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A Review of Case and Caseload Management Course Availability in Undergraduate Rehabilitation and Disability Studies Programs

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The evolving roles and functions of the undergraduate professional in the field of rehabilitation is dynamic, and requires serious consideration and further study within the literature. With the shift in graduate level education toward a greater emphasis on counseling skills, and in response to inadequate research in the area of undergraduate rehabilitation, and changes in the legislation (WIOA), the roles and functions of the professional prepared at the undergraduate level must be explored. Specifically, CORE-accredited and non-CORE accredited rehabilitation counseling and disability studies programs were examined to determine the presence or absence of coursework with an emphasis in the role of case and/or caseload management. Further, curriculum was reviewed to determine whether there was an availability of course offerings in the areas of either case or caseload management. The results indicated that more than half of the CORE-accredited undergraduate programs do not offer specific courses in the areas of case and caseload management, and other non-CORE accredited programs seemed to lack the presence of these specific courses in their overall course listing/availability. These results are discussed in the context of the importance of considering the inclusion of case and caseload management skills in undergraduate rehabilitation and disability studies programs, as well as addressing the practical applications and future research considerations arising from an approach to undergraduate education which includes management as a key element for success.

The evolving roles and functions of the undergraduate professional in the field of rehabilitation is dynamic, and requires serious consideration and further study within the literature. With the shift in graduate level education toward a greater emphasis on counseling skills, and in response to inadequate research in the area of undergraduate rehabilitation, and changes in the legislation (WIOA), the roles and functions of the professional prepared at the undergraduate level must be explored. Historically, undergraduate rehabilitation education began in 1957 in response to efforts made by vocational rehabilitation agencies to fill statewide personnel vacancies. Further efforts, by Penn State University, lead to the creation of the initial and provisional undergraduate program. Hylbert (1963) noted the original curriculum was developed to meet the increasing demands of personnel, however, through its strategic evolution and change, it has emerged as a path for undergraduates searching for entry level employment into the broad field of both private and public rehabilitation. This type of curriculum is seen to be advantageous for undergraduate students seeking specializations in many areas which fall within the context of rehabilitation and disability studies. However, it was not until 1973 when Syracuse University Institute on Undergraduate Rehabilitation Education held a meeting with many stakeholders in multiple professional arenas, to reflect on the curriculum guidelines that one critical element emerged in the area of management; specifically, case management (Stegar, 1974). The arrival of case management within the curriculum continued to support the debate by Patterson (1957) surrounding the need at all levels of rehabilitation (both graduate and now undergraduate) to consider the qualified professional as both counselor and coordinator (manager).

Counselor vs. Manager

Patterson (1957) noted the need to consider a concentration on the professional as a counselor and a coordinator. His "two hats" concept encouraged the development of both the rehabilitation counselor and rehabilitation coordinator, with the debate of the role-and-function issues being solved by distinguishing between separate job roles. However, this concept never came to fruition since the majority of professionals in the field perform both counselor and coordinator functions (Rubin & Roessler, 2008).

Whereas Patterson focused on dual roles of the professional, Whitehouse (1975) developed a view of role and function of rehabilitation counselors in which rehabilitation professionals are seen as service providers who embody a holistic approach in working with clients in the field. The professional must have "multiple behavioral competencies coupled with a comprehensive knowledge base" (Rubin & Roessler, 2008, p. 269). Overall, Whitehouse's approach viewed the professional as one whose skills included, guidance counselor, case manager, case coordinator, psychometrician, vocational evaluator, and clinician (Whitehouse, 1975). This theory stressed the importance of the professional being prepared at all levels in order to practice from a multifaceted integrated services approach.

