National Children's Advocacy Center

MDT Functioning and Case Review: Part 2

Regular case review, a *National Children's Alliance* standard (NCA, 2017) for accredited Children's Advocacy Centers (CACs), is a formal process by which knowledge, experience and expertise of Multidisciplinary Team (MDT) members is shared and discussed, and informed decisions made, where collaborative efforts are fostered, formal and informal communications are promoted, mutual support is provided, and protocols/procedures are reviewed. "The [case review] process encourages mutual accountability and helps to ensure that children's needs are met sensitively, effectively and in a timely manner" (p. 41).

According to Kenty (2006) and Campbell (2009), regular case review provides an opportunity for multidisciplinary team members to come together to share case information, to contribute their own unique expertise to each child's case, to train one another, and to focus on a child-centered approach to child maltreatment cases.

Generally, at case review, the team should:

- Discuss, plan, and monitor the progress of the investigation

- Review medical evaluations

- Discuss child protection and other safety issues

- Discuss emotional support and treatment needs of the child and family

- Assess the family's reactions and response to the child's disclosure and involvement in the civil/criminal justice system

- Discuss ongoing cultural and special needs issues relevant to the case

- Consider other factors as determined by the team.

In order to ensure direct communication between all parties, it is strongly encouraged that participants be those working on cases. It is not enough that people show up. They must also actively participate. Not doing so negatively impacts the team review process, the case, and most importantly, the child.

As stated in Part 1 of this series, bringing together people from diverse disciplines and varied expertise should result in more informed decision making and ultimately better outcomes for children alleging victimization (Herbert & Bromfield, 2016; Jackson, 2012; Lashley, 2005). However, CACs are finding that building and sustaining meaningful and productive case reviews is an ongoing challenge and "like the MDT itself, case review is a dynamic process in need of continual oversight" (Jackson, 2012, p. 1248).

Trust and respect is the foundation of every high functioning team. A trusting and respectful environment creates an atmosphere that facilitates open communication and encourages honest feedback (Smith, 2011). In the absence of trust, team members cannot be vulnerable and are afraid of admitting their mistakes, because they fear reprisal and derision. This results in artificial harmony where meetings become political—people choose their words and actions based on how they want others to react rather than based on what they really think. Trust and respect allow team members to speak candidly and resist over-personalization of conflict.

Real harmony comes from continually working through issues and cycling through conflict. Conflict and disagreement among team members is common and to be expected. Teams must learn to engage in productive, ideological conflict during meetings and view problems as system problems instead of viewing then as a result of individual failings (Kenty, 2006). Healthy MDTs should devise strategies for dealing with conflict before problems arise; and differences in opinion should be viewed as learning opportunities where team members can better understand the responsibilities and pressures other members face in their respective roles (Lashley, 2005). Only then can members integrate case analysis into the larger picture of an improved system (Smith, 2011). "Allowing all members to have input regarding the resolution of conflict and focusing on strengths while discussing weaknesses is beneficial to team cohesiveness. Defining (or possibly redefining) problems as they relate to the MDT's functioning and purpose may place controversial issues into a more appropriate perspective" (Lashley, 2005, p. 4).

When there is low attendance at case review, low levels of interaction, or when team members show up to the meetings but are engaged in side conversations or checking email or playing games on their phones, this signals a lack of commitment to the case review process and to the team itself. This behavior issue could be due to ambiguity and lack of buy-in to the team process. When people do not understand the goals and purpose of the team, or when they feel their input is not valued, they will not get on board. Agency commitment is also key to member's participation, and attendance and is required to move from an agency-centered approach to a child-centered approach (Smith, 2011).

The absence of trust, fear of conflict, and lack of commitment can result in the avoidance of accountability or low standards for a person's own work. Members are expected to uphold their duties and roles and to follow through when it comes to the recommendations and subsequent actions assigned in case review (Lashley, 2005). Unreliable team members can weaken the power of an MDT. Most team members are hesitant to confront peers for their bad behavior and failure to follow through. If people have not bought into the same plan they will not hold each other accountable. "Members must be willing to assist, teach, or even confront weak team members for the well-being of the MDT and for what it can accomplish for children" (Lashley, 2005, p. 2).

The team lead and MDT case-review facilitator should be someone who can effectively facilitate case review, encourage participation and feedback on the team process, and manage and negotiate conflict but also coordinate actions as needed to achieve the team's goals (Kenty, 2006).

When everyone is focused on results and team success, when goals are defined, and simple enough to be easily grasped and actionable, the result is better decision-making and, ultimately, better outcomes for children.

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