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CASE MANAGEMENT SERVICES IN THE COMMUNITY:

BENEFITS AND OUTCOMES

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A Project

Presented to the

Faculty of

California State University,

San Bernardino

_____

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

_____

by

Esmeralda Alcantar Plascencia

June 2010

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Esmeralda Alcantar Plascencia

June 2010

Approved by:

_____   _____
Dr. Ray Liles, Faculty Supervisor   Date
Social Work

_____
Gabriela P. Gayseca, M.S M.F.T,
Montclair Community Collaborative

_____
Dr. Janet Chang
M.S.W. Research Coordinator

ABSTRACT

Case management services have long been an important

form of human services in the area of social work. One of

the major limitations regarding this area of practice has

been the inability to gather and obtain concrete

information from clients receiving services in the case

management field. As little is known of clients'

outcomes, the present research was conducted with the

goal of obtaining additional information in this field of

study. The following question was used to guide this

research, "what are the frequent characteristics found in

clients who completed and clients who did not complete

the case management program provided through the

Montclair Community Collaborative".

ACKNOWLEDGMENTS

The following people are acknowledged for their support, encouragement and their assistance in the development and implementation of this research project.

Dr. Ray E. Liles, under whose professional expertise and direction this research project was developed.

Gabriela P. Layseca, who provided authorization to gather the present data for the completion of this research project.

Luisana Sanchez, who stood by me every step of the way, who always pushed me and encouraged me through the journey of graduate school.

DEDICATION

Quisiera dedicar este proyecto especialmente a mis padres por el apoyo y la fe que desde siempre me brindaron para seguir adelante con mis estudios, los señores Antonio Granados Alcantar y Consuelo Badajoz Navarro de Alcantar. Gracias por animarme y por darme la herencia más valiosa del mundo, mi educación.

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TABLE OF CONTENTS

CHAPTER FOUR: RESULTS

CHAPTER FIVE: DISCUSSION

LIST OF TABLES

CHAPTER ONE

INTRODUCTION

Chapter One covers the problem statement, the

purpose of the study, and the significance of this

project to the social work profession. Among these three

main areas, the main subject discussed pertains to case

management services offered to low income families who

reside in the local city of Montclair, California.

Problem Statement

Case management is a program that is often offered

by many agencies in various and distinct fields. These

include hospitals, regional centers, hospice facilities,

non-profits and social services agencies, among others.

Although case management is a highly used program within

many agencies, there is not enough research done in the

area of case management practice.

In searching for a community-based organization that

provides intensive interdisciplinary team case management

services, the local community of Montclair, California

was located. Montclair is one of the smallest cities in

the San Bernardino County area with a population of

33,049 (Census, 2000). The city of Montclair is also one

of a few communities in the Los Angeles and San Bernardino County area that have a collaborative organization.

A small organization known as the Montclair Community Collaborative (MCC) provides a variety of services to their local community including a community-wide after-school program, nutrition education, primary health care and intensive case management services. These services are provided particularly to families that struggle with domestic violence, self-sufficiency issues, affordable housing, drug and alcohol abuse, cycles of poverty, low educational attainment, and language barriers.

The MCC was founded in 1996 and it currently works in partnership with multiple organizations in the area including; the Ontario-Montclair School District, local government agencies (i.e., fire department, code enforcement, police department), non-profit and faith based organizations among others. The MCC and its collaborative agencies work together to provide a safety net of support for families in crisis and a range of prevention services for children and adults.

The Montclair Community Collaborative works to bring case management services to families of the schools that are located in the Montclair area including schools that cross the border line into the cities of Ontario and Pomona. Through various Family Resource Center sites, the MCC provides coordinated services to families in a strength-based and solution-focused manner, assessing parent and child needs and arranging, monitoring, and advocating for access to services. The MCC case management program attends to the psychosocial needs of children and adults, the conditions of individual family systems, as well as the community context and social systems in which case management services operates.

The MCC currently provides services (i.e., case management, crisis intervention, mental health) to sixteen schools in the Ontario-Montclair School District area, including local residents of Montclair. Through a variety of state and federal grants, (i.e., Proposition 10, First 5 San Bernardino, Safe Schools Healthy Students, SB65) case management services have sustained and have been successful in providing the much needed case management services to the families in the local community.

An array of services have been provided through the
Montclair Community Collaborative (MCC) over the past
fourteen years, yet no formal research has been done with
these families who at one point received case management
services from this agency.

Because the Montclair Community Collaborative is
currently receiving funding from the local service
provider, First 5 San Bernardino, to provide case
management services, quarterly reports to the funding
agency are required as part of the agreement. These
reports are intended to provide an overview of the number
of families receiving intensive case management services
and referral case management assistance. The report
includes outcomes for each family assisted as well as
reason(s) for termination of the case (successful
completion of the program, dropped out, whereabouts
unknown, moved out of area, or transferred). This report
provides feedback on outcomes and goal attainment based
on the families being serviced by the agency.

Although quarterly reports are conducted
periodically for service providers as applicable, as a
community agency the Montclair Community Collaborative
does not have theoretical nor evidence-based research

that depicts the outcomes of the case management services program to families.