Other published research place emphasis on work roles and functions at the undergraduate level, and many subsequent studies of rehabilitation professionals' roles and functions have been conducted (Beardsley & Rubin, 1988; Dunn, Grubbs, & Mulkey, 2006; Hershenson, 1990; Muthard & Salamone, 1969; Rubin, 1984; Zadny & James, 1977; Chapin, 2004; Herbert, Barrett, Evansen, & Jacob, 2010). Roessler and Rubin (1998, 2006), reviewed much of this research and developed a model of tasks divided into four broad professional areas all of which have importance when reflecting on issues directly related to management; case management, vocational assessment, counseling, and job development. This review further strengthened the argument for the need to understand the importance of skills necessary to carry out management functions at all levels of professional practice. The significance of the case management aspect of the professional's role is heavily supported by research (Frankel & Gelman, 2012; Rubin, 1984).

Perhaps, the most important influence that role and function studies have on the field of rehabilitation is the impact on education of professionals at all levels. Review of the literature suggests knowledge domains of high importance to experienced professionals manifest themselves in the areas of case management and coordination of services. These roles are of critical importance, and seem to dictate overall function for the professional. Herbert, Barrett, Evansen, and Jacob (2010), echoed this importance with a high ranking (between 2 and 10 out of a possible 100) of core management skills when focusing on the frequency and perceived importance of roles and functions when providing rehabilitation services. Thereby, supporting the enduring need of professionals at all education levels to receive specialized training in the area of management skills.

Case and Caseload Management Defined

In reviewing research, it would appear there is an argument that can be made for both counseling and management/coordination functions in the field of rehabilitation and disability studies (Grubbs, Cassell, & Mulkey, 2006). However, the percentage of time spent delivering counseling as opposed to coordinating functions has changed as caseload sizes and time spent in documentation functions continue to increase in both the public and private sectors. Further, legislative and political initiatives continue to focus on the services offered to consumers with most significant disabilities which often require more complex interventions in both areas of counseling and coordination. These high expectations of new professionals in the field of rehabilitation, when exposed to the realities of occupational demands, could cause many to eventually become disillusioned with their role. This situation can lead to professional burnout and ineffective practice (Lent, 2010; Maslach & Goldberg, 1998). Therefore, it would seem that at a time when there is a shift in roles and functions of the professional in rehabilitation, there is a pressing need to ensure critical management skills at the undergraduate level do not go untaught. These skills would include both case and caseload management. Case management referring to the collaborative process that assesses, plans, implements, coordinates, monitors, and evaluates the options and services required to meet the client's needs (Commission for Case Manager Certification, 2014). In contrast, caseload management refers to a systematic process of planning, organizing, coordinating, directing, and control for effective and efficient counselor and manager decision-making to enhance proactive practice (Cassell & Mulkey, 1985). Henke, Connolly, and Cox (1975) further indicate that caseload management refers to working with multiple cases and being able to prioritize so that all cases move forward toward closure. Grubbs, Cassell, and Mulkey (2006) add that caseload management involves not only the effective management of activities, but includes time increments within the ability to coordinate the comprehensive rehabilitation process. In particular, caseload management continues to be a critical skill given the demands of caseload sizes and declining resources of time, and fiscal resources". Further, the Council on Rehabilitation Education (CORE) (2011) accreditation requirements indicate the need for program graduates to demonstrate knowledge acquisition in curriculum related to the content area of

case management. However, outcomes reflect the activities that appear to be mostly related to case management rather than caseload management.

Case and Caseload Management in Undergraduate Curriculum

Rehabilitation and disability studies programs have a primary mission to prepare undergraduates to work with individuals with disabilities. Also, it appears that a critical element of undergraduate work must address an understanding of the aspects of the profession which will require new professionals to have knowledge and competency in the role of coordinator; logic dictates that these activities would be salient features of the curriculum. At the graduate level, researchers have explored rehabilitation counselor education curriculum, and they have found a strong emphasis on counseling skills, lesser emphasis on case management, and minimal emphasis on caseload management skills. However, there is inadequate research examining the impact of management roles and functions within undergraduate curriculum. Further, research on undergraduate education lacks consideration of the presence or absence of critical coordination skills demonstrated in the curriculum of programs currently accredited by CORE. The purpose of this study was to examine CORE-accredited and non-CORE accredited rehabilitation and disability studies programs to determine the presence or absence of coursework with an emphasis in the role of management. In addition, curricula were reviewed to determine the presence and frequency of case and/or caseload management coursework in undergraduate programs.

