Chapter 8: Case Management

A Quality Youth Justice System Is Supported By An Effective Case Management System

Terms of Reference:
- Programs for education and training, health and well being and rehabilitation
- Throughcare and aftercare services provided to detainees and CYJ clients

Human Rights Standards:
- Protection of Family and Children (HR Act s.11, CROC Arts 3, 19)
- Humane Treatment (HR Act s.19)
- Right to education (POJ r.13, 38 and 39, CROC Arts 28, 29, ICESCR Art 13)
- Vocational Training and Work (POJ r.43-46, 67)

8.1 Introduction

8.1.1 Although there has been much debate about how it is implemented, case management is most often described as a process to coordinate the often diverse and complex roles and responsibilities organisations have with a client. Elizabeth Moore defines it as: ‘A set of logical steps and a process of interaction within a service network which assure that a client receives needed services in a supportive, effective and cost efficient manner…that it is viewed, not simply as a set of practices, but a system of intervention within its specific context, with objectives, ideology, functions and structures’.1

8.1.2 Experts in the youth justice field have consistently argued that positive outcomes are most likely to be achieved if supports and services are well designed, managed and implemented, and point to case management as a key tool in enabling effective collaboration and enhanced opportunities.

8.1.3 According to Day et al, ‘Case management provides the assessment and case planning components; it sets the objectives, tasks, activities, and forms the basis for planning, sequencing or scheduling of any required tasks or interventions.’2 As such, case management helps identify what supports would be most effective and sets a plan for these supports to be provided: ‘Casework often involves the application of some of the techniques understood to be effective in offender rehabilitation, and case management provides the structure in which rehabilitation interventions are offered. Both can have an impact on the success or otherwise of the intervention.’3

8.1.4 In addition to having clear and well structured processes, evidence suggests that effective case management systems are also tailored to the specific needs of the individuals that they are supporting.4

8.2 Case management in the ACT

8.2.1 In 2002, RPR Consulting released a Community Services Directorate (CSD) commissioned report Turning Lives Around which suggested that the ACT service system was not adequately meeting the needs of young people with intensive and complex support needs because it was ‘uncoordinated, crisis driven and structured around service and program models rather than the needs of the young person.’5 The report strongly recommended that intensive case management systems be developed and targeted to support those young people most at risk of adverse life trajectories (including, but not limited to engagement...

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1 Elizabeth Moore ‘Designing case management systems in juvenile justice contexts’ (2004) 6, 2 Australian journal of case management, 2
4 Elizabeth Moore ‘Designing case management systems in juvenile justice contexts’ (2004) 6, 2 Australian journal of case management, 2
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with youth justice. As a result of the report, a number of CSD and community-wide projects (including reviews, workshops and community development projects) attempted to clarify and integrate case management systems and to improve broad outcomes.

8.2.1 At present, case management services are provided at the Bimberi Youth Justice Centre (Bimberi) and within Community Youth Justice (CYJ), as well as by a range of Government and non-government service providers, including in the education, health, mental health, alcohol and other drug, youth and family sectors.

Current limitations

8.2.2 Participants in this Review pointed to the potential benefits of collaborative case management processes but also highlighted the fact that until services and systems developed a shared case management framework (which includes a shared vision, goal and model) these benefits may be compromised and lead to service duplication, inconsistency and gaps.

8.2.3 These dangers were illustrated in the 2008 report Lost in Transition which examined the experiences of young people exiting youth detention in the ACT, and which showed that many young people engaged in the youth justice system were often left with little or no support, and that services and systems failed to meet their broad psychosocial and criminogenic needs. This was despite the fact that organisations had made genuine commitments to young people and that case conferences, case plans and case work supports were put into place.

8.2.4 In discussions during this Review with young people, families and workers, it would appear that this level of inconsistency and confusion remains.

8.2.5 Some of the key challenges in implementing an effective case management system identified by participants, including youth justice and community workers, and by a review of current case management documentation, include:

• A lack of a shared vision related to case management and its provision: participants suggested that workers from different services and professional groups (eg health, justice, care and protection, community) had different philosophical views about case management, used different language and had different expectations about how and to what end case management systems were in place;

• A lack of clarity around the roles of different players: participants were often confused about the roles and responsibilities of particular stakeholders and their capacity to actively engage in case management processes.

• A lack of a designated key case manager or multiple case managers with divergent goals: participants noted that in many cases young people either had multiple workers who saw themselves as ‘key case managers’ or had none.

