

Responding to Referrals in Ways that Can “Stem the Tide”

In previous months, a supportive school has taken steps to welcome and provide social supports, to ensure that students have made a good adjustment to school, and to address initial adjustment problems as they arise. (See the ideas for September and October and follow-up as needed.)

NOW COME THE REFERRALS FOR STUDENTS WHO ARE MANIFESTING BEHAVIOR, LEARNING, AND EMOTIONAL PROBLEMS.

AND THESE REFERRALS BRING WITH THEM A NEED TO TAKE STEPS
TO “STEM THE TIDE” THROUGH FURTHER ENHANCEMENT OF WHAT TAKES
PLACE IN THE CLASSROOM AND AT SCHOOL TO PREVENT
AND ADDRESS PROBLEMS AS SOON AS THEY ARISE

If your school staff has developed a good referral system, it is essential to take steps to counter the “field of dreams” effect. (*Build it and they will come.*)

The key here is for the school team that processes referrals to do three things as they review each student:

- Ⓒ Determine the best course of action for helping the student
- Ⓒ Analyze the problem with a view to ways the classroom and school might change in order to minimize the need for similar referrals in the future
- Ⓒ Take steps to assist in implementing classroom and school changes that can prevent problems.

Doing all this requires staff development for the case review team, teachers, and other school staff.

Student support staff need to play a major role in such staff development.

Staff Development Focus #1

Improving the Referral System

Referral systems need to be designed in ways that stress the analysis of why problems are arising and not just to assess and funnel youngsters to services. And when services are needed, the referral must be designed as a transition intervention to ensure necessary services are appropriately accessed.

The following is a staff development tool for improving the system. Highlighted below are matters to be considered as a school develops its systems for problem identification, triage, referral, and management of care.

Problem identification

- (a) Problems may be identified by anyone (staff, parent, student).
- (b) There should be an Identification Form that anyone can access and fill out.
- (c) There must be an easily accessible place for people to turn in forms.
- (d) All stakeholders must be informed regarding the availability of forms, where to turn them in, and what will happen after they do so.

Triage processing

- (a) Each day the submitted forms must be reviewed, sorted, and directed to appropriate resources by a designated and trained triage processor. Several individuals can share this task; for example, different persons can do it on a specific day or for specified weeks.
- (b) After the sorting is done, the triage processor should send a Status Information Form to the person who identified the problem (assuming it was not a self-referral).

Clients directed to resources or for further problem analysis and recommendations

- (a) For basic necessities of daily living (e.g., food, clothing, etc.), the triage processor should provide information about resources either through the person who identified the problem or directly to the student/family in need.
- (b) If the problem requires a few sessions of immediate counseling to help a student/ family through a crisis, the triage processor should send the form to the person who makes assignments to on-site counselors.
- (c) The forms for all others are directed to a small triage "team" (1-3 trained professionals) for further analysis and recommendations. (If there is a large case load, several teams might be put into operation.) Members of such a team may not have to meet on all cases; some could be reviewed independently with recommendations made and passed on the next reviewer for validation. In complex situations, however, not only might a team meeting be indicated, it may be necessary to gather more information from involved parties (e.g., teacher, parent, student).

Interventions to ensure recommendations and referrals are pursued appropriately

- (a) In many instances, prereferral interventions should be recommended. Some of these will reflect an analysis that suggests that the student's problem is really a system problem – the problem is more a function of the teacher or other environment factors. Other will reflect specific strategies that can address the students problem without referral for outside the class assistance. Such analyses indicate ways in which a site must be equipped to implement and monitor the impact of prereferral recommendations.
- (b) When students/families need referral for health and social services, procedures should be established to facilitate motivation and ability for follow-through. Care management should be designed to determine follow-through, coordination, impact, and possible need for additional referrals.
- (c) Referrals to assess the need for special or compensatory education often are delayed because of a waiting list. Back logs should be monitored and arrangements made to catch-up (e.g., by organizing enough released time to do the assessments and reviews).

Management of care (case monitoring and management)

- (a) Some situations require only a limited form of monitoring (e.g., to ensure follow-through). A system must be developed for assigning care monitors as needed. Aides and paraprofessionals often can be trained to for this function.
- (b) Other situations require intensive management by specially trained professionals to (a) ensure interventions are coordinated/integrated and appropriate, (b) continue problem analysis and determine whether appropriate progress is made, (c) determine whether additional assistance is needed, and so forth. There are many models for intensive management of care. For example, one common approach is to assign the responsibility to the professional who has the greatest involvement (or best relationship) with the student/family.
- (c) One key and often neglected function of the care manager is to provide appropriate status updates to all parties who should be kept informed.

(This material is from the Center's Technical Aid Packet entitled *School-based Client Consultation, Referral, and Management of Care* which discusses why it is important to approach student clients as consumers and to think in terms of managing *care* not *cases*. The packet also discusses prereferral interventions and deals with referral as a multifaceted intervention. Examples of tools to aid in the various processes are included.)

Also, specifically designed as an aid for staff development is the Center's
>Quick Training Aid on – *Case Management in the School Context*.



