**Student Assistance Program (SAP) Case Manager/Coordinator Checklist**

**Student Background Information (do not need to add below if easily available in electronic management system):**

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Caregiver Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Caregiver Contact Info\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Case Manager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Case Manager Tasks After a Referral is Received:**

|  |  |  |  |
| --- | --- | --- | --- |
| ✔ | **N/A** | **Actions Taken** | **Date of Completion** |
| [ ]  | [ ]  | Reviewed the initial referral with Student Assistance Team (SAT) and discussed if the SAP process should proceed (e.g., does there appear to be a barrier to learning?) or if Tier 1 supports or a different referral is more appropriate |  |
| [ ]  | [ ]  | Contacted & spoke with caregiver; caregiver information or data collection form sent home |  |
| [ ]  | [ ]  | Caregiver consent obtained for SAP process* Attempts made: \_\_\_\_\_\_
* Date of Attempts: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_
 |  |
| [ ]  | [ ]  | Caregiver interview completed or questionnaire collected |  |
| [ ]  | [ ]  | Contacted & met with student (if caregiver consent for SAP process is received) for student input on strengths, needs or concerns, areas they would like to improve, perceptions about school, and their support system. Adapt interaction based on student developmental level |  |
| [ ]  | [ ]  | Requested teacher(s) complete observation form, behavior checklist, and/or [other documentation] |  |
| [ ]  | [ ]  | Collected screening for services data (if caregiver consent is obtained) |  |
| [ ]  | [ ]  | Gathered and summarized staff and existing data (e.g., attendance, discipline data, grades and academic achievement data, interventions attempted, and progress) |  |
| [ ]  | [ ]  | Reviewed referral with SAT during SAP case management meeting, determine if can briefly match to supports or if further problem solving is needed |  |
| [ ]  | [ ]  | Reviewed referral with nurse; consulted with nurse and reviewed medical records and nurse data |  |
| [ ]  | [ ]  | Reviewed referral with counselor; consulted with counselor and reviewed counselor data  |  |
| [ ]  | [ ]  | Reviewed referral with administrator; consulted with administrator |  |
| [ ]  | [ ]  | Invite caregiver and student (when appropriate) to student support meeting |  |
| [ ]  | [ ]  | SAT student support meeting held to analyze the concern and develop a plan |  |
| [ ]  | [ ]  | Intervention plan developed |  |
| [ ]  | [ ]  | Intervention plan implemented |  |
| [ ]  | [ ]  | Caregiver consent obtained if student is receiving school-based services |  |
| [ ]  | [ ]  | Action plan reviewed/revised during SAP case management meeting |  |
| [ ]  | [ ]  | Release of information form collected (if appropriate and student receiving non-school based supports) |  |
| [ ]  | [ ]  | Date of SAT review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Outcome of meeting: \_\_\_\_\_\_\_\_\_\_\_ |  |
| [ ]  | [ ]  | Date of 2nd SAT review (if needed): \_\_\_\_\_\_\_\_\_\_\_\_ |  |

**Case Manager Notes:**

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**Note:** While this document is being provided as a tool to help the school/district create a Student Assistance Program, it is not intended to serve as legal advice. Districts and schools can adapt the checklist to align with their policies, procedures, and legal/ethical guidance.

**Resource Adapted From:**

[Prevention First](https://www.prevention.org/Resources/7ed3c2e9-e539-4aa3-8327-bf9a1d03c6eb/StudentAssistanceForms-PreventionFirst.pdf) (p. 20)

Michigan Department of Education Sample Forms for Mental Health Referral

[Saint Paul SAT Process Checklist](https://www.spps.org/cms/lib/MN01910242/Centricity/Domain/10227/sat_checklist.pdf)

[Pennsylvania Network for Student Assistance Services (PNSAS)](https://pnsas.org/): [Case Manager Checklist](https://pnsas.org/Portals/0/About%20SAP/PA%20Approved%20SAP%20Training%20Provider/J-samplecasemanagerchecklist.doc)

[Maryland DoE](https://mpia.hcpss.org/sites/default/files/2018-03/SAP%20Binder.pdf) (p. 13-14)

[Allegheny Intermediate Unit](https://www.aiu3.net/cms/lib/PA49000033/Centricity/Domain/21/K-12%20SAP%20Case%20Manager%20Checklist.pdf)