with IH coordinator.	Meet with Housing Access Point.	Private rental scoping, public housing application, meeting with an Access Point.
Job/Education	N/A	Complete the job skills survey.	Complete CV and identify pathways.	Complete local courses to support job readiness.
Money/finances	Centrelink	Commenced financial literacy support, started budgeting or debt reconciliation plan.	Post TC budget and finance plan commenced.	Debts and budgeting targets completed.
Legal/Crime	N/A	Contact made to start CCO process. Work with Case Mgr to identify outstanding legal matters.	Engaged with legal services and addressing outstanding matters.	Engaged with legal services with plan on previous convictions or penalties

Domains	Case Management	Stakeholders to support goals
Alcohol and/or drug use	<ul style="list-style-type: none"> Harm Minimisation strategies Usage reduction or maintenance plan Explore community-based groups NA, AA, etc 	
Health (physical)	<ul style="list-style-type: none"> GP review and health care plan developed, specific physical health goals strategies such as jogging, walking, cycling, gym, garden or targeted pain management Recovery capital focus and social prescribing focus (community programs, volunteering, groups) 	<ul style="list-style-type: none"> GP and Community health (dental, physio etc.)
Health (Mental)	<ul style="list-style-type: none"> Exploration of what mental health techniques or supports have been trialled Mental health programs attendance, review of medications if applicable Strategy development for high prevalence disorders GP medication review, Mental health plan develop, referral to area mental health or psychologist for post support started Referral/contact with mental health service for post support in place Mental health support groups identified. 	<ul style="list-style-type: none"> Community Mental Health GP Mental Health Plan
Social life and friends	<ul style="list-style-type: none"> Attend group Psychology programs on social connection Identify social connection pathways based on what has been previously trialled Group programs to support social engagement 	<ul style="list-style-type: none"> Community Centre Reclink
Relationships/ Family	<ul style="list-style-type: none"> Attend group programs on relationships and family Continue with group programs, scoping family reconciliation approach Planned for or started a family connection 	<ul style="list-style-type: none"> Family programs Orange Door
Housing	<ul style="list-style-type: none"> Application to public housing if applicable (budgeting/ Centrelink) Private rental scoping, public housing application meeting with an Access Point 	<ul style="list-style-type: none"> Housing Access Point Centrelink
Job/Education	<ul style="list-style-type: none"> Review referral documents with client in relation to employment history or readiness Complete the job skills survey Connect with employment agency or support client to develop CV and identify pathways Enrol in local courses to support job readiness 	<ul style="list-style-type: none"> Employment Provider LLEN
Money/finances	<ul style="list-style-type: none"> Work with client to ascertain if eligible for Centrelink Connect client with financial literacy support or work with client on budgeting or debt reconciliation plan 	<ul style="list-style-type: none"> Centrelink Financial counsellor
Legal/Crime	<ul style="list-style-type: none"> Work with Case Manager to identify outstanding legal matters Identify legal supports any outstanding or known fines or pending matters Support client to contact pre-existing legal services and liaise with client on timelines or supports needed from an AOD perspective Meet client at legal service for first meeting if appropriate 	<ul style="list-style-type: none"> Legal Aid Peninsula CLC Barwon Community Legal Youth Law

Rollout process



Target audience – staff who work with clients and develop care plans.

Initial training

- Presentation style – dynamic workshops, held over two days, facilitated by an external trainer.
- Learning styles – high portion of staff are visual and kinaesthetic. The presentation focused why, building on the narrative of client-centred approach and client-led goals.

Ongoing implementation and reinforcement

- Site based approach – line managers at site through supervision and team meetings exploring application and case mgt
- Clients outcome care plan feedback (feedback via peers, groups, feedback forms) .

Initial findings and learnings



- **Client 360 feedback** - net promoter scores, client written feedback and feedback from peer-lead post-care groups have all been positive.
- Integrated organisational structure being implemented concurrently with role out of Case Management Booklet impacted line managers/supervisors ability to provide feedback on uptake.
- Challenges with **multiple Client Management Systems** across the organization, particularly relating to case noting.
- Clients having **digital access** to their care plan is something we are scoping in our digital roadmap.

What's next?

- Shared language
- Monthly internal audits
- Client feedback
- Stakeholder collaboration (internal and external)
- Empowerment grant
- Windana digital roadmap – the first step towards a single Client Management System



Questions?