Purpose of the Study

The purpose of this study is to advance knowledge in the area of case management services by investigating "what characteristics are most frequent in clients who completed the case management program and in clients who did not complete the case management program provided through the Montclair Community Collaborative". This research addresses case management services and centers on obtaining client data pertaining to case management services, focusing on the family's outcome.

This research provided insight about the case management services that continue to be provided through the Montclair Community Collaborative, and served to provide important information that helped understand the effectiveness of the program as a whole. Furthermore, the Montclair Community Collaborative (MCC) was given valuable information about factors that were related to client case management outcomes. These findings may assist in future implementation of changes to the program, including revising the program as a whole to

best serve the families who may be receiving case management services in the future.

In view of the fact that the Montclair Community Collaborative agency case management program is primarily grant-funded through state funds, this research may serve to assist in writing future grant proposals for continuing funding of the program. Additionally, this research served as the foundation of research proposals for the Montclair Community Collaborative Agency.

Significance of the Project for Social Work

Due to the limited research in the area of case management, the present study served to add to this growing area of practice within the social work profession. It is highly significant to have continued research done in the area of case management, as it is necessary to continue the education of social work trainees and other professionals.

It is important to understand the effectiveness of any particular community program that is being offered to individuals and families, as it helps to develop a greater understanting of what needs to be closely

6

examined or amended to better service the local community as a whole.

Evaluation and termination are two important phases in the generalist model of the social work practice (Kirst-Ashmen & Hull, 2006), and this study focuses on these two phases. The Montclair Community Collaborative agency begins the case management process with a team meeting in which referrals are brought to the attention of the MCC agency. The referrals are then distributed to an interdisciplinary team of case managers that consist of a health nurse, Department of Children Services (DCS) social worker, counselors, human development interns, social work interns and psychology interns. The referral is closely examined and it is then distributed to the best suited professional depending on the family's needs.

Once the referral has been presented to the case manager that will be working with the family, a meeting is scheduled with the family. During the initial meeting with the referred family, the case manager completes a case management assessment, works on developing a service plan of intervention with the family, and then implements the specific needed referrals depending on the family's need. Continued support and assistance is provided to the

family until the plan and interventions are successfully completed. Although it is not always the case with all families completing the program, the plan is revisited as needed by the case manager and the family/member receiving the services. The case is evaluated for continued service every three months. Some families terminate successfully and others drop out of the program for both known and unknown reasons.

The present research focused on collecting data from individuals and families that at one point received case management services and are now terminated from the program. The data obtained was used to investigate the following question, "What characteristics are most frequent in clients who completed the case management program, and in clients who did not complete the case management program provided through the Montclair Community Collaborative".

CHAPTER TWO

LITERATURE REVIEW

Introduction

Chapter Two covers a critical review of literature related to case management services with information focusing on both the problem statement and problem focus of this study. This chapter also addresses the theoretical perspectives that have guided past research and those that will be guiding this present study.

Case Management Practice Areas

Over the past century, the practice of case management service has been implemented to increasing number of clients and types of problems. Originating as early as the 1860s, case management began in settlement house work with immigrant individuals and the poor (Tahan, 1998; Weil & Karls, 1985). Case management has since been applied in distinct areas of practice including the behavioral health fields of mental illness (Curtis, Millman, Struening, & D'Ercole, 1998; Walsh, Gilvarry, Samele, Harvey, Manley, Tyrer, 2001; Pulice, Huz, & Taber, 1991), substance abuse (Heinemann, Corrigan, & Moore, 2004), and treatment for other

co-occurring disorders (Jerrell & Ridgely, 1999). In the practice of behavioral health, case management has been modified to be used across numerous settings in both rural and urban regions (Parrish, Burr, & Pabst, 2003; Pulice, Huz, & Taber, 1991).

Case management services is fast becoming of increased interest for cost reductions in treating addictions and other forms of mental health illnesses (Jarrell, 1996). In addition, outpatient case management services have also been viewed as a cost effective instrument to health insurance providers as it provides integration, coordination of services, and advocacy to patients. This is particularly true for both individuals and groups that require a wide-range of health care services (Huber, 2000; Powell, 2000).

Case management services have expanded so rapidly and widely through distinct fields of practice that there is yet no apparent consensus regarding what case management really is or what it does in the field of social work (Huber, 2000; Tahan, 1999). Due to this predicament, multiple definitions and models of case management are currently being used. For instance, the

Case Management Society of America (CMSA) has defined case management as:

> a collaborative process of assessment, planning, facilitation and advocacy for options and services to meet an individual's health needs through communication and available resources to promote quality cost-effective outcomes. (CMSA, 2002, p. 5)

The National Association of Social Workers has defined case management as:

> a method of providing services whereby the professional assesses the needs of the client and the client's family...and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific client's complex needs. These standards also emphasize interventions at micro-, mezzo-, and macro-levels, that is, the case manager should be acting to achieve goals for the individual client, creating linkages with the resource systems and improving the nature of those systems, as well as influencing social policies which impact delivery systems (NASW, 1992, p. 1).

In addition, the MCC as an interdisciplinary team
and collaborative agency has also established its own
definition of case management services indicating that it
is:

> a service that helps families identify and remove
>
> barriers that may prevent their children from
>
> succeeding. Some of those concerns may include
>
> housing, utilities, food, medical, transportation,
>
> counseling, continuing education/ vocational
>
> training, and/or access to social services (MCC,
>
> 2005, p. 2).

