Interdisciplinary collaboration in a school refusal intervention

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Benefits of interdisciplinary teams

• Opportunity to target complex needs when delivering interventions for youth
• Improve social and academic outcomes for young people
• Interdisciplinary partnerships lead to improvements in child mental health, improvements in home-school relationships, an increased understanding of mental health by teachers, and an increased understanding of the school context for clinicians

(Eber, Breen, Rose, Unizycki, & London, 2008; Pettitt, 2003; Weist, Axelrod Lowie, Flaherty, & Pruitt, 2001)
Types of collaborations

**Multidisciplinary**: hierarchical, may exclude the family/student, are led by one person, members have limited knowledge about others’ disciplines and are accountable to themselves

**Interdisciplinary**: less hierarchical, more inclusive of the family/student, less dependent on a central leader, members understand others’ disciplines but operate within boundaries, and members accountable to self and others

**Interprofessional collaborative practice**: family/student focused, use shared leadership, clarify roles, share knowledge across disciplines, members share responsibility and accountability and there is continuous communication

(Golom & Schreck, 2018).
Phase 1
Relationship building and assessment

Phase 2
Therapeutic & educational programs delivered in transitional classroom

Phase 3
Return to mainstream school
Governance

- **Governance Structure**:
  - **DHHS** → **Royal Children’s Hospital**
  - **Travancore School** → **DET**
  - **Melbourne Graduate School of Education**
    - Director: Mental Health Operations Manager
  - **Steering Committee**
    - In2School Team
      - Teachers 1.6
      - Clinician 1.0
      - Speech Pathologist 0.2
    - Principal Researcher
  - **School Principal**

- **Governance Objectives**:
  - Alignment of vision and strategic directions
  - Meeting strategic goals for all partners
  - Shared purpose
  - Commitment - MOU
Models of disability

Images by Gerd Altmann from Pixabay
## Intervention

<table>
<thead>
<tr>
<th>Therapy</th>
<th>Education</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Individual therapeutic sessions with young person</td>
<td>• Full time classroom attendance</td>
<td>• Evening parent group series</td>
</tr>
<tr>
<td>• Specialist assessments</td>
<td>• School liaison</td>
<td>• Social communication classroom program</td>
</tr>
<tr>
<td>• Individual parent work</td>
<td>• Curriculum development and delivery</td>
<td>• Family phone support</td>
</tr>
<tr>
<td>• Medication/ psychiatrist review</td>
<td>• Positive behaviour classroom interventions</td>
<td>• Home visits (if required)</td>
</tr>
<tr>
<td>• Care coordination</td>
<td>• Implement/review ILPs</td>
<td>• Psychoeducation sessions for partner schools</td>
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<tr>
<td>• Family therapeutic support</td>
<td>• Community based excursions</td>
<td>• Return to school plans</td>
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<tr>
<td></td>
<td>• Family communication and liaison</td>
<td>• Travel training</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• New school transfer and enrolment (if required)</td>
</tr>
<tr>
<td>Time</td>
<td>Monday</td>
<td>Tuesday</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>9.00 am</td>
<td>Tuning In</td>
<td>Tuning In</td>
</tr>
<tr>
<td>9.30 am</td>
<td>Tuning In</td>
<td>Literacy</td>
</tr>
<tr>
<td>10.00 am</td>
<td>Tuning In</td>
<td>Literacy</td>
</tr>
<tr>
<td>10.30 am</td>
<td>Mind &amp; Body</td>
<td>MORNING TEA</td>
</tr>
<tr>
<td>11.00 am</td>
<td>Numeracy</td>
<td>Social Skills</td>
</tr>
<tr>
<td>11.30 am</td>
<td>Numeracy</td>
<td>Learn a new skill</td>
</tr>
<tr>
<td>12.00 pm</td>
<td>LUNCH</td>
<td>LUNCH</td>
</tr>
<tr>
<td>12.30 pm</td>
<td>LUNCH</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1.00 pm</td>
<td>Personal Project</td>
<td>Move</td>
</tr>
<tr>
<td>1.30 pm</td>
<td>Daily Reflection</td>
<td>Daily Reflection</td>
</tr>
<tr>
<td>2.00 pm</td>
<td>Daily Reflection</td>
<td>Daily Reflection</td>
</tr>
<tr>
<td>2.15 pm</td>
<td>Finish – Home time!</td>
<td>Finish – Home time!</td>
</tr>
</tbody>
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Roles and Communication

Enablers

• Memorandum of Understanding
• Research/Program Protocols
• History of agency collaboration
• Small team reduces miscommunications
• Regular cross-agency communication at management level
• Built in links and supports with discipline and practice leadership

Barriers

• No existing multi agency process to support records management, sharing of evaluation data
• Sharing of some roles requires specific skills and confidence often outside existing professional skillsets
• Different staff selection practices
Resourcing

Enablers in place.....

• Co-location
• Some agreement around sharing resources: physical space, vehicles, crisis support
• Admin support
• Appropriately skilled staff
• Capacity for short term staff cover
• Professional Learning
• Discipline specific oversight

Barriers to address .......

• Financial uncertainty – commitment at education and health department level
• Inadequate resourcing
• Agreements around funding between agencies
• Specialist family therapy
• Enhanced follow-up
• Time to develop and sustain working relationships
From the staff

This (integrated) model helps **schools and families feel safer** – there is a greater sharing of the load of what they are going through .....the message we provide has **more strength when it is delivered together.** I had more confidence in challenging schools and families knowing that I was backed up by other professionals *(Teacher)*

**Working in this model allowed me to see things through a different lens,** have a **broader perspective** in understanding student’s needs. *(Teacher)*

This program works, the collaboration between health and education **optimises recovery**, not just with school refusal difficulties but with their learning, social interactions and emotional regulation and their family relationships. **Families feel supported, schools feel supported and the young person feels supported.** It is essential for **sustainable recovery.** *(Clinician)*

Having **trust in each other’s expertise** and **valuing the roles and contributions** we each have has been crucial to each of us performing our best in our respective roles. *(Teacher)*
Questions?

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