

A Multidisciplinary Child Case Conference: An integrated approach to addressing trauma in families

Yvonne Lutter, PsyD

Michelle Croasdell, PhD

What is a Multidisciplinary Child Case Conference?

- We meet on the last Friday of the month to discuss child cases.
- We meet in the behavior health offices from 12:30-2.
- We are a pediatrician, a director of behavior health, a child psychologist, a master's level social worker, and an early childhood consultant.
- We talk about children and families that we are serving and discuss treatment options and resources.
- We support our pediatrician who struggles to leave her clinic for an hour and does not always succeed.
- We have potlucks during the meeting sometimes to support self care and colleague connections.
- We miss meetings due to work and family obligations.
- We worry about food scarcity and seek out resources for our families.
- We bring different perspectives and don't always agree.

Start where you are with whatever vehicle you have.

- Find people willing to play nice to improve the health and well-being of young children
- Relationships
- Medical
- Behavior Health
- Early childhood

3 Tribes: Acoma Tohajiilee Laguna

- Three different ways of getting from here to there on the same road.



- Courts
- Social service agencies
- Education programs
- Child Protection teams
- Police

Three fields essential to an integrative approach: Let the research advocate.

- **Pediatrics:**
Medical language,
Developmental
milestones-Physical,
Cognitive, Social-
Behavioral.
- **Early Childhood:**
Education sites,
Behavior,
Development,
Behavior.
- **Behavior Health:**
Pathology or
symptoms, Abuse,
Extreme behaviors,
Compartmentalization
of treatment and
patients.

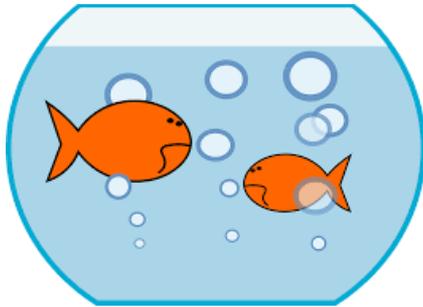
Building Confidence & Competence: Aligning the fields to move as one.

Two Simple Goals:

- 1. Coordination of care
- 2. Increasing early childhood knowledge



Getting up to speed: The power of a fish tank.