Although the definition of case management services
varies both by purpose and by function, there are
numerous definitions of case management existing across
the professional literature. Disagreement over the
definition of case management is attached to
dissimilarities in how case management services have been
conceptualized, how case management services are being
delivered through numerous settings, and how distinct
disciplines, and professions (i.e., social worker, nurse,
psychologist, therapist, counselor, and psychiatrist) are
connected to the role of case manager provider (Tahan,
1999).

Task-Centered Case Management Model

Core functions pertaining to case management services can be presented by the task-centered case management model. This model is focused on five distinct phases including the preliminary, initial, planning and monitoring, and closure phase (Colvin, Lee, Magnano, & Smith, 2008). The task-centered model is an empirically based approach to resolving clients' problems (Bailey-Dempsey & Reid, 1995).

During the 1990s both Reid and Bailey-Dempsey (1996) developed a case management component for task-centered practice for children at risk of school failure. The important components of the task-centered case management model were the identification of the target goals for the student, intervention, and the formation of a collaborative team named and brought forward by the student. Once the team has been developed, identification of goals and the task to address the goals are then discussed and addressed. At this time the case manager and or practitioner assigns members of the team responsibilities for some specific tasks with the primary goal of overcoming the barriers to school success. Following the progress of the case, the case manager is

13

also responsible for identifying barriers to the overall task achievement (Reid & Bailey-Dempsey, 1996).

The task-centered case management model is composed of four primary phases, including preliminary phase, initial phase, planning and monitoring phase, and closure phase. The preliminary phase includes identification of any elementary school student that is exhibiting school-related problems or behaviors that inhibit their academic performance. This phase initiates a referral process that could be initiated by the teacher, principal, counselor, or the parents themselves. The initial phase occurs over the first four to six weeks of the student identification (Bailey-Dempsey & Reid, 1995). This phase involves engagement, problem identification, and formulation of a support team to assist in the intervention process.

The planning and monitoring phase initiates after the formation and the establishment of the support team. This phase primarily focuses on the goal-setting and the monitoring of regular team meetings. In addition, barrier identification as well as problem resolution is also completed in this phase.

During this phase team meetings are usually
scheduled every two weeks to oversee the goals that were
previously established, as well as to monitor the
development of the case status. The role of each team
member is consented to during the initial service
meeting. During this meeting each member is assigned a
task that would, in turn, assist the student in
eliminating barriers for school success.

The last phase consists of closure. This phase is
agreed upon by all team members involved in the process.
Closure during this phase is agreed to by all team
members when sufficient progress has been made in
improving the initially-identified problem.

<center>Systems Theories and the Conceptualization
of Case Management Services</center>

Multiple terms are important in understanding
systems theories and its relationship to social work
practice. These terms include, "systems, boundaries,
subsystems, homeostasis, role, relationship, input,
output, feedback, interfere, differentiation, entropy,
negative entropy, and equifinality" (Zastrow &
Kirst-Ashman, 2007, p. 12). Family systems are
characterized by multiple ongoing interactions, between

<center>15</center>

immediate family members and individuals outside the family system including the individual's social environment.

The task-centered case management model is guided by systems, family, person-in-environment, and ecological theories. Systems theory "acknowledges that systems strive to maintain equilibrium, are ever-changing, have boundaries and subsystems, and continuously interact with each other" (Kirst-Ashman & Hull, 2006, p. 115). Systems theory helps to change the focus of intervention from being solely the individual to both the individual and his or her interactions with the environment and with other systems. Person-in-environment and ecological theories focus on the 'social environment' as well as a person's interactions with his or her environment that also includes the concepts of adaptation and coping (Kirst-Ashman & Hull, 2006). Person-in-environment theory is a guiding principle of social work practice. It acknowledges that the "individual's problem areas are sometimes caused by interaction between internal and external factors" (Proctor, Vosler, & Sirles, 1993, p. 257).

Summary

Chapter Two was a review of the literature and research important to the area of case management. This chapter further presented an overview of the task-centered case management model, and concluded with a summary of theories guiding this research project: Task Center and Systems Theory.

CHAPTER THREE

METHODS

Introduction

Chapter Three documents the steps used in the development of this study. The methods used in obtaining and analyzing the data used are also discussed. Finally, information pertaining to the study design, sampling, data collection and instruments, procedures, protection of human subjects, and data analysis, are all described in detail.

Study Design

The purpose of this study was to investigate "what characteristics are most frequent in clients who completed the case management program and in clients who did not complete the case management program provided through the Montclair Community Collaborative".

The general research methodology consisted of a qualitative review (content analysis) of an existing data set (case records). This study examined a random sample of 130 MCC case management cases.

As exploratory research design was employed in this study to examine the relationship between the independent

variables and the completion or non-completion (dependent variable) of school-based case management services. These variables aided in identifying the growing areas of need in the local community of Montclair, and helped in the overall exploration of client-frequent characteristics that lead to successful outcomes.

The limitations related to the study design of this research may include:

- Possible inconsistencies in data entry from extraction tool to Statistical Package for the Social Sciences (SPSS) (data may be inaccurate).

