HPSNZ GUIDANCE FOR SPORTS: DEVELOPING YOUR CASE MANAGEMENT PROCESS CHECKLIST

HIGH PERFORMANCE SPORT NEW ZEALAND

This downloadable checklist is interactive and designed to be used in conjunction with the **HPSNZ guidance for sports: Developing your case management process** resource. The purpose of the checklist is to enhance the consistency and effectiveness of your case management processes, in order to help support TAPS athletes' health, wellbeing and performance as part of coordinated, athlete-centred planning and delivery with an interdisciplinary team (IDT).[1]

The following items should each be addressed to systematically promote effective case management:

- [ ] **Clarify the question** – i.e., what are we trying to solve?
- [ ] **Clarify information that is known** – e.g., observations, self-reporting, available data/metrics
- [ ] **Establish/clarify boundaries of athlete consent** – for whom have permissions/access been granted?[2]
- **Clarify the team** – this would normally include:
  - [ ] **IDT Lead** (owns the case management process and has sufficient context and knowledge to drive the process, coordinate follow up care, maintain records, and facilitate and confirm decision-making)
  - [ ] **IDT Core members**[3] (subject matter experts and those providing direct service support) – consider:
    - [ ] Who is currently available within your sport to provide support?
    - [ ] What technical skills are required beyond those available in-house?
    - [ ] Who are the external providers you can reach out to for support?
    - [ ] Are ALL relevant providers/stakeholders adequately included in decision-making?
  - [ ] **IDT Informed** (those who need to be aware of certain information but not engaged in decision-making)
- [ ] **Consider how to best include athletes and whānau throughout the process**
- [ ] **Create a RACI IDT chart/table using the above information** – i.e., Who will be doing What, and When in terms of Responsible, Accountable, Consulted and Informed (RACI) roles[4]
- [ ] **Ensure your established escalation mechanisms are enacted** (e.g., in cases of disagreement or lack of alignment related to decision-making for athlete care, selection implications, athlete agreement questions)[3]
- [ ] **Agree frequency of reviews of the plan** – input calendar reminders if helpful
- [ ] **Evaluate the case management effectiveness** – this might be done in multiple stages in 1:1 and/or group formats, and it might be led by the IDT Lead, designee or an outside facilitator, to ensure that discussions and actions reflect health, wellbeing and performance progression throughout case management
- [ ] **Implement lessons learned** – feed forward what went well and what to change to systematically improve the case management process as a whole

1 Interdisciplinary teams (IDTs) might also be known as multidisciplinary teams (MDTs), tight teams, etc.

2 Information about TAPS athletes should only be used and shared in accordance with the Athlete Privacy Statement. This means information should only be shared on a "need to know" basis, and athlete consent is usually required prior to sharing "Clinical Information" as defined in the Statement outside of the health team, except for in limited circumstances (e.g., health and safety, serious risk of harm). When crises emerge, these should be managed via sports' critical incident communication plans.

3 The IDT Core typically comprises those who are Responsible for directly delivering service support in terms of the Responsible, Accountable, Consulted and Informed (RACI) model.

4 If Artificial Intelligence (AI) is used at any point in developing athlete case management plans, it may be used only in accordance with organisational policy and approved tools. Any AI-generated content must be reviewed, verified and approved by a human practitioner before being relied upon or incorporated into a case management plan. Sensitive athlete information, including health information, should not be entered into unapproved AI tools.