

# **Guide to Interdisciplinary Meetings**

# Family Team Meetings are denoted by:

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### **Terminology**

CAC - Children's Advocacy Center

**CASA** – Court-Appointed Special Advocate

**CPAC** – Child Protection Accountability Commission

**DAG** – Deputy Attorney General

**DDDS** – Division of Developmental Disabilities Services

**DFS** – Division of Family Services

**DHSS** – Department of Health and Social Services

**DOC** – Department of Corrections

**DOJ** – Department of Justice

**DPBHS** – Division of Prevention and Behavioral Health Services

**DPH** – Division of Public Health

**DSAMH** – Division of Substance Abuse and Mental Health

**DVCC** – Domestic Violence Coordinating Council

**DYRS** - Division of Youth Rehabilitative Services

IC – Investigation Coordinator

**LE** – Law Enforcement

MDT - Multi-Disciplinary Team

ME - Medical Examiner

**MOU** - Memorandum of Understanding

**OCA** – Office of the Child Advocate

### **Division of Family Services (DFS)**



### **Best Interest Meeting (BIM)**

<u>Purpose</u>: To determine school placement for children in foster care. This meeting is a collaboration between DFS and Local Education Agency (LEA) to ensure educational stability of children in foster care.

<u>Referral Process:</u> A BIM is held within 5 days of a child entering DFS custody, changing placement, or exiting from DFS custody and yearly if there are no changes. A BIM is initiated by the DFS worker notifying the LEA District Liaison of the need to schedule this meeting. Additional information can be found here.

Facilitator: School of Origin Liaison

#### Participants:

- Professionals: DFS, School Liaisons from the District of Residence and the District of Origin. Other professionals may also be invited (ex. Child Attorney).
- Family: Caregivers should be invited (both foster parents and biological parents if appropriate).
- > Youth: Yes, when appropriate.



#### **Child Plan/Review**

<u>Purpose:</u> To collaborate with members of the child's team and provide information about the child's needs and the plan for meeting those needs.

<u>Referral Process:</u> A 5 Day Plan is completed within 5 days of a child's entry into a placement. A Child Plan is completed within 30 days of the placement and a Child Plan Review is completed within 6 months of the placement. If there are no changes in the placement, the Child Plan and Review alternate every 6 months or sooner. These events are worklisted through FOCUS based on the date a child enters a placement.

Facilitator: DFS Worker

#### Participants:

- > Professionals: DFS Worker and any other professionals involved with the child.
- > Family: Caregivers should be invited (both foster parents and biological parents if appropriate).
- Youth: Yes, when appropriate. For youth 14 and older, the plan MUST be developed in consultation with the youth and the youth can choose two support people to participate in these meetings as well.



### **Exit Conference and Planning**

<u>Purpose:</u> To review progress related to the STEPS plan and make adjustments as necessary to assist the youth in meeting their basic needs upon exiting from foster care. \*See page 5 for additional information on STEPS.

<u>Referral Process:</u> These meetings are held 90 days prior to a youth in foster care turning 18. The DFS worker is responsible for scheduling this meeting.

Facilitator: DFS Worker

- Professionals: DFS Worker, Independent Living Worker, CASA / Child Attorney.
- Family/Caregivers.
- Youth.



### Family Team Meeting (FTM)

<u>Purpose:</u> To engage youth and their family in the initial and ongoing assessment and planning process. These meetings help bring together the family and youth's natural supports.

<u>Referral Process:</u> FTMs are held throughout a family's involvement with the division and include discussions around assessment, crisis, planning, closure, etc. FTMs should be an ongoing process, not just one meeting, so there is no specific referral process.

Facilitator: DFS Caseworker or Supervisor

#### Participants:

- Professionals: DFS worker and any professionals involved with the youth or family.
- Family/Caregivers/Natural Supports.
- Youth: Yes, when appropriate.



#### **Icebreakers**

<u>Purpose</u>: A collaboration between a child's birth parents/caregivers and the foster parent(s) to provide the foster parent(s) with information about the child.

<u>Referral Process:</u> Icebreakers are held after a child has entered placement. The Foster Care Coordinator schedules these meetings.

Facilitator: Foster Care Coordinator or Private Agency Foster Care Contractor

#### Participants:

- Professionals: DFS
- Family: Biological and foster parents.
- Youth: Yes, when appropriate.

### **Permanency Planning Committee (PPC)**

<u>Purpose</u>: Provides guidance and case direction related to child permanency options while considering the child's best interests. The PPC also reviews and selects adoptive resources and permanent guardians.

<u>Referral Process:</u> Referrals to PPC are initiated when any circumstances exist where a goal change is needed and appropriate, when a child has not been reunited with their family within 10 months of entering foster care, or when a child has been in foster care for a total of 10 out of 15 months. Referrals are made by the DFS caseworker completing a Permanency or Permanency Resource Review in FOCUS.