• An excess of ‘case managers’ and a lack of ‘case workers’: participants were concerned that there was too much of a focus on the management of plans and too little on the provision of supports to achieve the goals in the plans.

• Limited information sharing and poor communication: participants noted that although assessments are conducted by workers in a variety of programs and systems (eg Looking After Children assessments, YLS/CMI assessments, CADAS assessments, CAMHS assessments), the results of these assessments are often not shared or centralised or used to shape case management systems. Similarly, significant amounts of information is stored about young people which may be of benefit to those supporting them, and there are limited opportunities to ‘compare notes’ and to ensure congruity of intervention.

• Varying degrees of professional respect: some participants reported that they felt disregarded or disrespected by workers from other professions and that this affected their level of participation.

• A lack of participation by young people and their families: some participants (including young people and families) reported that poor engagement with needs identification and decision-making led to unresponsive and ineffective case plans and poor levels of commitment to meeting expectations. We discuss this more broadly in Chapter 3 (embedded in community)

• Poor monitoring and evaluation: participants noted that a lack of scrutiny, particularly at the implementation stage, sometimes limited the effectiveness of arrangements and the level of responsibility taken by various players.

6 Tim Moore, Vicky Saunders and Morag McArthur Lost in Transition: Exploring young people’s transition from youth detention in the ACT (2008)
A way forward

8.2.6 The Commission understands that the Office for Children, Youth and Family Support (OCYFS) has a case management framework that has been implemented across all of its programs, and that this framework guides the provision of case management services at Bimberi and in CYJ. Although the Commission recognises the value of this framework, it believes that it requires further development and needs to:

- Articulate how it can be used to progress and operationalise the vision of the youth justice system;
- Clarify the roles and responsibilities of the different services and organisations (both Government and non-government) from a variety of systems and sectors; and
- Articulate how identified goals and intended outcomes are developed, achieved and monitored.

The Commission recommends that case management for young people in the youth justice system be seen as a process for enabling coordinated responses, and not a service in and of itself. An effective case management model would draw together supports and services that ultimately achieve rehabilitation and desistance, while also meeting psychosocial need. To be effective, such a model needs to be action and outcome focused rather than process oriented, and it needs to be regularly monitored and reviewed.

8.2.7 Key components that could shape the provision of a new case management model for Youth Justice Services include:

- **Alignment of the model to reflect the vision, goals and objectives of the proposed Youth Justice Practice Framework** (as suggested in Chapter 4 (vision)): the model needs a clear focus, and should be aligned to the principles underpinning the proposed YJPF so that sustainable outcomes can be achieved through care.

- **The development of a single care team:** a single care team needs be established for each young person, and exist throughout the young person’s time in the youth justice system, or preferably throughout their engagement with the tertiary service system. This team could operate as a declared care team (with information sharing provisions governed by the Children and Young People Act 2008; CYP Act) and should include the young person, a family member or identified informal support person, a representative from each relevant organisation working with the young person, and the identified ‘case manager’. The team could be expanded to include other key stakeholders identified by the young person, the family or members of the team as having a key role in achieving positive outcomes for the young person throughout their engagement with the youth justice system and beyond. As Winkworth and White discuss in their attached report (see Appendix B), there are benefits in this care team being interdisciplinary and regionally based.

- **The development of a single case plan:** a single case plan needs to be developed which encompasses the young person’s engagement across the entire youth justice system (including, but not limited to, their detention in Bimberi and their involvement with CYJ) or, preferably, across their engagement with the tertiary service system. This plan should clearly articulate who is responsible for enacting each strategy, what timeframes are expected, and what resources will be allocated. The plan should also be reviewed and evaluated on a regular basis.

- **The appointment of a single case manager:** a single case manager needs to be identified for each young person, and be responsible for overseeing the implementation of a young person’s case plan. Ideally, this case manager should remain the same for the duration of the young person’s engagement with the tertiary service system, or at least while involved in youth justice.

- **The appointment of an advocate:** the case manager should work with the young person to identify an appropriate advocate whose responsibility it is to assist the young person before, at and after case conferences in raising their needs, views and issues with the case management process.

- **The provision of timely case conferences:** care teams need to meet regularly to discuss progress and identify and respond to emerging issues and needs. The team should also meet at pivotal points: including, for example: before court appearances; following incarceration in Bimberi; prior to exiting Bimberi; and prior to exiting the youth justice system.

