



**CITY OF RICHMOND
DEPARTMENT OF SOCIAL SERVICES**

**TEAM DECISION-MAKING
MEETING**

ADMINISTRATIVE POLICY

I. Definition

Team Decision-Making (TDM) meetings are held for ALL decisions involving a child's removal, change of placement, and reunification/other permanency plan. The TDM meeting is held BEFORE **any** child's move occurs. **In cases of imminent risk, a TDM meeting will be held within 24 hours of the removal.** In all other CPS cases of children at risk, a TDM meeting will be held within 5 days. TDM meetings allow immediate decisions to be made by a team of individuals identified in the child's network. The team seeks consensual decision regarding a placement that both protects the child and preserves or reunifies the family.

II. Goal

The goal is to involve birth families and community members, along with resource families, service providers and agency staff, in all placement decisions, to ensure a network of support for the child and the adults who care for them. TDM meetings improves the agency's decision-making process, encourages the support and "buy in" of the family, and helps develop specific, individualized, and appropriate interventions for children and families.

III. Core Values

The fundamental purpose of TDM meetings are grounded by value-driven principles. Core values include:

- All families have strengths;
- Families are the experts on themselves;
- Families deserve to be treated with dignity and respect;
- Families can make well-informed decisions about keeping their children safe when supported;
- Outcomes improve when families are involved in decision-making; and
- A team is often more capable of creative and high-quality decision-making than an individual.

IV. TDM Procedure

A. TDM Meeting Criteria

For every family involved with RDSS, these are the required points at which a TDM meeting must be held:

- When a child's initial removal from his/her family is being considered
- A change in a child's placement is being considered, and
- Recommendations are made for a permanent plan, including reunification, termination of parental rights, guardianship, long term foster care, or emancipation.
- **For all foster care youth who are within 30 days of their 17th birthday (before or afterwards). Refer to the Richmond CPMT Policy and Procedures For Youth 18-21**

Types of Meetings

- **Emergency Removal or Considered Removal** – TDM meetings are scheduled when the social worker assesses the child(ren) is at high risk

- **Change of Placement or Placement Preservation** – A TDM is requested before a child(ren) is moved from one placement to another. The meeting is scheduled when potential disruption of placement is recognized, safety issues exist, or a move from current placement is believed necessary to benefit the child. When there is imminent risk or a negative licensure action on a foster home or congregate care placement, the TDM meeting will occur within 48 business hours of the placement change.
- **Permanency Planning or Reunification** – The TDM meeting is scheduled when risk level is reduced and parental progress in ability to protect and provide safety for the child is recognized. The team determines if the child(ren) can safely return to his/her own family, and is held before overnight visits can begin. Other permanent plans may include permanent custody, adoption, guardianship, long term foster care, and emancipation. These TDM meetings are scheduled when lack of progress by parents in reducing risk suggests the need for permanent placement plan/filing.

B. TDM Participants

Each participant is present either because they were invited to the meeting, or their participation was agreed to by the birth parent(s), or because they are involved with the agency and serve the family.

- **Birth parents** – recognized as the expert on their family’s needs and strengths; presence and involvement is integral to the success of the meeting; absence or non-participation would not preclude or postpone a scheduled TDM meeting, except when a TDM meeting is scheduled for reunification
- **Child(ren)** – should be included at all times. It is only appropriate to exclude children when they are under 10 years of age, placed in a hospital or locked facility, or have severe cognitive deficits (low functioning). Children are essential members of the team for developing the Child Plan.
- **Extended family and non-relative supports** – invited by youth and/or parents and act as a support or resource for the family
- **Current/Previous caregivers (kin, foster, etc.)** – participate as key team members and assist in providing information regarding child(ren)’s adjustment, progress, and needs; helps develop ideas and reach a decision
- **Social worker (SW)** – recognized as the content expert; contributes to discussion and advocates for the child; responsible for making a decision if absence of consensus; expected to bring documents that could expedite

and simplify the process; responsible for validating the child's requests; provides strength based context to case; follows up with the plan that is put in place; ensures that risk factors are addressed; ensures that program policy is adhered to

- **Supervisor** – or Supervisor designee should be included in the TDM meeting whenever possible. The Supervisor should always be in attendance during new worker period, for high profile cases and for performance improvement plan; helps monitor progress of placement
- **Transitional Coordinator** – manages all the day to day operations of the TDM process which includes scheduling, training, monitoring referrals, providing notification to Social Worker staff for which cases should move through the framework, quality assurance and collection of data.
- **Facilitator** – recognized as the trained process expert who works with the social worker and leads the meeting through a solution-focused process; assigned to family's case throughout involvement with agency; participates as a full team member and is responsible for high quality decisions; expected to seek review of social worker's decision in situations where consensus is not reached; provides summary report to participants and Transitional Coordinator outlining decision and action steps
- **Community partners** – defined by their identity as a member of the family's "community," whether based on neighborhood, ethnicity, religion, or other connection; provides support, resource expertise, and external perspective to decision-making; presence in meeting must be agreed to by the child and family
- **Service providers** – those persons who are currently or previously involved with the child and/or family (i.e. Case manager, therapist, direct one to one staff); child's discharge planning should coincide with result of TDM meeting
- **Guardian ad litem or Attorney** – serve as the court-appointed representative responsible for representing the child's best interest; should always be invited and participate if their schedule permits
- **Other public agency staff** – may include Independent Living Coordinator, Family Stabilization Staff, Benefits staff, Probation officer when child is court-involved, RBHA (Richmond Behavioral Health Authority) representative if child is receiving mental health treatment from the CSB (Community Services Board), School Staff if applicable or others able to provide expertise and information