- Data may be influenced by the biases of the assigned case manager.

Sampling

The sample for this study was taken out of 260 closed case management files. Data was extracted from a total of 130 randomly selected closed case management files of families who received case management services from the period of July 1, 2008 through June 30, 2009 from the Montclair Community Collaborative. These dates were selected because they coincide with the most recent

fiscal year in which the 130 families signed case-management consent to receive services.

Data Collection and Instruments

This study focused on the following independent variables; gender, age, primary language, marriage status, number of children in the household, ethnicity, educational level, housing status, reason for referral, length in months case open to case management services and monthly income.

The dependent variable used in this study was the case outcome at the time of termination. Outcome is defined in this study as the completion or non-completion of the case management services by the family whose case was open between July 1, 2008 and June 30 2009.

Procedures

A letter of agreement was completed in order to obtain access to the case management files. The agreement was signed by all three individuals involved in this research project, the Interim Family Services Coordinator of the Montclair Community Collaborative, the research faculty supervisor at California State University, San Bernardino, and the graduate student in charge of this

research project. The signed agreement letter indicated that the findings of this study would become available to the Montclair Community Collaborative and any interested party after research study has been completed (See Appendix B). At the time the agreement was signed by all three parties, both dates and times of case file review were scheduled to gather necessary data for this study.

A data collection tool was created in order to organize the information extracted from each case file used for this study. The data was collected during the winter of 2010. The data collection occurred during a period of 10 days and took approximately 40 hours. It took an additional 45 hours to enter the data into the Statistical Package for the Social Sciences (SPSS) computer software program for analysis.

Protection of Human Subjects

There was no human subject contact in this research project as the data was solely extracted from closed case files. In order to keep all records confidential, and to protect personal-identifying information the data extracted from each case file did not include client-identifying information. Identifying information

includes the names, social security numbers, address and telephone numbers of the individuals and their families. Each data form completed was assigned a case number for tracking purposes.

Data Analysis

The data retrieved from the case files selected were analyzed using the Statistical Package for the Social Sciences (SPSS). Descriptive statistical analysis included frequency, mean, standard deviation, and independent sample t-tests. Patterns in the data were observed, analyzed and noted.

Summary

In summary, this study utilized an exploratory research design in which data was analyzed from a total of 130 case management cases. A data extraction tool was utilized to obtain demographic information of families who received case management services during the period of July 1, 2008 and June 30, 2009.

From this data, significant variables were analyzed in order to address the following research question: "what characteristics are most frequent in clients who completed the case management program and in clients who

did not complete the case management program provided

through the Montclair Community Collaborative".

CHAPTER FOUR

RESULTS

Introduction

Included in Chapter Four is a presentation of the results of this research project. First, presented below is a complete overview of the statistical analysis of the characteristics of the 130 random sample cases identified for this study.

Second, a statistical analysis of the relationship between the dependent variable (case outcome at the time of termination) and independent variables (gender, age, primary language, marriage status, number of children in the household, ethnicity, educational level, housing status, reason for referral, length in months case open to case management services and monthly income) are presented.

Last, information pertaining to significant result findings of frequencies, percentages, and independent sample t-test are discussed.

Presentation of the Findings

Data was extracted from a total of 130 closed case management files. Findings presented include data

24

collected from 117 files as the remaining 13 files did not have any collectable data as these families refused case management services.

Table 1 shows the basic demographic characteristics of the clients utilizing case management services from the Montclair Community Collaborative. This study found that 80.2% (105) of the clients utilized case management services were females and only 9.2% (12) were males. The age range for this sample was 20 to 63 years, with a mean age of 38 years. The majority of the clients (97) were Hispanic/Latino (82.9%), 10.3% (12) were White/Caucasian, and only 5.1% (6) were African American. Clients who were categorized as "other" (2) consisted of 1.7 percent. In addition, a greater part (60) of the clients (51.3%), spoke Spanish, and 48.7% (57) spoke English.

Table 1. Basic Demographic Characteristics of Case

Management Clients

Variable	Frequency	Percentage
Gender		
Male	12	9.2
Female	105	80.2
Age		
20-25	7	6.0
26-30	11	9.4
31-35	39	33.3
36-40	26	22.2
41-45	16	13.7
46-50	7	6.0
51-55	6	5.1
56 +	5	4.3
Ethnicity		
African American	6	5.1
Hispano/Latino	97	82.9
White	12	10.3
Other	2	1.7
Primary Language		
Spanish	60	51.3
English	57	48.7

Table 2 shows additional characteristics of the

clients in this sample. The majority of the clients

(31.6%) (37) who used case management services completed

between 6th and 8th grade as their highest level of

education. Only 26.5% (31) completed between 9th and 12th

grade without a high school diploma, and 17.9% (21) had minimal education with their highest level of education being 1st to 5th grade. Of the 117 cases, only 8.5% (10) obtained a high school diploma, and 6.0% (7) had some college experience.

The largest group of families, 40.2% (47) reported having yearly incomes between $10,001 and $15,000. Another 34.2% (40) reported earnings between $15,001 and $25,000, and 17.1% (20) reported earnings of less than 10,000. Of the 117 cases 6.8% (8) reported earnings of $25,001-$35,000, and only 1.7% (2) reported earning between $35,001 and $50,000.