- **The development of an OCYFS-wide Memorandum of Understanding:** OCYFS needs to develop an MOU which clearly articulates how OCYFS services (including CPS, ATSIS, CYJ, Bimberi, Turnaround and Youth Connections) work together to support the case manager throughout the young person’s engagement with OCYFS services.
Recommendation 8.1: The Community Services Directorate, in consultation with key stakeholders, develop a new Youth Justice Case Management Model that includes:

- mechanisms for operationalising the Youth Justice Practice Framework
- a single care team
- a single case plan
- a single case manager
- an advocate for the young person
- timely and regular case conferences.

Recommendation 8.2: The Community Services Directorate develop a Memorandum of Understanding which clearly articulates how Office for Children, Youth and Family Support services work together to support implementation of a young person’s case plan.

8.3 Case management at Bimberi

8.3.1 Bimberi has three case management positions as part of its client support services team, however since August 2010 the Aboriginal and Torres Strait Islander targeted position has been vacant.

8.3.2 Young people and families who participated in this Review often commented on the positive relationship that they had with staff with the Bimberi client support team, and that they welcomed the supports that were offered. These supports often included assisting young people to have contact with family members (via phone or in person), getting advice on personal problems, and championing their needs and wishes within the Centre.

8.3.3 Administratively, Bimberi case managers develop pre-sentence reports for the courts, liaise with external providers and, in a growing number of cases, provide advice to other Centre staff on behaviour management plans, incentives and strategies for achieving positive outcomes. Evidence within client files also points to case managers conducting case meetings, developing centre-based case plans and working with other stakeholders.

8.3.4 In such ways, Bimberi case management staff assume both pastoral and organisational roles which primarily relate to day-to-day issues and planning, and to matters confined to within the Centre.

Current limitations

8.3.5 The Commission recognises the positive outcomes that the Bimberi case management team has achieved for many young people within the Centre, yet is concerned that a number of the key components of best practice case management systems are missing from current practice.

8.3.6 Table 8.1 (below) provides an overview of an audit of Bimberi case files. The audit looked at the presence of a number of key elements of an effective case management system, as identified within CSD’s own case management framework and within the youth justice literature.

8.3.7 In undertaking this audit, the Commission examined 15 current case files, and compared the results of this audit with a similar audit conducted by the Institute of Child Protection Studies as part of its Lost in Transition report. Where there was significant evidence of key elements of effective case management (documents existed that pointed to these activities) we classified them as being ‘high’, where only certain aspects of the task had been completed we classified them as being ‘medium’, and where there was little or no evidence of the activity we classified them as being low.

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7 Department of Disability, Housing and Community Services ‘Case Management Framework’ (2006)
Table 1: Progress related to case management processes