C. Meeting Structure

The basic TDM meetings structure includes the following:

- Facilitator will introduce the goal of the meeting
- Team members will introduce themselves
- Ground rules for the meeting are set
- A strength-based approach will be used by the facilitator to help the participants identify placement options and service needs

- Next steps will be identified with timelines
- Consensus decision is made if possible

D. Ground Rules Framework

Each TDM team can determine their own ground rules, but the basic rules include:

- Everyone, as well as their opinions, are valued
- One person speaks at a time
- No degrading words are used towards another person
- Everyone listens
- No usage of cellular telephones during the TDM meeting

E. Consensus

The goal is to gain consensus by the team regarding placement that protects the child(ren) and preserves or reunifies the family; however, Richmond DSS maintains legal responsibility to make the decision if agreement by the full team cannot be achieved. In pursuing a consensus decision by the team, the facilitator will assist the group using this framework:

- Can the entire TDM team reach consensus? If not, then...
- Can the public agency staff, including the facilitator, reach consensus? If not, then...
- The SW makes the decision regarding the placement-related issue at hand. A review process is available if other members of the RDSS staff who are part of the TDM team believe the decision puts the child at risk of serious harm or violates law or policy (See TDM Reconsideration Process).

F. Confidentiality

The confidentiality of information shared at the TDM meeting is not guaranteed. Privacy and respect are emphasized, but parents are informed that information from the meeting may be used for case planning, in subsequent court proceedings if necessary, and in the investigation of a new allegation of abuse or neglect should such information arise.

V. Before TDM Meeting

A. Scheduling

The Transitional Coordinator is responsible for the daily operations of the TDM process. The Transitional Coordinator will be responsible for scheduling and securing the meeting location. Meetings will primarily take place between 9:00 am and 5:00 pm, unless team participants require a meeting after regular

business hours. Meeting venues will vary. Venues may be held at the Department of Social Services locations or other community sites. In addition:

- Every emergency placement will have a TDM meeting **within 24 hours of the child's removal**. Reserved meeting times for emergency TDM meetings will be made available each week.
- TDM meetings that discuss initial placement for a child(ren) still at home are scheduled after a consultation with the supervisor regarding risk issues, and should be held within 5 days.
- Change of placement meetings should be held within 48 hours of the TDM request, or the next business day upon notification of the caregiver's request for removal or recognition of any safety issues. TDM meetings that discuss considered placement plans (i.e. moves to a less restrictive setting) should be scheduled within 5 business days.
- Reunification TDM meetings should be scheduled according to parental progress regarding their ability to provide a safe environment and meet the needs of the child. These meetings should not be driven by court schedules. Parents or Custodian must be present during the TDM meeting and the meeting must be held before overnight visits can occur.
- **Foster care youth who are within 30 days of their 17th birthday (before or afterwards) shall participate in a Team Decision Making Meeting.**
- Any other permanency planning meeting should be scheduled within two weeks of the request and before any court filing is completed.

B. Additional Preparation

- The SW must explain the TDM process to the youth and family and answer any questions they may have.
- The SW should have a face to face interview with the youth (or family, if applicable) to obtain an identified support list of individuals who should attend the TDM meeting.
- The SW must request a TDM date and time from the Transitional Coordinator. A TDM Face Sheet (**See Appendix B**) should be provided and forwarded to the TC **prior** to the TDM meeting, which will include the name of child, date of birth, the type of TDM requested, and any other special needs in regards to safety, security, language interpretation, and physical accommodation.
- The SW must contact identified support persons to whom the child has listed and invite them to the TDM meeting. Forms of correspondence **must** be a letter signed by the youth, telephone contact, and at least two (2) forms of written correspondence via regular mail and certified mail. (This may not apply to CPS Intake).
- The SW should identify and contact additional support persons whom the child agrees to attending the TDM meeting
- The SW must give clear information about the date, time, location, and purpose of the TDM to those invited participants
- The SW must give the Facilitator a copy of the identified support list of individuals (**See Appendix C**) who will be attending TDM meeting.

