

MULTIDISCIPLINARY TEAM

Training for HFWA Providers Working in
Wyoming's Juvenile Courts

Version 1

Module # 5



**CHILDREN'S
JUSTICE PROJECT**
A Project of the Wyoming Supreme Court



Wyoming
Department
of Health

Multidisciplinary Team

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MULTIDISCIPLINARY TEAM (MDT)

MDTs are required by statute in dependency/neglect, Child in Need of Supervision (CHINS), and delinquency cases and must be appointed within ten (10) days of the filing of a petition. Pursuant to the statutes, MDTs shall review the child's personal and family history; school, health, and Department of Family Services (DFS) records; and any other pertinent information, for the purpose of making written recommendations to the juvenile court.

The formation of an MDT is intended to ensure that all the circumstances impacting the child and family, especially those related to the potential strengths and needs, are fully identified and considered in formulating recommendations.

MDTs are confidential. Confidential information can only be used for purposes related to making recommendations for appropriate family service planning and sanctioning of a child or family. This generally includes information relevant to the treatment needs of a specific child or family member as well as information relevant to determining a child's placement, educational needs, and service needs. The members of the MDT may not use or share the information outside of the MDT process unless there is separate authority for gaining access to and using the information.

APPROPRIATE TEAM MEMBERS

MDTs are comprised of mandatory and non-mandatory members. MDTs must have the following individuals:

- Child's parent(s) or guardian(s);
- Representative of the school district and if child is on Individualized Education Program (IEP), must be member of IEP team;
- Representative of DFS;
- Child's psychiatrist, psychologist or mental health professional;
- District attorney/ county attorney or designee;
- Child's attorney and/or guardian *ad litem* (GAL);
- Court Appointed Special Advocate (CASA), if one; and,
- Foster parent.

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MDTs may include the following, if appointed by the Court:

- The child;
- A relative;
- If the predisposition study indicates a parent or child has special needs, an appropriate representative of the Department of Health's Behavioral Health Division who has knowledge of the pertinent services available in the state's system of care; and,
- Other professionals or persons who have particular knowledge relating to the child or his family, or expertise in children's services and the child's or parent's specific disability or special needs, including linguistic and cultural needs.

High Fidelity Wraparound (HFWA) providers fit under the last bullet.

ROLES AND RESPONSIBILITIES

The court oversees the MDT process, but relies on the MDT to advise it when making determinations for services, supports, and sanctions.

Role and Responsibilities of Mandatory Members

The following is a summary of mandatory MDT member roles:

- Parents serve as an advocate for themselves and/or their child.
- School representative informs the team of educational needs and concerns of the child and coordinates education services and transition.
- DFS caseworker provides the history of the case, the current status, and other relevant information regarding services and supports.
- DFS probation officer supports the safety of the community, works with the delinquent, and advises MDT members on best practice.
- Mental health providers inform the MDT of identified and psychological and systemic concerns.
- Prosecutor represents the State of Wyoming's interest in the legal process.
- GAL represents the child's best interest and their wishes, in a hybrid mode. Their primary role is to identify and advocate best interest.
- CASA's role may vary depending on the court, but CASAs generally advocate for the best interest of the child.
- Foster parent or caretaker make well-informed recommendations and should be allowed to give input on major decisions.

Role and Responsibilities of Other Appointed Members and Invited Attendees

The following is a summary of non-mandatory MDT member roles:

- Advocacy and Support Organizations (including HFWA providers) include both direct and system advocates. Direct advocates are invited by the family to advocate, support, or help navigate while system advocates assist in identifying daily issues.
- Attorney General represents DFS.
- Child/youth should be given the opportunity to explain their situation and progress, if the child is age appropriate and mentally capable.
- Child's attorney in CHINS and delinquency cases advocates for the child's wishes.
- Parent's attorney advocates for their client.
- Physician provides specific information about a child's health for consideration in placement and treatment.
- Substance abuse treatment provider presents an assessment of the youth's need for this type of treatment.

COURT PROCESS

MDTs are crucial throughout the court process. MDT's are appointed at either the shelter care or initial hearing and make recommendations before the dispositional hearing, the review hearings, and the permanency hearing.

Shelter Care/Detention Hearing

The shelter care hearing must be held within forty-eight (48) hours of a youth entering Temporary Protective Custody (TPC). Recall, when a child is taken into TPC or detained by law enforcement, a petition must be filed with the court. The MDT must be appointed within ten (10) days of the filing of the petition. When possible, immediate appointment of an MDT at this stage is encouraged.

Initial Hearing

If the child was not placed in shelter care or detention, the initial hearing is the first hearing held after the petition is filed. Also, if the child was removed or detained but the full requirements of the initial hearing were not met at the shelter care/detention hearing, an initial hearing must be held. The MDT is appointed at this hearing if it was not appointed at the shelter care/detention hearing.

Adjudicatory Hearing

The MDT is not involved in this hearing except to provide recommendation for the immediate detention and/or care and treatment of the youth or family pending formal adjudication and disposition by the court.

Dispositional Hearing

The dispositional hearing decides question such as the child's current living situation, who has legal custody, and what services the child or family needs. The court must receive the predisposition report, prepared by DFS, and consider MDT recommendations prior to entering a disposition. The hearing may not be held without the appointment and subsequent receipt of recommendations from the MDT.

PROCESS AND PROCEDURE

MDTs must meet at least quarterly for a child that is placed outside the home, and it is recommended MDTs meet quarterly for children who remain in the home. After a petition is filed and the MDT is appointed, DFS or the prosecutor refers the matter to the MDT coordinator to schedule the first MDT meeting. MDTs are provided with the predisposition report prepared by DFS; the DFS Family Service Plan (if applicable); independent living/transition plan (if applicable); documentation for recommendations involving out-of-home placement, (for example, if a diligent search for kin has been conducted and kin is available for placement, the worker should recommend the placement with the kin if that is in the best interest of the child.

IDENTIFICATION AND ASSESSMENT OF FAMILY'S STRENGTHS AND NEEDS

A DFS utilizes a family-centered approach to identify strengths and needs and it may work with a Family Partnership to gather the necessary information. Family Partnership is a method of working with children and families across multiple systems and it is comprised of support people identified by the family. The Family Partnership develops the Family Service Plan, which can provide the MDT with much of the necessary information to make a recommendation to the court.

DFS also utilizes a family-centered assessment approach that includes a series of assessments and screenings at various stages of intake to pinpoint specific areas of need. Common areas of screening, evaluation, or assessment include:

- Physical health;
- Mental health;
- Substance abuse;

- Domestic violence or family violence;
- Disabilities;
- Sexual predator;
- Sexual abuse; and
- Emotional or physical abuse.

MDT RECOMMENDATIONS

In formulating recommendations to the court, the MDT must give consideration to the best interest of the child; the best interest of the family; the most appropriate and least restrictive case planning options; and cost of care. Recommendation for treatment or rehabilitation should be made or supported by qualified individuals. MDT members should represent their particular profession and make recommendations consistent with their education, training, or certification. Recommendations must address and balance three main areas: family relations (permanency); treatment needs; and education.

MDT REPORT

MDT reports must be filed with the court five (5) days prior to the court hearing. The report shall contain the following key information:

- Case requirements and placement;
- Specific and measurable goals or recommendations;
- Members;
- Background information;
- Summary of MDT meetings;
- Description of safety issues and reason for court involvement;
- Home or placement information;
- Education and school information;
- Mental health, substance abuse, and/or health care oversight plan updates;
- Visitation plans;
- MDT recommendations; and,
- A list of agreed upon assigned tasks, due date, and next MDT meeting.