<table>
<thead>
<tr>
<th>Case Management Stage</th>
<th>Activity / Task</th>
<th>Lost in Transition audit</th>
<th>Commission audit</th>
<th>Notes on current files</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening / Intake</td>
<td>Initial Assessment undertaken</td>
<td>High</td>
<td>Medium</td>
<td>CM notes state that assessments occur. Only some files include details of these and the assessments primarily relate to risks on admission (such as mental health problems, difficult behaviours, and relationship problems).</td>
</tr>
<tr>
<td>Assessment</td>
<td>Risk Factors identified</td>
<td>Low</td>
<td>Medium</td>
<td>CADAS, PSRs and other reports include a broad list of risks</td>
</tr>
<tr>
<td></td>
<td>Protective Factors identified</td>
<td>Low</td>
<td>Low</td>
<td>Some files include mention of positive family relationships. Other factors are generally not highlighted. In the small number of files that included YLS / CMI young people's risk and protective factors are clearly assessed.</td>
</tr>
<tr>
<td>Planning</td>
<td>Initial case plan developed (during assessment stage)</td>
<td>Low</td>
<td>Low</td>
<td>Case plans are often completed some time after intake.</td>
</tr>
<tr>
<td></td>
<td>Participation of young people</td>
<td>Low</td>
<td>Medium</td>
<td>Young people are often present in case conferences and sign plans but there is limited detail as to how they are involved.</td>
</tr>
<tr>
<td></td>
<td>Participation of family</td>
<td>Low</td>
<td>Medium</td>
<td>There are some examples of parents / siblings being present but limited detail on their level of engagement. Family feedback suggests ad hoc involvement</td>
</tr>
<tr>
<td></td>
<td>Case conferences</td>
<td>High</td>
<td>High</td>
<td>Case conferences do occur – although their regularity and timeliness differ significantly.</td>
</tr>
<tr>
<td></td>
<td>Medium term case plans developed</td>
<td>Medium (limited content)</td>
<td>Medium (limited content)</td>
<td>Case plans often are developed at CCs. They do not necessarily identify / respond to broad criminogenic and psychosocial needs.</td>
</tr>
<tr>
<td></td>
<td>Medium term case plans – strengths identified</td>
<td>Low</td>
<td>Low</td>
<td>Case plans sometimes highlight achievements in education but do not identify resources available throughcare.</td>
</tr>
<tr>
<td></td>
<td>Medium term case plans – supports offered</td>
<td>Low</td>
<td>Medium</td>
<td>Supports offered at BYJC (often within the Centre) are identified. Limited community engagement occurs.</td>
</tr>
<tr>
<td>Implementation</td>
<td>Programs to respond to risks / needs provided</td>
<td>Low</td>
<td>Medium</td>
<td>There is evidence that YP see FMH and engage in education. There is limited engagement with AOD and broad psychological supports (unrelated to MH issues) and no evidence of supports targeting issues such as sexual assault, trauma, anger management etc.</td>
</tr>
<tr>
<td></td>
<td>Programs to enhance protective factors</td>
<td>Low</td>
<td>Medium</td>
<td>There is evidence of education programs (particularly art and music) which build on YPs strengths. However programs that prepare young people for transitions and enable them to capitalise on opportunities post-release are limited.</td>
</tr>
<tr>
<td>Monitoring &amp; Review</td>
<td>Case conferences review plans and monitor outcomes</td>
<td>Low</td>
<td>Low</td>
<td>There is little evidence to suggest that plans are reviewed and for progress to be mapped. There is no evidence of client feedback or assessment of the level of engagement of collaborating organisations.</td>
</tr>
<tr>
<td></td>
<td>Strategies are clearly articulated and achievable</td>
<td>Low</td>
<td>Medium</td>
<td>Strategies generally require YP to change behaviour / participate in programs. There is no evidence of organisational 'buy in' or accountability. Strategies are not as achievable as they may be when a partnership is articulated and monitored.</td>
</tr>
<tr>
<td>Evaluation</td>
<td>Case management processes are evaluated</td>
<td>Low</td>
<td>Low</td>
<td>There is some evidence to suggest that audits of files have occurred but no evidence that practice has changed significantly as a result.</td>
</tr>
<tr>
<td>Closure</td>
<td>Transition plan developed</td>
<td>Low</td>
<td>Medium</td>
<td>Some case files include transition plans. However, the ongoing issue of service 'buy-in' continues: plans do not demonstrate that parties have agreed to referrals or clear handover processes (they are often absent from meetings). CYJ &amp; C&amp;P plans are often different and sometimes incongruous with BYJC transition plans.</td>
</tr>
<tr>
<td></td>
<td>Exit case conference</td>
<td>Low</td>
<td>High</td>
<td>Most young people have a case conference prior to exit. Community engagement (other than CYJ) remains limited.</td>
</tr>
</tbody>
</table>
The Commission acknowledges that many of the issues identified in the above table relate more to systemic and organisational challenges rather than to the performance of individual staff. Some of the challenges that we observed include:

- **Low staffing and high case loads:** even before the Aboriginal and Torres Strait Islander case management position became vacant, case managers at Bimberi appeared to be under-resourced and were inducting, assessing, coordinating and supporting up to 12 young people at a time. With increasing requirements from the courts and limited opportunities to work closely with CYJ staff, Bimberi case managers often struggled to provide face-to-face assistance and to facilitate community engagement.

- **Breadth of brief:** staff from the client support team were attempting to undertake a wide range of tasks, including: supporting the day-to-day management of young people; reporting to the court and managing young people’s appearance before the court; maintaining ongoing family contacts; developing case plans and transition plans; consulting on behaviour management; advocating for young people with other professionals at the Centre; providing personal support; and conducting assessments and programs (including the CHART and YLS/CMI tools). It appears that case managers did not have time to do all this, and there is evidence to suggest that some tasks were not able to be completed.