<u>Participants:</u> DFS (caseworker, supervisor, assistant regional administrator, regional administrator, program manager, foster care supervisor), DPBHS, DYRS, DAG, others may be invited.

### **Permanency Roundtables (PRT)**

<u>Purpose</u>: To develop an aggressive, innovative, permanency action plan for a child or sibling group.

<u>Referral Process:</u> Referrals are initiated when youth and the team involved are having a difficult time identifying connections and resources for the youth. Referrals are made by the DFS worker going to the U:DFS:PermanencyRoundtableSchedule to sign up.

<u>Participants:</u> DFS (caseworker, supervisor), PRT Facilitator, Permanency Consultant, Master Practitioner, Scribe, Child Attorney, CASA.



### **Stairways To Encourage Personal Success (STEPS)**

<u>Purpose:</u> To develop a plan for youth who are transitioning out of foster care. These meetings are youth centered and involve the youth developing goals for themselves which the support team will help them to achieve.

<u>Referral Process:</u> STEPS meetings are held within 30 days of youth in foster care turning 17. Meetings are initiated by a DFS worker reaching out to the STEPS Facilitator to schedule.

Facilitator: STEPS Facilitator

#### Participants:

- Professionals: DFS Caseworker, Independent Living worker, CASA / Child Attorney.
- Caregiver(s)/Natural Supports.
- > Youth.



### **Team Decision Making (TDM)**

<u>Purpose:</u> To discuss with the family the primary safety concerns that warrant consideration of out of home placement and attempt to mitigate risk factors and implement safety measures to prevent removal.

<u>Referral Process:</u> TDM meetings are held anytime DFS considers taking a child into custody as a result of safety concerns. Meetings are initiated by a DFS worker completing a TDM referral in the case in FOCUS.

Facilitator: TDM Facilitator

#### Participants:

- ➤ Professionals: DFS Caseworker and supervisor, other professionals involved with the family.
- Family/Caregivers/Natural Supports.
- > Youth: Yes, when appropriate. Otherwise, the child's voice should be brought to the table.

# Division of Prevention and Behavioral Health Services (DPBHS)



### **Assessment for Residential Treatment (ART)**

<u>Purpose</u>: To review any request for residential psychiatric treatment to determine if clinical necessity is met for this level of care. The committee meets weekly if there are requests for residential treatment.

<u>Referral Process</u>: Referrals to ART are prepared and submitted by Child and Family Care Coordination (CFCC) team leaders at the request of families and their CFCC care coordinator or other treatment team members, such as DFS, DYRS, or Family Court.

- Professionals: DPBHS CFCC team leader and care coordinator, DFS (if applicable), DYRS (if applicable), CASA, GAL, current treatment providers and others who have knowledge of the youth's functioning that is relevant to the determination of clinical necessity at the time of the review.
- Family/Caregivers/Natural Supports.
- Youth: Yes, when appropriate.



### **Child and Family Team Meeting (CFTM)**

<u>Purpose</u>: To develop, monitor, and adjust a youth's individualized plan of care with the goal of improving the resiliency and well-being of the youth and strengthening the family. These meetings are solution-focused and are held, at a minimum, every 120 days for youth and families receiving care coordination, to review the plan of care.

<u>Referral Process:</u> No referral is needed, though a family or member of the treatment team can request a CFTM sooner than the 120 day review when circumstances arise that require a discussion of the plan of care. The DPBHS Child and Family Care Coordination (CFCC) care coordinator is responsible for scheduling these meetings.

Facilitator: DPBHS CFCC care coordinator

#### Participants:

- Professionals: DPBHS CFCC care coordinator, DFS (if applicable), DYRS (if applicable), CASA, GAL, current providers, school representatives, and any professionals involved with or invested in the youth and family.
- > Family/Caregivers/Natural Supports.
- > Youth.

### **Clinical Review Meeting**

<u>Purpose</u>: Review of clinical, medical, and educational information on each youth receiving programming at Silver Lake and Terry Center. All youth are reviewed at least one time per month.

<u>Referral Process:</u> The Clinical Director or Supervisor creates a schedule for when each youth will be presented. At Silver Lake this meeting is weekly. At Terry Center it is a minimum of twice monthly.

Facilitator: Clinical Director, Program Director or designee

#### Participants:

Professionals: nurses, psychiatry, therapists, DPBHS milieu supervisors and staff, and education.

## **Division of Youth Rehabilitative Services (DYRS)**



### **Aftercare Planning**

<u>Purpose:</u> To review and discuss the discharge plan for a youth once released to a community setting from a residential program.

<u>Referral Process:</u> This meeting is scheduled 3-4 weeks prior to the youth's discharge from the program. The assigned DYRS Family Crisis Therapist and Treatment Specialist are responsible for coordinating.