Staff Development Focus #2

Increasing Staff Understanding About the Motivational Bases for Many Problems and About Classroom and School Changes that Can Minimize Problems Arising from Low or Negative Motivation

It is particularly important to address the reality that a few months into a school year positive motivational influences arising from the newness of the year (novelty, the “honeymoon” period, etc.) will have subsided. Many behavior, learning, and emotional problems arise at this time and could be countered by staff strategies designed to produce “motivational renewal.”

For staff development to improve understanding of the motivational bases for many behavior, learning, and emotional problems and what to do about them, you can use the following Center resources:

- >See Module II of the Continuing Education materials entitled: *Enhancing Classroom Approaches for Addressing Barriers to Learning: Classroom Focused Enabling*
- >A Quick Training Aid on *Re-engaging Students in Learning*
- >A Quick Training Aid on *Behavior Problems at School*
- >An Intro Packet on *Learning Problems and Learning Disabilities*

One place to start is with staff development designed to increase the ability of school staff for talking *with* kids. The following is abstracted from the above materials. A simple strategy to stimulate staff interest might be to copy it and put it in the staff mailboxes (and/or post it) along with a note offering a study group for those who want to learn more about the motivational bases for many problems and about classroom and school changes that can minimize problems arising from low or negative motivation.

ABOUT TALKING WITH KIDS

To help another, it is of great value and in many instances essential to know what the other is thinking and feeling. The most direct way to find this out is for the person to tell you. But, individuals probably won't tell you such things unless they think you will listen carefully. And the way to convince them of this is to listen carefully.

Of course, you won't always hear what you would like.

Helper: *Well, Jose, how do you like school?*

Jose: *Closed!*

In general, effective communication requires the ability to carry on a *productive dialogue*, that is, to talk with, not at, others. This begins with the ability to be an active (good) listener and to avoid prying and being judgmental. It also involves knowing when to share information and relate one's own experiences as appropriate and needed. The following are suggestions for engaging youngsters in productive dialogues.

I. Creating the Context for Dialogues

- C Create a private space and a climate where the youngster can feel it is safe to talk.
- C Clarify the value of keeping things confidential.
- C Pursue dialogues when the time, location, and conditions are right.
- C Utilize not just conferences and conversations, but interchanges when working together (e.g. exploring and sampling options for learning).

II. Establishing Credibility (as someone to whom it is worth talking)

- C Respond with *empathy, warmth, and nurturance* (e.g., the ability to understand and appreciate what others are thinking and feeling, transmit a sense of liking, express appropriate reassurance and praise, minimize criticism and confrontation).
- C Show *genuine regard and respect* (e.g., the ability to transmit real interest, acceptance, and validation of the other's feelings and to interact in a way that enables others to maintain a feeling of integrity and personal control).
- C Use active and undistracted listening.
- C Keep in mind that you want the student to *feel* more competent, self-determining, and related to you (and others) as a result of the interchange.

III. Facilitating Talk

- C Avoid interruptions.
- C Start slowly, avoid asking questions, and minimize pressure to talk (the emphasis should be more on conversation and less on questioning).
- C Encourage the youngster to take the lead.
- C Humor can open a dialogue; sarcasm usually has the opposite effect.
- C Listen with interest.
- C Convey the sense that you are providing an opportunity by extending an invitation to talk and avoiding the impression of another demanding situation (meeting them "where they are at" in terms of motivation and capability is critical in helping them develop positive attitudes and skills for oral communication).
- C Build on a base of natural, informal inter-changes throughout the day.
- C When questions are asked, the emphasis should be on open-ended rather than Yes/No questions.
- C Appropriate self-disclosure by another can disinhibit a reluctant youngster.
- C Pairing a reluctant youngster with a supportive peer or small group can help.
- C Train and use others (aides, volunteers, peers) to (1) enter into productive (nonconfidential) dialogues that help clarify the youngster's perceptions and then (2) share the information with you in the best interests of helping.
- C For youngsters who can't seem to convey their thoughts and feelings in words, their behavior often says a lot about their views; based on your observations and with the idea of opening a dialogue, you can share your perceptions and ask if you are right.
- C Sometimes a list of items (e.g. things that they like/don't like to do at school/after school) can help elicit views and open up a dialogue.
- C When youngsters have learning, behavior, and emotional problems, find as many ways as feasible to have positive interchanges with them and make positive contacts outweigh the negatives.
- C **Remember:** Short periods of silence are part of the process and should be accommodated.

Of course, other problems arise because of the way the system is operating. For example, analysis of behavior problems usually find that certain situations chronically contribute to problems (e.g., before school and lunch periods where youngsters do not have a good range of interesting recreational options leads some to get into trouble everyday).

A dramatic example comes from a district that found it had a significant increase in teen pregnancies among middle schoolers. Analyses traced the problem to too long a period of unsupervised time from when the school day ended until parents were home from work. To address the problem, the district moved the start of middle school later in the morning so the school day would end later, and with less time to fill, it was feasible to provide more after-school recreational opportunities. The number of teen pregnancies dropped.

For more materials on these topics, go to the Center Website and use the Quick Find Search to explore the following (among others) topics:

- C Case and Care Management
- C Motivation
- C Enabling Component
- C Classroom-focused Enabling
- C Environments that Support Learning
- C Classroom Management
- C School Avoidance
- C Dropout Prevention
- C Transition Programs/Grade Articulation/Welcome