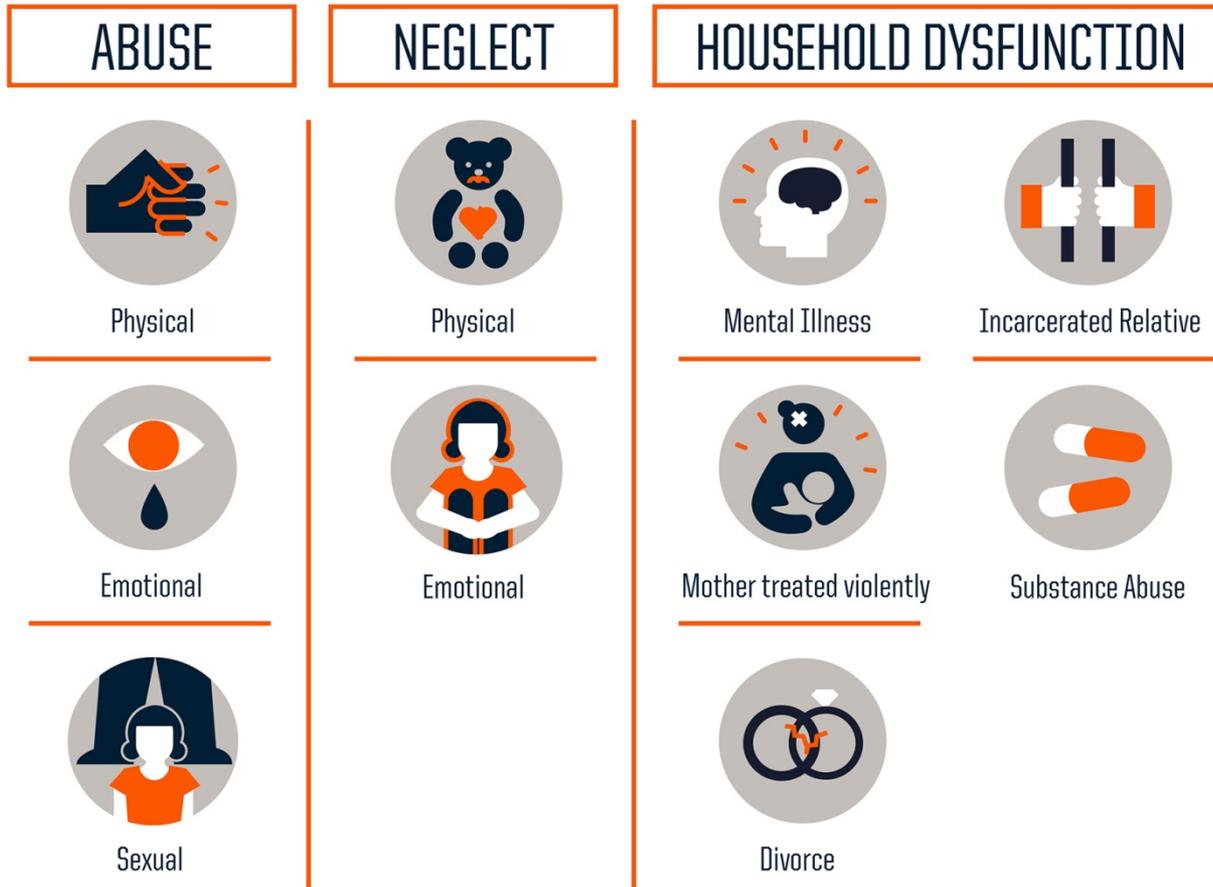


- Books
 - Supplies
 - Webinars
 - Conferences
 - Conversations
- American Academy of Pediatrics
 - Zero to 3
 - Center for the Developing Child
 - Infant mental health: state organizations

The Power of Science: Epigenetics

- “Science tells us that the interactions between genes and environment shape human development. Despite the misconception that genes are “set in stone,” research shows that early experiences can determine how genes are turned on and off — and even whether some are expressed at all.”
- Harvard Center on the Developing Child
- ACEs call for an integrated approach to open dialogue between provider and families to address trauma and its effect on young children.
- Anecdotal reports suggest this approach is increasing integration of behavior health into primary care.

Adverse Childhood Experiences open the door.



ACEs as a common language.

- ACEs illuminate the generational aspect of treatment and intervention.
- Surprises at initial scores.
- Quicker disclosure
- Understanding the context of young children.
- Children always have adults in their context.

Adverse Childhood Experiences: a multi-generational perspective.

- Universal screening: Teens, Parents for children, Parents for themselves.
- Commitment to use ACES in addressing trauma across programs.
- Newspaper and Hospital newsletter articles.
- Consults & Referrals form Pediatrician: warm hand-off.
- Legalities & Ethics
- Documentation, intake, treatment plans, release of information.

Champions & Cheerleaders!

- Administrative support from Indian Health Services
- Community buy-in
- Space
- Release time
- Project LAUNCH: funding
- Early childhood knowledge: Professional development opportunities
- YOUR Champions & Cheerleaders

Timeline of the process

- Locate where you are on the road map....and be patient, but not too patient.



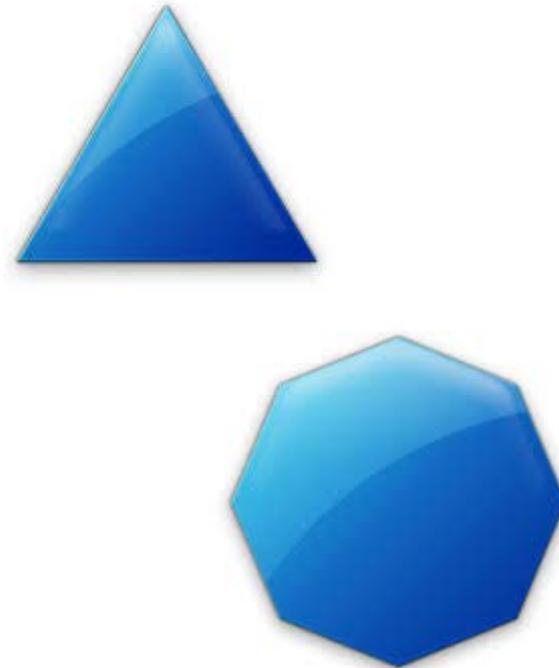
Roadblocks Along the Way



- Inertia of the system is an ongoing challenge: spinning your wheels.
- Pediatric scheduling of appointments.
- Transitions and turnover as a constant challenge.
- Defending a new concept or service.
- Community buy-in and engagement are crucial.

Where we went and why it works!

- Case 1
- Think of a triangle with points labeled victim, perpetrator and non-protective parent.
- Case 2
- Think of an octagon with a self-referring mother in the center.



Where do we go from here?

- Flexibility is key along the winding road.



- Revisiting:
 - relationships
 - needs
 - communication
- Referring to community resources early and often for developmental needs.

Get in your vehicle of choice and go!

- What is worth fighting for?
- Spending energy on?
- Systems changes:
 - Developmental Specialists
 - Professional Development

References & Resources

- Indian Health Services Division of Behavioral Health
 - ihs.gov/dbh/
- Zero to Three
 - zerotothree.org
- American Academy of Pediatrics
 - AAP.org
- Harvard Center for the Developing Child
 - developingchild.harvard.edu
- Michigan Association for Infant Mental Health
 - mi-aimh.org