Table 2. Demographic Characteristics of Case Management
Clients

Variable	Frequency	Percentage
Parent/Guardian Education Level		
1-5 Grade	21	17.9
6-8 Grade	37	31.6
9-12 Grade	31	26.5
High School Diploma	10	8.5
Obtained GED	1	0.9
Some College	7	6.0
AA Degree	4	3.4
Certificate from Training School	6	5.1
BA Degree	0	0
Graduate Professional School	0	0
Income Level		
Less than 10,000	20	17.1
10,001 less than 15,000	47	40.2
15,001 less than 25,000	40	34.2
25,001 less than 35,000	8	6.8
35,001 less than 50,000	2	1.7
50,001 less than 75,000	0	0
More than 75,001	0	0

Table 3 shows the household characteristics of the
case management clients, and indicates that a large
number of these households 47.9% (56) included two
parents. The second largest type of household included
43.6% (51).

Table 3. Household Characteristics of Case Management

Clients

Variable	Frequency	Percentage
Household		
1 Parent	51	43.6
2 Parents	56	47.9
1 Grandparent	4	3.4
2 Grandparents	5	4.3
3 Other	1	0.9
Number of children in the home		
0	1	0.9
1	17	14.5
2	40	34.2
3	26	22.2
4	15	12.8
5	14	12.0
6	2	1.7
7	1	.9
8	1	.9

The third largest type, two grandparent households, included 4.3% (5), and the one parent grandparent household included 3.4% (4). Only 0.9% (1) was in the "other" category for type of household.

Of all the households represented in the study 34.2% of them had two children living at home. Twenty-two percent (26) of the households had three children and 14.5% (17) of the households had one child. About 45%

(29) of families consisted of between 4 and 5 children.

Although there were not many families who exceeded 5

(3.5%) children, there were two families that had 6

children (1.7%), one with 7 (0.9%) and another with 8

children (0.9%).

Table 4. Reason for Case Management Services Referral

Variable	Frequency	Percentage
Reason for referral		
Academic	2	1.7
Attendance	9	7.7
Basic Needs	53	45.3
Behavior Health	6	5.1
Crisis	10	8.5
Social Emotional	28	23.9
Other	9	7.7

Table 4 shows the reason for the case management

service referrals. The largest number of referrals

(45.3%) (53) were made for families who had very basic

needs for concrete items such as emergency food

assistance, shelter, housing, shoes, and

clothing/uniforms. Furthermore out of 117 families, 28

(23.9%) were referred for social emotional/ counseling

assistance. About 8.5% (10) of the families were

categorized as referred due to a "crisis" situation. A crisis consists of a family needing immediate assistance from a representative of the Montclair Community Collaborative. Another 7.7% (9) were referred due to children's school attendance, and 5.1% (6) were due to behavior issues. Only 1.7% (2) of the cases referred were due to an academic concern and 7.7% (9) were categorized as "other".

Table 5. Length Case Open to Case Management Services

Variable	Frequency	Percentage
Length in month's case open to CM		
1	7	6.0
2	16	13.7
3	18	15.4
4	8	6.8
5	17	14.5
6	6	5.1
7	10	8.5
8	3	2.6
9	3	2.6
10	4	3.4
11	2	1.7
12	1	0.9
13	2	1.7
14	3	2.6
15	5	4.3
16	3	2.6
17	2	1.7
18	2	1.7
19	3	2.6
21	1	0.9
22	1	0.9

Table 5 shows the length of time the case was open for case management services. The number of months ranges from 1 to 22 months. The average number of months a case was open was 7 months. Based on the information gathered from the closed case management files, data showed that most of the cases (70.1%) (82) were open between 1 to 7 months.

Table 6. Case Management Client Outcomes

Variable	Frequency	Percentage
Case transferred to 09-10 fiscal year		
Yes	6	5.1
No	111	94.9
Case outcome at time of closure		
Completed program	91	77.8
Not Completed	26	22.2
Reason for termination if not completed		
Client moved out of area	11	28.2
Client refused services	13	33.3
Client dropped out of Program	14	35.9
Client terminated case Prematurely	1	2.6

Table 6 shows the case management client outcomes at termination. Data shows that about 77.8% (91) of cases that were open during the 2008-2009 fiscal year completed the case management program, and only 5.1% (6) of files were transferred to the 2009-2010 fiscal year. Furthermore, 22.2% (26) of cases open to case management services in 2008-2009 did not complete the program. Out of those who did not complete the program, 35.9% (14) dropped out of the program. In addition, 33.3% (13) of clients refused case management services, and 28.2% (11)

of clients moved out of area. Only 2.6% (1) of clients terminated their case prematurely.

A series of independent sample t-tests were conducted in order to compare two different groups: those who completed the case management program and those who did not complete the program. Through these analyses, a significant correlation (P = .000) was found between the reason for referral and whether the family successfully completed the case management program.

Families who were referred to case management services with issues pertaining to basic needs, crisis situations and student's behavior issues (1.333) were most likely to complete the program. Families who were referred for academics, attendance, and social emotional/counseling concerns (1.156) were most likely not to complete the case management program (t = -2.224, df = 114, P = .000).