- The SW must meet with the Facilitator at least 10 minutes before the TDM meeting to discuss any updates and triggers of negativity prior to the meeting.
- The SW must begin exploring with the family, benefits and community resources to assist with their needs
- In the case of a need to cancel a scheduled TDM, the SW must complete a Reason for Cancelled TDM form (**See Appendix D**). This form will need to be signed and dated by the Social Worker's Supervisor and the reason for cancellation should be documented. This form needs to then be forwarded to the Transitional Coordinator within 3 business days of the cancelled TDM.

VI. Post-TDM Meeting

A. Appropriate Forms

Facilitator Responsibilities:

- Completing the TDM Plan Form (**See Appendix E**) and giving the completed form to the Transitional Coordinator and SW at the end of the meeting.
- If it is deemed necessary for criminal background checks to be completed on a participant during the TDM meeting, the facilitator will distribute the form to be completed at the conclusion of the meeting.

Social Worker Responsibilities

- In cases of a CPS removal and Foster care case, the SW is to request a FAPT meeting within 5 days and must attach a copy of the TDM Plan Form to the FAPT Referral Form and all other FAPT related paperwork.
- In addition, the SW must attach a copy of the TDM Plan Form to the Foster Care Service Plan for submittal to court.
- The SW is responsible for distributing copies of the TDM Plan Form to all team participants, including the social worker's supervisor and other involved parties not present including the GAL and Probation Officer (if applicable) and share the outcome of the TDM with them immediately.
- Draft service plan (including alternatives for community-based services) is reviewed and approved by the supervisor.
- A 90 day status report will be required and is mandated post-TDM. This form will be emailed from the TDM Specialist and will be completed by the SW and electronically returned to the TDM Specialist.

B. Data Collection

The Transitional Coordinator will be responsible for collecting the information from each TDM meeting, as outlined in the Data Collection Protocol (see attached data protocol). Data should be linked to agency child and family outcomes in order to ensure the effectiveness of the TDM process.

C. TDM Reconsideration Process

- If there is a belief that the decision made in the TDM meeting will result in serious harm to the child or violates law or agency policy, a TDM decision can be reconsidered. Only those agency staff who participated in the TDM meeting may seek review of a TDM decision. If there is a lack of consensus, agency staff should notify team of intent to seek review immediately, before participants leave the meeting.
- An interim safety plan should be made if necessary until a decision is made, and another TDM date should be scheduled to deal with the issues before the participant leaves the meeting. The designated agency administrator (Deputy Director/FC Program Manager/Stabilization Program Manager) if available will join the team and resolve the issue while the team is still convened. If unavailable, he/she will schedule and participate in a review and make the review decision.
- The review process will follow the same format of the TDM meeting. Decisions made by the designated agency administrator are the agency's final decision and designated agency staff is responsible to implement the decision and demonstrate full support.

D. FAPT Team's Role

- The purpose of the FAPT Team in the TDM meeting process is to IDENTIFY service providers that provide the youth with the recommended services that are a result of the meeting.
- FAPT has the responsibility for the careful review of requests for funding but cannot reject a service funding request based solely on cost. Each child's service plan and accompanying request for services will be treated as a unique case.
- In the event that there is a disagreement for a funding request that cannot be resolved, the FAPT Coordinator meets immediately with the Social Worker and supervisor to resolve the issue. The CSA Coordinator may be asked to participate in this decision. In the event that a consensus decision cannot be reached, the Deputy Director of the Social Work Division will make the final decision.
- The FAPT team cannot seek a review of a TDM decision.
- FAPT members are not TDM team members unless the child, Social Worker or Family Member specifies otherwise.
- A FAPT which needs to be secured due to a completed TDM shall take place within 5-14 days depending on the needed services. If no immediate action is necessary, the case will adhere to the previously scheduled FAPT meeting. FAPT will review summary reports and will monitor the progress of the new service plan.

E. Social Worker/Supervisor Follow-up

- If the decision at the TDM meeting results in the need of an earlier court date, then the Social Worker must request this via the DSS City Attorney or the GAL.
- Within 7 days after the TDM, the Supervisor must have a conference with the SW to discuss the progress made towards the action steps and needs identified during the TDM and review draft service plans
- Social Workers are responsible for reviewing the family/caretaker's previous service requests to the agency including requests for financial assistance
- Social Workers, in consultation with their supervisor, are responsible for ensuring that all avenues for service payment are exhausted before seeking CSA funds.
- Social Workers will have the responsibility of continuing case management for 3 to 6 months after the child has returned home, placed with family members or placed with an identified caretaker.
This step will need Supervisor's approval.
- Social Workers will inform FAPT if it becomes a necessity to reduce/increase service needs and refer cases to the Stabilization Unit only if deemed appropriate. Referral to another RDSS program requires Supervisor approval. Generally, cases are closed after the 3 to 6 month period and the Foster Care Social Worker has secured all appropriate community services to support the placement.

6-25-09

TDM POLICY

Read and Reviewed by: _____

Print Name

Signature

Date