Method

Procedure

Online information from 80 non-CORE accredited institutions, and 10 CORE accredited undergraduate programs from across the United States and Puerto Rico were retrieved and examined using quantitative data analysis procedures. The information was originally retrieved from August 2013, and reviewed again for continuity in February 2015. It was presumed that the web page for each program would be used in recruiting, and therefore would provide accurate information concerning the overall curriculum. Sixty-five percent of these programs prepared undergraduate professionals only; and 33% of the programs contained both graduate and undergraduate programs specializing in an area related to rehabilitation and disability studies (predominantly Rehabilitation Counselor Education). Information was unavailable for 2% of the programs, based on unavailability of information, or lack of interest to be included in the study.

Each of the 90 programs was evaluated based on the presence or absence of coursework in the areas of case or caseload management. Each program was assigned corresponding procedural numbers by the researchers based on title, accreditation and intensity of the case or caseload course. For purposes of this research study the descriptors are defined as follows:

(1) Title, program title indicating final degree;

(2) Accreditation, program accredited by CORE or non-CORE;

(3) Intensity, indicating the amount of curriculum placed within the available syllabi in the specific program area of case/caseload management.

Each program was evaluated to determine whether there was a case and/or caseload course in the curricula, or if the information regarding this research topic was placed in multiple courses throughout the overall undergraduate rehabilitation and disability studies program. Fourteen of the non-CORE accredited, and five of the CORE accredited institutions maintained a case management course in rehabilitation and disability studies, two institutions a caseload management course, and five institutions had no information related to either a case or caseload management course in the curricula. For the remaining institutions, information was limited and placed in multiple courses throughout the overall program.

For purposes of description, the case and caseload management curricula were labeled Y (presence) and N (no presence). This question was a yes/no type response and was subjected to binomial tests regarding the case and/or caseload management course in the curricula. Chi-square analyses were conducted with correction adjustments made to control for Type I error.

Results

Case vs. Caseload Management

In this analysis, 14 non-CORE and 5 CORE accredited programs indicated Y (there was a presence of a case/caseload management course) (two-tailed, $p<.05$), whereas 59 non-CORE and 5 CORE accredited programs indicated N (there was no presence of any course related to case/caseload management or the course information was limited in other coursework) (two-tailed, $p<.05$). Results were non-significant when considering the presence or absence of a caseload course. However, there was significance found in the overall title and content of the management course (i.e., case or caseload management). Fourteen percent of the non-CORE accredited, and five percent of the CORE accredited institutions maintained a case management course in rehabilitation and disability studies, two percent contained a caseload management course within their core curricula. Overall, fifty-nine

percent of non-CORE and fifty-percent of CORE accredited programs examined did not contain specific courses devoted to either case nor caseload management courses within their core curriculum. These figures represent 24 out of the 90 rehabilitation and disabilities studies programs, meaning that over half had no specific course offering in either case or caseload management.

Chi-square Analysis

Three questions related to title, accreditation and intensity of the overall case or caseload management course and/or the program were subjected to a chi-square analysis. The first focused on the title of the degree offered by the rehabilitation and disability studies program, and the presence or absence of the case and/or caseload management course in the curricula. There were no statistically significant differences in the title of the degree offered and the presence of case/caseload management course. Regarding the accreditation of the rehabilitation and disability studies program, those accredited by CORE demonstrated statistical significance in relation to the presence and/or absence of a case and/or caseload management course $X^2(2, n=10)=9.62$, $p<0.05$. There were no statistically significant differences between the presence of a case and/or caseload management course and intensity of the overall curricula. Likewise, there were no difference between accreditation of the program and intensity of the course. Keeping in mind that half of all CORE-accredited programs, and eighteen percent of non-CORE accredited programs, demonstrated the presence of case and/or caseload management course, it can be concluded that the portion of rehabilitation and disability studies programs that obtain (or retain) CORE accreditation, seemed to have a greater likelihood for the presence of case or caseload management course offerings, than non-CORE accredited programs. Further, it can be concluded that academic institutions that do not have case and/or caseload management course in undergraduate programs may not be meeting the possible training needs of those individuals needing professional skills in this area of management. Therefore, many future professionals may be lacking this valuable training leading to success in multiple areas of rehabilitation both in public and private sectors.

