

Multidisciplinary Team Process



Table of Contents

Key Concepts of the Multidisciplinary Team Process	1
Overview of the Multidisciplinary Team Process	3
What Is the Multidisciplinary Team Process?.....	3
Who Are the Team Members?.....	3
What Are the Types of Multidisciplinary Teams?	4
Service Coordinator Responsibilities.....	7
Quality Practices	9
Tips for Success	11
Resources	13
Sample Invitation Message	15
Supporting the Family to Be Active Members of the Multidisciplinary Team..	16
Endnotes	19

Much of the code and regulation cited in this Handbook has been paraphrased for clarity and conciseness. For the full text of legislative code and regulation, refer online to the citation provided.

Notes:

KEY CONCEPTS OF THE MULTIDISCIPLINARY TEAM PROCESS

- The goal of the multidisciplinary team process is integrated and coordinated services that meet the needs of the child and family.
- Multidisciplinary teams, including parents, are required to participate in eligibility determination, assessment, and development of individualized family service plans (IFSPs), including the transition plan in the IFSP.
- Parents are full and integral members of multidisciplinary teams.

Notes:

OVERVIEW OF THE MULTIDISCIPLINARY TEAM PROCESS

What Is the Multidisciplinary Team Process?

The multidisciplinary team process is a collaborative partnership among early interventionists from multiple disciplines and parents. Team members bring their individual expertise, skill, and experience to develop a well-informed, evidence-based, proficient, and effective program that supports the needs of young children with developmental delays and disabilities and the ability of their families to participate fully in the process.

Who Are the Team Members?

- Parent(s) and
- Two or more individuals from various disciplines or professions, one of whom is always the service coordinator, who participate in the provision of integrated and coordinated services, including evaluation, assessment, and IFSP development.

*Title 17 CCR Section 52000(b)(40)
34 CFR Section 303.24*

A multidisciplinary team may also include other individuals involved with the child, such as:

- Professionals conducting evaluations or assessments;
- Primary health care providers and other specialists;
- Current service providers;
- Other family members;
- An advocate;
- Other person(s) as requested by the parent.

Family Participation

Parents are specifically identified as members of the multidisciplinary team in both the federal and state regulations, as cited above. Parents have the right to participate in activities regarding their child's early intervention services, and parents have the right to include other family members in these activities as well.

What Are the Types of Multidisciplinary Teams?

Multidisciplinary teams, involving two or more separate disciplines or professions and the parent(s), may differ in configuration, in the way individuals who make up the team behave and make decisions and in the way individual team members interact with each other.

A traditional or simple multidisciplinary team may be comprised of individual team members who function independently of one another. Each discipline-specific professional:

- Assesses the child (and/or family) separately;
- Meets with the family individually;
- Develops their own plan;
- Implements their plan independently;
- Communicates with other team members minimally; and
- Conveys information to the family independently.

Teams of this type may be time efficient and cost effective; however, family involvement is often peripheral or families are left to function as go-between, carrying information from professionals of one discipline to another.

An interdisciplinary team may be comprised of independent team members, but the group maintains some level of interaction among the discipline-specific professionals and the family. Each professional:

- Assesses the child and family separately, but the assessment may take place in an arena setting;
- Participates as a member of the team to meet with the family;
- Develops their own plan and then shares that plan with the other disciplines on the team;
- Implements their plan independently but shares ongoing information with the other discipline-specific team members; and
- Participates in periodic team meetings to review specific activities, learn what other team members are focusing on, and incorporate complementary activities into their work with the child and family.

An interdisciplinary team may be somewhat time efficient and cost effective, and family involvement may be variable.

A transdisciplinary team is comprised of team members who work collaboratively across disciplines, involving the family in every step of the process. Transdisciplinary team members, including the family:

- Conduct evaluations and assessments together;
- Develop one comprehensive plan;
- Implement the plan through a core provider who consistently works directly with the family; and
- Participate in regular team meetings for continual sharing of information, knowledge, and skills.

In the transdisciplinary approach, discipline-specific professionals support the core provider primarily through consultation or, when appropriate, partnering or integrated services. This approach may seem more time- and cost-intensive, but it provides a high level of family involvement. Members of the family are full, active, and participating members of the team and, therefore, build their own capacity to support their child over time.