- **Lack of clarity around who in Youth Justice and in OCYFS was responsible for case management at different points:** there remains a lack of agreement as to who provides what to young people throughout their time in the youth justice system, including while in Bimberi. In some instances, an individual young person might have a CYJ worker, a CPS worker, a Turnaround worker, a Bimberi worker, and a NGO worker, and have five different case plans. Ironically, young people and families reported that even with this large number of workers or case managers, information, coordination, services, and supports were often limited at pivotal points, particularly on re-entry to the community.

**A way forward**

The Commission suggests that the model of care provided to young people while in Bimberi be reviewed to include:

- **The development of a single Bimberi support team:** a single Bimberi support team needs to be established to oversee the implementation of the young person’s case plan while the young person remains in Bimberi. This team should be made up of the young person, an identified family member or support person, the young person’s Bimberi support coordinator, (see below), the young person’s key worker (see below), and other staff who may be working with the young person (including health, mental health, education, sports and recreation). This team should be involved in decision-making related to classification of risk and behaviour management plans, and inform administrative tasks such as the preparation of pre-sentence reports.

- **The development of a single Bimberi support plan:** a single Bimberi support plan which deals specifically with the young person while in Bimberi needs to be developed and sit underneath the young person’s case plan. This plan should include details on how Bimberi staff will support implementation of the young person’s case plan, and also include details of any additional goals and needs that the young person and the Bimberi support team would like to address while the young person is in Bimberi.

- **The appointment of a single Bimberi support coordinator:** a single support coordinator needs to be identified for each young person, and be responsible for overseeing the implementation of the young person’s case plan while at Bimberi.

- **The appointment of key workers:** the Bimberi support team should work with the young person to identify one or more Bimberi staff who will work with the young person to provide ongoing support and mentoring. Their role would primarily be informal, but would help young people to reflect on their time at the Centre, to provide feedback on their progress, and to assist manage any complaints or grievances the young person may have. This informal mentor would also help the young person manage any tensions with other staff or young people as required.

- **The appointment of a family support and liaison officer:** As noted in Chapter 3 (embedded in community) we would recommend that family support be further integrated into the youth justice system and would advocate for a designated position to be established to help facilitate ongoing family involvement and to implement the proposed family engagement strategy suggested in Chapter 3 (embedded in community).

The Commission is aware that the ACT Government has announced the development of a youth justice system where a single case manager oversees a single case plan. The Commission supports this initiative but is of the view that there is still a role for the client services team at Bimberi to coordinate and assist young people at the Centre, particularly in regards to the areas identified above.
Recommendation 8.3: The Community Services Directorate, in consultation with key stakeholders, develop a new Bimberi Support Model that includes:

- a single Bimberi support team
- a single Bimberi support plan
- a single Bimberi support coordinator
- key workers for the young person.

8.4 Case management in Community Youth Justice

8.4.1 According to the ACT Government submission to this Report, Community Youth Justice (CYJ) ‘is responsible for the supervision of children and young people placed on a court order by the ACT Children’s Court or the ACT Supreme Court as well the preparation of court reports about young people as required.’

8.4.2 The CYJ team is made up of 11 case managers, two team leaders and two assistant managers. However, over the past two years the Commission understands a full complement of staff has never been achieved.

8.4.3 Unlike in other OCYFS case management programs (eg Turnaround and Youth Connections where case loads are capped at 10 clients), each case worker in CYJ works with between 12 and 20 clients at a time and assumes responsibility for overseeing orders, ensuring compliance, assessing criminogenic need, managing external stakeholders, and facilitating programs such as CHART.

Current limitations

8.4.4 In interviews with CYJ workers, and key stakeholders from the broader community, a number of systemic and practice-oriented challenges were identified. Generally these related to difficulties stemming from a lack of staffing and the increasing number of young people appearing before the courts and receiving an order:

- **Competing responsibilities:** as has been discussed elsewhere in this report, workers in CYJ reported a tension in managing what they believed to be two competing rather than complementary roles of care and control. Most believed that their primary responsibility was to manage and oversee young people’s compliance with orders and that the add-on ‘supportive’ aspect of their role (which many believed was the more rewarding and the part they most preferred) could only be provided if compliance was first achieved. Writers such as Trotter8 challenge this dichotomy, and promote the view that a therapeutic relationship can provide a framework for clients which promotes safety, security and compliance, and can be transformative when fostered within an environment that allows such relationships to occur.