Limitations of the Study

This study used a convenience sampling technique reviewing information available via the internet. No attempt was made to ascertain if the information was obsolete or incomplete. In addition, much information concerning case and/or caseload management may be infused in other courses or otherwise delivered to students via means that could not be detected by the sampling technique. Readers should take these matters into account when considering the reliability of the data collected.

Discussion and Conclusion

Research demonstrates that there is a large need to focus on the roles and functions of the professional prepared at the undergraduate level. Donnell, Reyes, Cogdill, and Porter's (2004) comment that basic skills may need to take precedent over teaching of specialty skills, may ring true in these results, as rehabilitation and disability studies programs, regardless of accreditation, need to emphasize the inclusion of management skills in undergraduate rehabilitation and disability studies programs.

Further, it is clear from the data that there is a larger focus in the area of case management than on overall management of the caseload. This prominence may be attributed to the importance placed on counseling skill development within the curriculum, and possible lack of skills with emphasis in the areas of management. Regardless of the explanation for the lack of emphasis, whether lack of organization skills related to management, increase in caseload size, greater service provision to individuals with most significant disabilities, or declining resources, there are needs for greater managerial skills to be integrated into undergraduate curriculum to support the growth of new professionals in the field.

When considering the needs of undergraduates and essential skills development, it does appear that there is a positive correlation between those undergraduate programs accredited by CORE in relation to the presence and/or absence of a case/caseload management course. It could be that the emphasis on accreditation may dictate the need to teach management skills, and the accreditation process overall could lead to courses focusing on skills in the areas of case/caseload management becoming more prevalent in curriculum. Therefore, this study might suggest it may be likely that those who hold CORE-accredited undergraduate level degrees would have acquired education and training with emphasis in case and/or caseload management. However, it is important to note that this research does not consider content-based aspects of the courses through an extensive review of syllabi or other means. Therefore, the specific skills taught in those existing courses that were examined are not distinguishable. While preparation of students for careers in rehabilitation and disability studies is available at some institutions, availability is not universal. The overreaching question of whether the standard undergraduate CORE accredited curriculum is sufficient to prepare students for such careers remains unanswered.

Perhaps one of the most significant issues facing rehabilitation and disability studies programs at present is the corporate affiliation of CORE and the Commis-

sion on Accreditation of Counseling Related Education Programs (CACREP). This affiliation brings to the forefront an aged-old debate surrounding the counselor and/or manager. Many who have favored this affiliation insist that, without identification as counselors, the field of rehabilitation will grow to be devalued or non-existent. However, others who advocate that counseling is only one of the many skills that are used by a competent professional seem to be advocating for the management/coordinator role. The counselor-coordinator debate is not one that is likely to be settled by this affiliation between two entities or by this article. However, it is clear that regardless of affiliation, undergraduate programs lacking critical inclusion of both counseling and management/coordination skills, with an emphasis in the areas of case/caseload management, could be less effective in preparing new professionals to be successful in the field of rehabilitation and disability studies.

Finally, current undergraduate accreditation criteria are vague concerning the area of caseload management. As mentioned previous, although case and caseload management are mentioned, many outcomes in research are based solely in relation to case management, rather than caseload management. This is crucial as the needs of undergraduates dictate the need for both case and caseload management experience in order to balance the coordinator/manager role within the context of professional practice. Therefore, it is suggested that undergraduate programs consider the infusion of not only case coordination skills, but also caseload management into curricula.

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