Facilitator: DYRS Family Crisis Therapist / DYRS Probation Officer

- ➤ Professionals: DYRS Probation Officer, Superintendent, Assistant Superintendent, Program Manager, Treatment Specialist Supervisor, Treatment Specialist, Family Crisis Therapist, Education, Medical, DPBHS worker (if applicable), DFS worker (if applicable), Youth Advocacy Program (YAP) worker (if applicable).
- Family/Caregivers: Yes, if available.
- Youth: Yes, if available.



#### **Case Plan Review**

Purpose: To review the Case Plan and make updates as needed.

Referral Process: Case Plan Reviews occur every 4 months and are scheduled by the DYRS Probation Officer.

Facilitator: DYRS Probation Officer

#### Participants:

Professionals: DYRS Probation Officer.

- Family/Caregivers/Natural Supports.
- > Youth.

#### **Detained Youth Call**

<u>Purpose:</u> To conduct a review of all youth who are detained in state at New Castle County Detention Center, Stevenson House Detention Center, Residential Alternative to Detention, and Cottages.

<u>Referral Process:</u> This is a re-occurring review scheduled once a month on Thursdays.

<u>Participants:</u> DYRS (director, superintendents, chief, regional managers, pre-trial supervisor, other necessary staff).



### **Intake Meeting**

Purpose: The initial meeting with a youth and family.

<u>Referral Process:</u> The Intake Meeting occurs within the first 7 days of case assignment and is initiated by the DYRS Probation Officer.

Facilitator: DYRS Probation Officer

#### Participants:

- Professionals: DYRS Probation Officer and possibly supervisor.
- Family/Caregivers/Natural Supports.
- Youth.



### **Placement Authorization Committee (PAC)**

<u>Purpose</u>: To review and make a determination on placement requests that DYRS staff make for youth involved with the division who are being considered for residential placement.

<u>Referral Process:</u> PAC is scheduled every Tuesday with the possibility for an off-cycle PAC meeting to be scheduled as needed in an emergency. The DYRS Probation Officer is responsible for completing the PAC referral in FOCUS.

Facilitator: PAC Chairperson

- ➤ Professionals: DYRS Probation Officer and possibly supervisor, 2 DYRS Regional Managers, Secure Care Representatives, Education Unit Representatives, Licensed Behavioral Health Professional.
- Family/Caregivers: Yes, if available.
- > Youth: Yes, if available.



### **Residential Intake Meeting**

<u>Purpose:</u> For members assigned to the youth's case to introduce themselves and explain their roles. During this meeting, the Treatment Specialist will provide a description of the program and explain the Cognitive Behavioral Therapy model.

Referral Process: Residential Intake Meetings occur shortly after the youth is placed in a DYRS facility.

Facilitator: Treatment Specialist

#### Participants:

- Professionals: DYRS Treatment Specialist and Treatment Specialist Supervisor, Program Manager, Family Crisis Therapist and Family Crisis Therapist Supervisor, Psychologist, Probation Officer and any other assigned worker.
- > Family/Caregivers.
- > Youth.



#### **Treatment Team**

Purpose: To review and discuss the progress a youth is making while in a residential placement.

<u>Referral Process:</u> This meeting is held every 30 days and is scheduled by the assigned DYRS Treatment Specialist.

Facilitator: Psychologist

#### Participants:

- Professionals: DYRS Probation Officer, Superintendent, Assistant Superintendent, Program Manager, Treatment Specialist Supervisor, Treatment Specialist, Family Crisis Therapist, Education, Medical, DPBHS worker (if applicable), DFS worker (if applicable).
- Family/Caregivers: Yes, if available.
- > Youth: Yes, if available.

### **Departmentwide**

### **Department Safety Council (DSC)**

<u>Purpose:</u> Reviews the department's response to critical incidents as defined by Policy 211 to determine if systems issues contributed to the incident's occurrence.

<u>Referral Process:</u> These meetings are held the second Thursday of the month and are initiated by a reportable event being entered into FOCUS that meets criteria for a critical incident.

Participants: DFS (2 representatives), DYRS (2 representatives), DPBHS (2 representatives), DMSS.



### **Dual Status Youth (DSY)**

<u>Purpose:</u> To provide expedited planning for youth who are identified as dual status with the intention of providing services at the earliest possible intervention point to reduce further penetration into the juvenile justice and child welfare systems.

<u>Referral Process:</u> DSY meetings are held within 10 days of receiving notification that a youth in DFS custody has received a new arrest/charges. This notification is sent out to all active division workers and the meeting is scheduled by the DSY facilitator.

Facilitator: DSY Facilitator

#### Participants:

- Professionals: Representatives from each involved division and any other professionals involved with the youth.
- Family/Caregivers/Natural Supports.
- Youth.