Using statistical analysis to examine the relationships between the dependent variables (completion, non-completion) and independent variables, there were no statistical relationships found between the dependent and independent variables of:

34

- Gender

- Age

- Primary language

- Marital status

- Number of children in the household

- Ethnicity

- Educational level

- Housing status

- Length in months case was open to case management services

- Monthly income

Upon the completion of several independent sample t-test, three additional significant correlations were found. It was found that more Spanish speakers had a significantly lower level of education (2.351) than did native English speakers (3.317) (t = 3.84, df = 115, P = .000).

Additionally, families with higher income levels (2.80) had significantly higher education than those with lower incomes (5.10) (t = 3.904, df = 115, P = .001).

Lastly, a significant correlation was found between ethnicity and number of children in the home. Hispanic/

Latino families (2.917) were found to have a significantly higher number of children in the home, than native Caucasian families (1.833) (t = -2.432, df = 107, P = .034).

Summary

Chapter Four presented the results extracted from 130 closed case management files. Key findings related to the research question include:

- Reason for referral was strongly associated with case outcome at time of termination (completion, non-completion).

Additional findings not related to the initial research question include:

- Primary language was strongly associated with education level.

- Household income was strongly associated with education level.

- Ethnicity was also strongly associated with the number of children in the home.

CHAPTER FIVE

DISCUSSION

Introduction

Chapter 5 presents an overview of the conclusions drawn from the findings of this study. Limitations of this study are reviewed, and recommendations for further research in the area of social work practice are also discussed. The chapter concludes with a summary of the research findings.

Discussion

The case management program offered by the Montclair Community Collaborative has assisted over 250 families yearly over the past fourteen years. Although many services have been offered, formal research has not been done with the population that is being serviced by this agency. The present study served as the foundation for continued research not only for the Montclair Community Collaborative but for case management services in general.

This research study answered the following question: "what characteristics are most frequent in clients who completed the case management program and in clients who

37

did not complete the case management program provided through the Montclair Community Collaborative".

Evaluation and termination are two important phases in the generalist model of social work practice (Kirst-Ashmen & Hull, 2006) and this study focused on those two phases. Through various independent sample t-tests, it was found that there was a significant correlation between the reason the family was referred to receive case management services and whether the family successfully completed the case management program at the time of termination. Families who were referred to receive services due to a crisis, basic needs, or a behavior issue were more likely to complete the program. Families who were referred due to academics, attendance, social-emotional/counseling services, were less likely to complete the program.

Families who were referred because they needed basic tangible items or were in crisis made up 52.3% (63) (Refer to Table 4). According to Maslow (1954), physiological needs (hunger, thirst, bodily comforts, etc.) and safety/security are among the primary needs for human survival. Once physiological needs have been met or are relatively satisfied the individual's safety takes

precedence. Following safety is belongingness/love and lastly self-esteem.

Maslow's hierarchy of needs theory (1954), physiological and safety needs are among the primary and most important for human survival. This theory, and the results of this study (Case Management Services in the Community: Benefits and Outcomes) families seeking to meet their physiological and safety needs are among the highest group of referrals to complete the case management program.

Hispanic families represented the majority (82.9%) (97) of clients who utilized case management services. This ethnicity outcome is consistent with the Montclair population as the Hispanic/Latino community represents 62.96% of the overall population (Census, 2000).

This investigation found that Hispanic/Latino families have a significantly higher number of children in the home, than native Caucasian families and other ethnicities. In addition, it was also found that Spanish speakers had a significantly lower level of education than did English speakers. Furthermore, families with higher income levels had significantly higher education than those with lower incomes.

Findings in this study were consistent with studies done by Lopez (2005) and Burroughs (1996). Lopez (2005) found that Hispanics were typically younger and had larger families than non-Hispanic families (Lopez, Lopez, Wilkins, Torres, Valdez, Teer, & Gillian, 2005). This study (Lopez et al., 2005) also found that Hispanics were far behind non-Hispanics in education attainment in the U.S. Pertaining to the socio-economic status, Hispanics were found to be among the working poor, with approximately 23% of all Hispanics living below poverty level (Lopez et al., 2005). In a separate study Burroughs and Reeff (1996) found that the Spanish language was the most common trait associated with Hispanics.

Task Centered Theory and Systems Theory were two main conceptualizations that guided this study because the agency uses a very task-centered approach in its case management services as it tries to provide services that bolster or support the existing family system. The task-centered approach utilizes a time-limited structure as a means to "helping clients carry out actions or tasks to alleviate their problems" (Turner, 1996, p.617). This study gathered information from closed family case files in an attempt to understand reasons why families were

referred for case-management services and to determine what factors might be related to completing the case-management program. In addition, data pertaining to family demographics (age, income, education, household status, children in the home, etc.) were also gathered to assist in understanding the population that is being serviced by the Montclair Community Collaborative. The agency focuses on "Client Acknowledged Problems"; results of this study provided insight on the clients concerns. Through independent sample t-tests it was found that a high number of families 45.3% (53) declared basic need assistance as their acknowledged problem. In addition, another 23.9% (28) mentioned that social emotional/counseling services were of prime need in their family.

