

TEAMING for Pathways to Mental Health

Sharon L. Morrison, Ph.D.,
Medra Consulting



TOPICS INCLUDE:

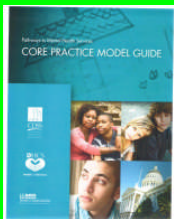
- Understanding the role of the CFT
- Engaging the right team members
- Youth/Family at the center of the team
- Generating needed services and supports
- Working with the dynamics of team process

A LITTLE TEAM BUILDING

1. Chat amongst yourselves about interests you may share (hobbies, things you feel passionate about, things you like to do)
2. Using those ideas, create a fun team name for yourselves, along with a symbol (Post on Tent provided)

YOUR NEEDS





CORE PRACTICE MODEL

CPM – WHAT IS IT?

- A set of practices and principles
- Designed to better support youth/families
- Intended to improve collaboration and coordination
- Implemented through **teaming** and **CFTs**



WHY DOES IT MATTER?

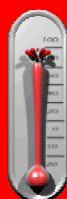


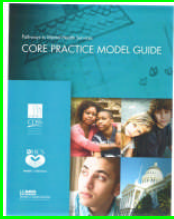
VALUES & PRINCIPLES

- Children Safety
- Needs-Driven, Strength-Based, Family Focused
- Individualized Services
- Multi-Agency Collaboration – Community
- Parent/Family Voice and Choice
- Formal and Informal Resources
- Culturally Competent



RATE YOUR PRACTICES





CORE PRACTICE MODEL – TEAMING

TEAMING

- When does it begin?
- How often does it happen?
- Who is involved?
- How long does it last?



TEAMING (CFT) & TEAM MEETINGS

- The CPM makes a distinction between the **CFT**, which describes the members involved in a shared vision with the family, and a CFT meeting, which is **one** way in which the members communicate.
- Each individual team member has his or her unique role and responsibilities, but they are **always** working as part of the team.



Core Practice Model, Page 13

WHAT'S DIFFERENT?



We always implement.....

An effective practice model which encompasses an **array of services** that generally includes **culturally responsive** and **trauma-informed** or trauma-responsive, evidence-based practices, promising practices, innovative practices, and culturally specific healing practices and traditions



Core Practice Model, Page 27

FOR CPM we also add.....

- Three specific services shall be provided to children/youth with more intensive needs, **Intensive Care Coordination (ICC)**, Intensive Home Based Services (IHBS) and Therapeutic Foster Care (TFC). These services must be implemented within the context of the CPM. The ICC and IHBS services are defined in the Medical Documentation Manual for the Subclass members as follows:



Intensive Care Coordination

"Intensive care coordination (ICC) is a targeted case management (TCM) service that facilitates assessment of, care planning for and coordination of services, including urgent services for members of Katie A. Subclass. An ICC coordinator serves as the single point of accountability to:



- **Ensure** that medically necessary **services are accessed**, coordinated **and delivered in a strength-based, individualized, family/youth driven** and **culturally and linguistically relevant** manner and that services and supports are guided by the needs of the child/youth.
- **Facilitate a collaborative relationship** among the child/youth, his/her family and involved child-serving systems.
- **Support the parent/caregiver** in meeting their child/youth's needs.
- **Help establish the CFT and provide ongoing support.**
- **Organize and match care across providers** and child serving systems to allow the child/youth to be served in his/her home community.



ON THE LIGHTER SIDE...

**WHAT'S DIFFERENT?
(Continued)**



**TEAM THINK
aka
CONSCIOUSNESS SHIFT**



[http://www.youtube.com/watch
?v=3vZL4eHdhRM](http://www.youtube.com/watch?v=3vZL4eHdhRM)

A LITTLE MORE TEAM BUILDING

1. Working as a Team, fill in the blanks on the worksheets with words appropriate for the categories indicated in the left column and that begin with each of the four letters at the top of the columns.
2. The key is to be creative; you will receive 4 points for each entry your team selects that is not used by another team.
3. Team with highest score wins a prize.

TEAMING: WHEN IT WORKS, WHEN IT DOESN'T



TEAMING CHALLENGES



POSSIBLE CHALLENGES

- Some needed people won't come to meetings/participate
- Some people don't really "team," they only see their own agenda
- Some people come to meetings but they don't participate
- Some people don't follow through



POSSIBLE CHALLENGES

- And some people....



"JOB SHARING?"

POSSIBLE SOLUTIONS

- Personalize invitations, make people important and “unpack” necessary information for them
- Make their perspective important AND reinforce team at every step (strengths-based)
- Create a safe environment where “power” is leveled, team reinforced, and invite at every step
- Family/youth and team ownership is imperative, remain needs-focused, “unpack” and support steps as needed



TEAM DYNAMICS

- Healthy Teaming Occurs When:
 - People Share A Common Purpose
 - People Can Communicate
 - People Have A Strength-Based, Needs Approach with Each Other



TEAM DYNAMICS

- Communication Assists:
 - Understand low level cues in self and others
 - Address you needs
 - Respond to need rather than behavior
 - Take a “pause” when necessary



**OTHER ISSUES, QUESTIONS,
CONCERNS, NEEDS?**



TEAMING for Pathways to Mental Health