### Family Informed Resource Support Team (FIRST)

<u>Purpose:</u> To identify resources in the community that may be available to support a youth to remain in or return to a community setting. An initial intake meeting is completed with the family within 10 days of a referral being made and a FIRST meeting is scheduled within 10 days of the intake being completed.

<u>Referral Process:</u> Per Policy 209, when barriers are identified for youth which could prevent them from returning home from a placement, the division responsible for the placement will make a referral to FIRST to assist with identifying solutions to known barriers and support the family in developing a discharge plan in an effort to prevent a DFS dependency referral. Any division worker can submit a DMSS FIRST Referral through their case in FOCUS. FIRST also accepts system-generated referrals which are automatically generated for youth open with more than 1 division.

Facilitator: Community Resource Specialist / FIRST Facilitator

#### Participants:

- Professionals: Representatives from each involved division and any other professionals involved with the youth.
- > Family/Caregivers/Natural Supports.
- > Youth.

### Multi-Disciplinary Team (MDT)

Purpose: Coordinates a response to child abuse and improves the quality of services.

<u>Referral process</u>: Referrals are received when there is a serious injury to a child, allegation of sexual abuse of a child, child death, or trafficking.

Participants: DFS, DPBHS, DYRS, DOJ, CAC, LE, IC, ME, Medical Providers.

### **External**

### **Child Abuse and Neglect (CAN) Panel**

<u>Purpose:</u> Reviews all child death and near-death cases that were the result of child abuse or neglect within 6 months of the incident. The panel also evaluates how well the MDT process followed the established MOU.

Participants: DFS, DOJ, OCA, LE, CAC, Nemours, ME, IC, Other Involved Hospital Providers, MDT Members

### **Child Death Review Commission (CDRC)**

<u>Purpose:</u> Conducts three types of fatality reviews, Child Death Review and Sudden Death in the Young (CDR/SDY), Fetal and Infant Mortality Review (FIMR), and Maternal Mortality Review (MMR). These reviews focus on maternal-child health for all children under the age of 18 and still births occurring after at least 20

weeks of gestation. The findings of these reviews are used to take preventative action and improve the health and safety of children.

<u>Participants:</u> DSCYF, DHSS, DPH, OCA, CPAC, Chief Judge of Family Court, Attorney General, Secretary of Education, ME, Medical Society, Delaware Nurses Association, National Association of Social Workers, State Police.

### **Fatal Incident Review Team (FIRT)**

<u>Purpose</u>: Conducts reviews focused on identifying trends, patterns, and obstacles in services, assesses agency interventions, and develops practical recommendations aimed at improving the system and preventing future injury and death.

<u>Participants:</u> DSCYF, DSAMH, DVCC, President Judge of Superior Court, Chief Judge of Family Court, Chief Magistrate of the Justice of the Peace Courts, Attorney General, Chief Defender, DOC, State Police, Licensed Healthcare Professionals, Treatment Providers.



### **Interagency Collaborative Team (ICT)**

<u>Purpose:</u> To provide a collaborative, interagency approach to service delivery for children and youth with disabilities who present with unique educational needs that cannot be addressed through the existing resources of a single agency or the regularly offered free, appropriate, public education programs (FAPE) in the state. In addition to planning for individual children, the ICT identifies impediments to collaborative service delivery and engages with partner agencies to recommend strategies to remove them.

<u>Referral Process:</u> The child's school district makes the referral to ICT after the school has determined they do not have the services and supports necessary to provide FAPE and the child needs more support. ICT meetings are held monthly during the school year and twice a month during the summer to review applications.

Facilitator: DOE ICT Coordinator

#### Participants:

- Professionals: DOE, DPBHS, DFS, DYRS, DDDS, DSAMH and possibly Finance or the Controller General's Office
- Family/Caregivers.
- > Youth.



### **Individualized Education Program (IEP/504)**

<u>Purpose:</u> To outline the learning goals for a student with a disability and determine the services a school must provide to the student in order to meet their goals.

<u>Referral Process:</u> Once a student is identified with a disability, an IEP/504 meeting is initiated by the school district and review meetings are to be held yearly at minimum. IEP/504 review meetings can also be requested and scheduled anytime by the parent or educational surrogate parent.

Facilitator: Local Education Agency

- Professionals: Representatives from each involved division, General Education Teacher, Special Education Teacher, Specialists, School District Representatives.
- Family/Caregivers.
- Youth.

### **Juvenile Trafficking Oversight Team (JTOT)**

<u>Purpose:</u> Reviews all juvenile trafficking cases open with the MDT to ensure timely and appropriate response on an immediate and ongoing bases. Referrals are received through IC's database.

<u>Participants:</u> DFS, DOJ, LE, IC, Nemours, Other Community Partners as required.