The task-centered approach is guided by systems, family, person-in-environment, and ecological theories (Kirst-Ashman & Hull, 2006). Through this conceptualization this study agrees that families serviced though the case management program are part of various systems within their environment. In addition, it is believed that these systems and sub-systems influence

the extent to which families can avail themselves of services provided by the agency to have their needs met.

Case files relating to 117 families were examined for the purposes of this study and the results indicate that families who were referred to case management services with issues pertaining to basic needs, crisis situations and student's behavior issues (1.333) were most likely to complete the program while families who were referred for children's academic problems, poor school attendance, or social emotional/ counseling concerns (1.156) were less likely to complete the case management program (t = -2.224, df = 114, P = .000).

These findings suggest that the task-centered and family systems approach used by the Montclair Community Collaboratives staff may be more effective for some problems than others. It seems likely that a task-centered case-management approach would help with families who need food, clothing, shelter and other concrete goods and that it might be helpful for families in a crisis situation because task-centered casework is concrete and focused on achieving measurable clear goals. What is, in some ways, a contradictory finding of this study is the fact that case management services provided

by the agency seemed to work well for families who had

been referred to the agency for a "crisis situation," but

not as well for those who had been referred for emotional

or counseling concerns. Another seeming contradiction was

that the services provided seemed to be more effective

for families who had a child with school behavior issues

but not as effective for children's academic problems or

poor school attendance.

Limitations

There were several limitations in this study. The

first was regarding the case management files, which do

not reflect if the family was informed of the services

that they may have been eligible to receive and did not

receive. This means that families who did not complete

the program might have been successful if informed of all

services they were eligible to receive.

An additional limitation to this study was that all

of the case management referrals are selected by the

school principal, program director and/or outreach

consultant. Families who received case management

services may not be typical of families within the

district or service area.

A further limitation to this study is related to the fact that the case management services through the Montclair Community Collaborative were not advertised to families within the city nor through the local schools within the Ontario-Montclair School District. Therefore, the generalizability of the findings are limited because the size and diversity of the sample were limited.

Another limitation of this study is that the sample was selected from a population within a relatively small geographic area of the County of San Bernardino and may not be representative of persons on the county or clients served by similar human services programs.

A major limitation of this study may be that dependent variable (whether or not clients completed the case management program) might not be highly correlated with other measures of client satisfaction or program effectiveness if they were available (which they were not). There was an assumption made in this study and in the discussion immediately above that if clients completed the program they were finding the services basically satisfactory and or effective.

Recommendations for Social Work
Practice, Policy and Research

As case management services become of increased

interest in efforts to reduce cost (Jarrell, 1996),

continued research and training in this area of practice

are recommended. Social workers need training that

emphasizes the importance of involving the family in all

aspects of the case management program including

assessment of needs, planning, and termination.

As social workers provide a wide range of services

including integration, coordination of services, and

advocacy to clients, additional training on

community-based programs is also recommended. These

trainings will provide an increase in social workers'

knowledge on how to best coordinate interventions that

involve the client's community support system. Training

in this area will provide insight into distinct programs

within the community that can benefit the social workers

in recognizing the most appropriate community-based

program for the client and the client's system as a

whole.

Case management services have expanded so rapidly

and widely through distinct fields of practice (Huber,

2000; Tahan, 1999), that training in case management services in the various fields (i.e., clinical case management, community case management, hospital case management, etc) is also widely recommended.

The somewhat contradictory findings discussed above suggest that the case management services provided by the Montclair Community Collaborative are more effective in some areas than others, but this study did not clarify why that is. Future research for this agency and on case management services for clients in agencies like this one might focus on the relationships client characteristics (such as the ones used in this study), client satisfaction measures, actual client outcome measures, and the extent to which clients' complete case management programs or services are offered by the agency or agencies.

Conclusions

In an effort to increase research done in the area of case management services, this exploratory study was undertaken to answer the following research question: "what characteristics are most frequent in clients who completed the case management program and in clients who

did not complete the case management program provided

through the Montclair Community Collaborative".

The findings of the content analysis of a sample of

130 case management files of families who received case

management services through the Montclair Community

Collaborative indicated that there was a strong

association between the reason for referral and whether

the family completed or not-completed the case management

program.

It is hoped that the findings from this research

study will assist social work professionals by increasing

their knowledge on the importance of community-based

programs, particularly case management and other family

services. Furthermore, this research, along with future

research in this arena, will lead to increased social

workers knowledge of case management and other community

based services.

