

CHILD PROTECTION SERVICES  
STANDARDS FOR EFFECTIVE PRACTICE

**STANDARDS FOR ONGOING PROTECTIVE SERVICES**

**3.10 TEAM DECISION MAKING**

**Council on Accreditation Standards**

The Council on Accreditation Standards G3 (Advocacy); G4.14 (Team Delivered Services); G8.4 (Service Planning); S10 (Child Protective Services); and S10.5 (Family Services) link to and support Standard 3.10 *Team Decision Making*.

**Administrative Code**

There are no Ohio Administrative Code Rules that directly address Standard 3.10 *Team Decision Making*.

**I. Philosophy**

Decisions regarding removal or movement of children are the most critical ones families experience during their involvement with the child welfare system. As such, the Child and Family Services Agency (CFSA) must ensure that every family facing a placement-related decision about their child(ren) is provided a family meeting. Unlike other Family Case Conferencing models (see Standard 3.9, *Family Case Conference*), Team Decision Making (TDM) is held without exception, and the system, not solely the social worker, ensures that the meeting happens every time. While some service planning may occur during the course of the meeting, the primary goal of TDM is to make the best possible placement-related decisions for the child that is least restrictive, least intrusive. The Team Decision Making meeting is always facilitated by an agency staff person trained to facilitate this meeting.

While holding a TDM in ALL placement-related decisions is challenging to implement, especially under budgetary constraints, excellence in service requires that the CFSA commit to its full implementation.

**II. Outcomes**

Through the Team Decision Making process, the least restrictive, best-possible placement-related decisions are made through direct involvement of family, extended family, foster parents and community stakeholders in the decision making process.

- The child is safe.
- The family and community are immediately engaged.

**III. Evaluation**

FACSIS events, CPOE, the Federal Health and Human Services outcomes may be considered when evaluating this standard. In addition, the public CFSA may consider the following:

- the nine Casey Family to Family outcomes;

- contacting PCSAO to access the Annie E. Casey Foundation's TDM automated ACCESS data collection system to enhance their capacity for evaluating their TDM process.

#### **IV. Standards for Implementation**

Prior to implementing Team Decision Making (TDM), all involved agency staff, contract agency staff, foster families, and community stakeholders should be oriented to the purpose, philosophy and process of the TDM. Facilitators should be carefully selected from the public agency's most experienced and respected practitioners, and should obtain extensive training on how to facilitate the TDM.

##### **A. Criteria for Convening and Scheduling a TDM**

- 1) The TDM must be convened prior to making ALL placement-related decisions, or in the case of an emergency by the next working day. The TDM is convened :
  - a. prior to a child's removal from his/her home;
  - b. prior to a change in placement;
  - c. prior to reunification or other permanent plan, including a decision to seek termination of parental rights, to transfer temporary custody to a relative or to accept permanent surrender from a parent.
- 2) The agency implements a system of checks and balances to ensure that a TDM takes place prior to ALL placement-related decisions.
- 3) The CFSA holds the TDM in every case, since every family deserves this consideration. The meeting is held even if family members choose not to attend, since the agency must make the placement-related decision.

##### **B. Agency's Pre-TDM Activities**

- 1) The worker should explain to the family the purpose of the TDM, what they can expect, and identify who the family would like to attend. The worker should give the parents an opportunity to discuss their concerns about this process.
- 2) The worker or another agency representative should identify members of the family's community (usually their neighborhood, but could be another community entity) that should be invited to the table and with the family's permission, should invite them to attend the TDM. The CFSA should support and encourage the family's invitation of anyone they would like to attend.
- 3) Other meeting attendees may include: the worker's supervisor, past or present providers of services to the family, agency staff responsible for homefinding or family preservation, the child's GAL if applicable, or others. The worker should contact prospective participants explaining to them the purpose of the TDM, and inviting them to the scheduled TDM. All of the prospective participants should be encouraged to attend.

- 4) The CFSA should remove as many barriers as possible to maximize participation and attendance, such as child care, transportation, scheduling, etc.
- 5) The TDM should be scheduled in a location that provides for the comfort, safety and well-being of the participants. Depending on the purpose of the TDM (e.g. possible removal) it may not be appropriate to hold the TDM in the family or caregiver's home.

