

The Role of the Mental Health Professional on the MDT



How can CACs fully integrate the mental health professionals on the multi-disciplinary team (MDT)?

The role of the mental health professional is critical to identifying and healing trauma in the lives of children and families. Their role on the multi-disciplinary team (MDT) is informed by the 2017 Mental Health Accreditation Standard. CACs should work to develop protocols that outline the treatment process and the roles and responsibilities of each member of the MDT. The roles and responsibilities of existing partners should be defined as well as identifying additional partners critical to treatment success. Mental health professionals serve as consultants and provide resources to the MDT in the identification and delivery of expanded services. These services include trauma screening, trauma assessment, the identification of any treatment needs, identifying appropriate measurable treatment goals, determining the treatment most appropriate to meeting those goals, the referral for that treatment, and the monitoring and case management of the treatment to completion. The mental health professionals, either on-site or through community referral, provide direct services to CAC clients, participate in MDT case review, may attend court, and provide leadership in monitoring treatment to successful completion. Given their role on the MDT, mental health professionals have a responsibility to receive specialized training in multiple areas.

How can the CAC incorporate a collaborative mental health case planning and treatment process into their MDT and their case review?

CACs have a long history of collaborating regarding the investigation of allegations of child abuse. The MDT is made up of professionals involved in the initial investigation, medical, law enforcement, child protective services, victim advocates, mental health providers, and prosecutors. The inclusion of mental health professionals on the multi-disciplinary team (MDT) is essential because of the effect trauma has on a child's mental health. Their role on the multi-disciplinary team (MDT) is informed by the 2017 Mental Health Accreditation Standard. CACs have expanded their focus beyond simply looking at what happened to the child and have begun to play a critical role in helping children and families heal from traumatic events.

The Case Review process is the vehicle or "structure" used by the CACs to coordinate the investigation of child abuse allegations. It is also an appropriate vehicle for identifying, coordinating, and collaborating on the development of mental health case plans, monitoring treatment processes, and identifying services for the child and/or family. The MDT and case review process supports the sharing of responsibility and resources to support successful treatment and healing.

What is the role of the CAC if they refer clients out for mental health treatment?

When a CAC provides mental health services through referral to others in the community, they are serving in a broker role. Brokers for mental health services are individuals in the child welfare world who seek appropriate treatment for clients they serve or treatment that is mandated by the court. Brokers monitor the treatment progress, identify, and seek resources to overcome any barriers to the child and family's successful completion of treatment. They consider the outcome of the treatment in decisions they make about child placement and permanency. CAC brokers for mental health services have the responsibility to identify mental health professionals in their community who are trained in evidence-based trauma treatment, who provide trauma assessments, and who are willing to collaborate with the MDT to identify treatment needs. Mental Health professionals also collaborate in the development of an evidence-based treatment plan, provide the appropriate evidence-based treatment, and participate in and collaborate with the MDT Case Review. CACs need to develop linkage agreements with local mental health professionals consistent with the NCA Mental Health accreditation standard.

How can a CAC become more responsible for treatment outcomes for a child and family?

The MDT includes brokers for services as well as service providers. This group shares responsibility in the identification of the impact of abuse on the child and family as well as the development of collaborative treatment or service plans. The CAC model was developed to support improved outcomes of investigations of child abuse. CACs are in a strong position to engage their MDT in the services required to meet the goal of improving treatment outcomes and healing for a child and family. When the MDT collectively accepts responsibility for child outcomes, the team works to collaborate with and communicate among themselves to develop an evidence-based treatment plan with the child and family. This one treatment plan offers an opportunity for the MDT partners/providers and family to support the same outcomes and to focus the community resources on ensuring that the plan is workable for the family, meets the unique needs of the family, and is successful.

Do other MCT partners really have any interest or role in the treatment towards healing? Does dealing with the identification and treatment of trauma have any benefit to MDT members?

Although some MDT partners may question why they would be involved in the treatment process of the CAC, participation in the case planning and monitoring of treatment provides an opportunity for non-mental health professionals to gain a better understanding of the need for and value of treatment. Participation also provides the non-mental health professionals an opportunity to experience the success of treatment. Being a part of a team that provides support for treatment can help engage and support the child and family participating in that treatment, and the successful completion provides MDT members an opportunity to celebrate a positive outcome. Experiencing positive outcomes and treatment success help balance some of the negative impact of trauma work and can serve as an inoculation against secondary traumatic stress.