- **Inability to provide outreach:** CYJ workers reported that due to staff shortages, limited access to government cars, and ambivalence about doing community-based work, they were often unable to do outreach support and, as a result, were unable to develop an understanding of the environments within which their clients were living, their relationships with family and friends, or their general progress.

- **Issues with current location:** Parents, young people and CYJ workers were often critical of the requirement that young people travel to Moore Street for appointments (often through multiple bus interchanges where distractions and potential hazards were many), with one parent noting that to meet this obligation her son had to ‘waste 6 hours on the bus’. Many talked about how having to sign in and to sit in the reception area at the front of the building, or just inside, was a stressful and often humiliating experience for young people and families. Both CYJ workers and young people reported difficulty in beginning interviews after waiting in this area, with young people feeling anxious or angry and needing to calm down as a result of feeling uncomfortable and judged by the constant flow of office staff. Other workers felt that having a space in the city where young people were forced to congregate with potentially problematic peers was an issue and that decentralising CYJ was needed.

- **Mix of young people:** CYJ staff were well aware that involvement with statutory organisations can be detrimental to low risk offenders and that every attempt needs to be in place to divert young people away from the youth justice system. They reported, however, that until the YLS/CMI tool was further operationalised and alternative providers (namely non-government youth services) were available to pick up these young people, that involvement of CYJ was inevitable.

8 Chris Trotter, Working with Involuntary Clients (2006)
• **Lack of discretion:** Stakeholders reported that there is a legislative discretion available in relation to breaches for post-release orders but that there is no explicit discretion in relation to breach of bail conditions. Stakeholders report that this has been interpreted by CYJ to mean that case managers could not take into account other factors related to a young person’s desistance in determining whether to report a breach of bail conditions, but were bound to report in these circumstances.

• **Increased managerialism:** CYJ staff and others reported that there were increasing demands related to reporting and information management. Although they recognised the benefits of information sharing, they believed that without an effective information system (which drew together files from Bimberi and Care and Protection Services) unreasonable amounts of time was being spent trying to collate and analyse information about young people.

• **Poor planning and information sharing with Bimberi:** CYJ staff reported frustration that their relationship with Bimberi was limited and that they were often unaware of their clients’ progress while in detention. They also reported that they were often not involved in transition planning, even though they would be the ones required to implement or monitor many of the strategies being developed.

• **Lack of access to young people while incarcerated:** Like other stakeholders, CYJ staff reported difficulty in maintaining relationships with young people while incarcerated at Bimberi. They reported that messages didn’t get through, that visits were cancelled, and that as visiting times were restricted to between 3.00pm and 5.00pm each day (when the young people are not in school) managing contact was difficult.

• **Incongruence of philosophy and approach within OCYFS programs:** CYJ staff reported that some of the goals and strategies developed in other parts of the system did not reflect the types of goals and strategies that the legislation required them to achieve. There was a range of views as to whether CYJ staff should consider needs unrelated to a young person’s criminogenic behaviour, especially when not specified in court orders. This was particularly an issue in trying to implement transition plans being developed in Bimberi.

**A way forward**

8.4.5 The Commission suggests that young people’s involvement with statutory services be differentiated in relation to need, and that only those young people with medium and high level risks be managed by CYJ. In some other jurisdictions, low risk offenders are referred to non-statutory programs with increasing success. As such, the Commission would advocate that programs such as Turnaround, Youth Connections, or agencies funded through the Youth and Family Support Program assume many of the supervision and support roles currently provided by CYJ to this group. Low risk offenders would still be monitored by CYJ workers but only in relation to compliance.

8.4.6 The Commission is of the view that young people should not be required to participate in supervision sessions at the Moore Street office unless a more discrete entry and welcoming waiting area is made available. The Commission would also encourage CYJ to conduct more assertive outreach and to make use of other community facilities. Ultimately, the Commission agrees with Winkworth and White that regionally based multidisciplinary support teams would produce the best outcomes for young people and would recommend that such arrangements be further scoped.

**Recommendation 8.4:** The Community Services Directorate require that Community Youth Justice report against broad outcome based indicators (such as: achievement at school; ongoing participation in work or vocational education; minimising alcohol or other drug use) rather than focusing solely on recidivism as a measure of success.

**Recommendation 8.5:** The Community Services Directorate consider alternative arrangements, including the development of multidisciplinary teams, for the provision of case management services to young people supervised by Community Youth Justice.