### **C. TDM Facilitator**

- 1) The TDM should be conducted by a skilled, senior CFSA professional who has a wealth of experience in the field, as well as knowledge of agency policy and practice and community resources. The TDM facilitator should have credibility with staff and community partners.
- 2) The TDM facilitator should be impartial, having no direct connection in the chain of command of social worker, supervisor or the case in question.
- 3) Among the qualities a TDM facilitator should possess are:
  - a. ability to engage participants;
  - b. good communication, listening and reflection skills;
  - c. ability to stay on task;
  - d. good understanding of group dynamics;
  - e. knowledge of family systems;
  - f. conflict resolution/mediation skills;
  - g. detail-oriented;
  - h. thorough knowledge of, and experience with, CFSA policies and procedures, community resources, court, and child welfare system;
  - i. patience;
  - j. objectivity;
  - k. good organizational skills;
  - l. flexibility;
  - m. a commitment to candor and straight talk;
  - n. a commitment to strength-based practice.
- 4) The facilitator has a stake in the decisions that are made and the outcome of the meeting. While not "emotionally" vested in the decision, the facilitator does represent the agency and its values and best practice, and is therefore responsible for making sure that the decisions made address these. The responsibilities of the facilitator are as follows:
  - a. prepare all name tents, other materials that will ease communication and smooth out the meeting process;
  - b. facilitate the TDM process;
  - c. support the social worker in engaging the team in a positive process toward decision making based on group consensus;
  - d. ensure that decisions are made that are consistent with best practice, agency's mission and values.

**D. Conducting a Team Decision Making meeting**

- 1) The TDM facilitator opens the meeting with introductions, with each participant identifying his/her relationship to the family and child. Name tents should also be available.
- 2) The TDM facilitator explains the purpose of the meeting and the process and asks the members if they have any questions, issues or concerns before moving forward. Ground rules for the meeting are agreed upon.
- 3) The TDM facilitator partners with the social worker, supporting her/him as the convener of the meeting. The social worker is a leader in the meeting and not simply a participant. S/he has a primary role in clarifying and explaining what is discussed, etc.
- 4) The TDM facilitator begins by asking the birth family and/or their social worker to share some information about the child(ren) with the group, in order to highlight the real people and real lives at the center of the meeting.
- 5) The TDM facilitator asks the social worker to identify the reason for the TDM, the concerns that brought the stakeholders together, etc.
- 6) The facilitator then asks each member (beginning with birth parents) what their perception of the situation is and what they want (outcomes) for the child.
- 7) The social worker provides an oral summary of the agency and family activities to date. The social worker presents, in summary and using lay language, the key risk assessment components to the group.
- 8) The facilitator requests that each participant identify family strengths that can assist in providing for the child's safety and stabilizing the family. The TDM facilitator assists the stakeholders in understanding that the family's strengths will be used as potential strategies for reducing the risk to the child(ren) and assuring the child(ren)'s safety.
- 9) The facilitator opens a dialogue as to what is needed to reduce the risk to the child(ren), assure child safety and provide family stability.
- 10) The TDM facilitator, with assistance from the social worker, works to achieve consensus as to the best placement plan for the child(ren) and accompanying action steps. Each participant is invited to comment on their support of the decision.
- 11) If consensus cannot be reached, the TDM facilitator asks the social worker/supervisor to weigh all the information that has been discussed and make a decision on behalf of the agency. This becomes the agency's official decision and plan.
- 12) If CFSA staff object to the worker's decision due to belief it places the child at serious risk or violates a critical policy, staff may request a higher level CFSA administrator to review and make the final decision. This becomes the final and official position of the agency.

- 13) The TDM facilitator should ask parents if they are clear on the placement decision. This should also be done with all the other participants.
- 14) The TDM facilitator should verbally and in writing summarize the placement decision, including safety plan (if applicable) and action steps, which identify who will do what by when. Each participant signs a summary report, which is distributed to all prior to the end of the meeting.
- 15) The TDM facilitator should discuss possible follow-up meetings and receive agreement from the participants on attending follow-up meetings.

#### **V. Financial Implications**

The CFSA should base cost on the following criteria: Salary of TDM facilitator, meeting space (if held in the community), supplies, clerical support. Note: the agency should anticipate a cost savings by preventing unnecessary placements and selection of less restrictive levels of care through increased use of kinship placements.

Agency Preparation Work and Attendance at the Team Decision Making meeting  
8 hours x \$81.21/hour = \$649.68 per Family Case Conference