APPENDIX A

DATA COLLECTION INSTRUMENT

Case Management Research Extraction Tool

Case File # _____

School: _____ Date Referred to CM: _____

Parent or Guardian Gender: ___Female ___Male Date Opened to CM: _____

Age of Parent/ Guardian: _____ One parent household ____ Two parent household ____

Parent/ Guardian Primary Language: English____ Spanish ____ Other _____

Ethnicity: White ___ Hispanic/ Latino ___ African American ___ Asian ___ Other _____

Parent/ Guardian Education Level: 1-5 Grade ☐ 6-8 Grade ☐ 9-12 ☐ Obtained HS Diploma ☐

Obtained GED ☐ Some College ☐ AA Degree ☐ Certificate from Training School ☐

BA Degree ☐ Graduate Professional School ☐

Language Spoken by Parent/ Guardian ☐ Spanish ☐ English ☐ Other _____

Number of Children in the Home: **Length in Months Case Open to CM:**

0-2 ☐ 3-4 ☐ 5-6 ☐ 7+ ☐   0-3 ☐ 4-6 ☐ 7-9 ☐ 10-12 ☐ 13+ ☐

Referred By: Teacher ____ Administrator ____ ORC ____ Other _____

Reason for Referral: ☐ Academic ☐ Attendance ☐ Social Emotional ☐ Behavior ☐ Health
☐ Crisis ☐ Other

Referrals Provided to Client at Time of Assessment:

☐ Basic Needs (i.e., shoes, clothing)   ☐ Holiday Assistance

☐ Child Care   ☐ Housing (i.e, shelters, apartment list)

☐ Children Services   ☐ Immigration

☐ Dental   ☐ Insurance Specialist

☐ Domestic Violence   ☐ Medical Assistance (i.e, Montclair Medical Clinic)

☐ Educational Support (i.e, por la vida, parenting)   ☐ Mental Health (i.e, counseling)

☐ Employment   ☐ School Essentials (ie., uniforms, materials)

☐ Financial Assistance (i.e, rent, utility)   ☐ Social Services

☐ Food Banks   ☐ Transportation

Did parent/ guardian follow through with referrals provided? ☐ Yes ☐ No

How many contacts did the assigned case manager conduct from the time of assessment to closure?

0-5 ☐ 6-10 ☐ 11-15 ☐ 16-20 ☐ 21-25 ☐ 26+ ☐

Was this case previously referred to receive case management services? ☐ Yes ☐ No

    If **YES** was this case previously open to case management services? ☐ Yes ☐ No

Were Additional Referrals Provided after Client Completed Assessment Intake? ☐ Yes ☐ No

Was case transferred to 09-10 fiscal year? ☐ Yes ☐ No

At the time of CASE CLOSURE, case was closed due to?

Client successfully completed program ☐   Client dropped out of program ☐

Client moved out of area ☐   Client terminated case prematurely ☐

Client denied case management services ☐

APPENDIX B

AGREEMENT LETTER

College of Social and Behavioral Sciences
Department of Social Work

1/28/2010

As a student of the School of Social Work graduate program at California State University San Bernardino, Esmeralda Alcantar Plascencia is interested in conducting her thesis research project in the area of intensive case management services, using the Montclair Community Collaborative (MCC) part of the Ontario-Montclair School District to gather data in this area of practice.

The purpose of this study is to advance knowledge in the area of case management services. This research will address case management services and will focus on obtaining client data pertaining to services, focusing on client outcome and success. The study will focus on obtaining information from closed case files from clients that received case management services through the Montclair Community Collaborative for the 08-09 fiscal year.

This study will attempt to provide insight about the current services that are being provided through the MCC. This study will also serve to provide important information that will help to understand the effectiveness of the program as a whole. The present research study will focus on collecting basic demographic data from individuals and families that at one point received case management services and are now terminated from the program. The data obtained will then be used to attempt to investigate "what are the most common characteristics that families have who have received and successfully completed case management services through the Montclair Community Collaborative".

This study will focus on obtaining information from closed case management files of clients that received case management services through the MCC agency. Information pertaining to client successes and outcomes before termination of case will also be collected. In addition, basic client demographic information will also be collected in order to obtain a more in depth overview of those being serviced by the Montclair Community Collaborative agency.
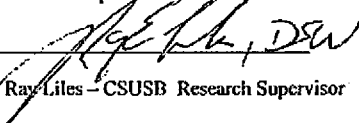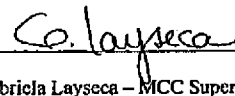
A data collection tool was created in order to organize the information extracted from each case file used for this study. The data will be collected during the winter of 2009- 2010 (January-February). There will be no human subject contact in this research project as the data will solely extracted from closed case files. In order to keep all records confidential, and to protect personal identifying information the data extracted from each case file will not include client identifying information. Identifying information includes the names, social security numbers, address, and telephone numbers of the individuals and their families. Each data form completed was assigned a case number for tracking purposes.

In making this research project possible the Montclair Community Collaborative agrees to allow MSW graduate student Esmeralda Alcantar Plascencia gather all needed and necessary data to complete the above research study. Upon completion of this research, the Montclair Community Collaborative will have a copy of the findings. In addition, a copy of the research project will be placed in the John M. Pfau Library located in California State University San Bernardino in San Bernardino, California.

Any questions or concerns regarding to this study can be addressed to Dr. Ray Liles, California State University San Bernardino faculty advisor. Dr. Liles can be reached at (909) 537-5557. Findings pertaining to this study will be available after September 10, 2010.

_____   _____   _____
Esmeralda A. Plascencia – Student   Dr. Ray Liles – CSUSB Research Supervisor   Gabriela Layseca – MCC Supervisor

909.537.5501
5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

ornia State University · Bakersfield · Channel Islands · Chico · Dominguez Hills · East Bay · Fresno · Fullerton · Humboldt · Long Beach · Los

51

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