SERVICE COORDINATOR RESPONSIBILITIES

Whereas the service coordinator is an active and critical member of the multidisciplinary team, as the primary point of contact for coordinating services and assistance you also are often responsible for identifying members of the multidisciplinary team and for coordinating and facilitating team meetings.

The service coordinator:

- Continually seeks appropriate services and service providers necessary to enhance the development of the children being served;
Title 17 CCR Section 52121(a)(6)
- Obtains written parental consent before disclosing personally identifiable information to anyone other than authorized regional center or LEA employees;
Title 17 CCR Section 52169
- Facilitates the exchange of information among service providers including health care providers, medical case managers, regional centers, and LEAs;
Title 17 CCR Section 52121(a)(11)
- Makes meeting arrangements with and provides written notice to the parents and other multidisciplinary team members in a timely manner to ensure attendance at the IFSP meeting;
Title 17 CCR Section 52102(h)
- Makes arrangements for evaluators or assessors who are unable to attend an initial or annual IFSP meeting to be involved through conference call, having a knowledgeable representative attend, or making pertinent records available;
Title 17 CCR Section 52104(e)
- Ensures that the multidisciplinary team, including the parent, determines the eligibility of an infant or toddler;
Title 17 CCR Section 52082(a)
- Determines if the multidisciplinary team agrees that existing evaluation materials adequately describe the child's current level of development and service needs.
Title 17 CCR Section 52084(b)

Remember...

Multidisciplinary teams shall not presume or determine eligibility for any other state or local government program or service.

Title 17 CCR Section 52082(i)

QUALITY PRACTICES

By definition, the multidisciplinary team includes practitioners from multiple disciplines and the family. As the Early Start service coordinator, your role is not just to participate as a multidisciplinary team member, but also to take the lead in coordinating and facilitating the participation of all the multidisciplinary team members. The quality of the relationships and interactions among team members affects the success of the multidisciplinary team. These practices are adapted from several sources.¹

To facilitate relationships of respect, trust, confidentiality, and cooperation with families and colleagues across disciplines and agencies, Early Start service coordinators:

- Facilitate systematic and regular exchange of expertise, knowledge, and information among multidisciplinary team members to build team capacity and jointly solve problems, plan, and implement interventions.
 - Schedule all meetings pertinent to the family and child at times and locations convenient for the family.
 - With the parent(s), identify the meeting date, time, place, and participants.
 - Clearly state the purpose of the communication interaction (for example, give information, raise awareness, discuss options, and reach a decision).
 - Choose the communication medium most appropriate to the purpose of the communication (email, text, memo, document, one-on-one, group meeting).
 - Set ground rules for asking and answering questions and making comments, including how questions and comments may be raised and who will address questions and comments.
 - Summarize discussions and decisions and articulate follow-up actions for all participants.
 - Solicit input and ideas prior to meetings, especially from the family.
- Use communication and group facilitation strategies to enhance multidisciplinary team functioning and interpersonal relationships with and among team members.
 - Emphasize the family's role as an equal member of the multidisciplinary team.

- Encourage dialogue, discussion, and creative problem-solving for decision-making.
 - Use clear, concise, jargon-free language that all team members can understand.
 - Be polite, open, and professional in tone.
 - Use active reflective listening to ensure understanding (for example, open-ended questions, paraphrasing, clarifying statements).
 - Offer support, guidance, and feedback that are honest, respectful, and supportive.
 - Help the family decide how they want to participate and give concrete descriptions of the various ways they might participate using other families' scenarios as examples.
- Assist the multidisciplinary team to discover and access community-based services and other informal and formal resources to meet family-identified child or family needs.
 - Encourage the family to talk with multidisciplinary team members about the help that they or their child may need.
 - Work with the family and other multidisciplinary team members to understand the family's past experience with service systems and any preconceptions or anxieties they may have toward certain services.
 - Facilitate the multidisciplinary team to identify and explain eligibility requirements, obtain and assist with application forms, or make referrals to help the family negotiate access to needed services.
 - With the family and other multidisciplinary team members, identify one practitioner from the team who serves as the primary liaison among the family and other team members based on child and family priorities and needs.
 - Facilitate the development of shared outcomes that may be addressed by the multidisciplinary team through a core provider.

TIPS FOR SUCCESS

The strategies offered below include practical suggestions for preparing for and facilitating multidisciplinary team meetings and accomplishing tasks that facilitate the quality practices described in the previous section.

- Put together and share contact lists for individual multidisciplinary teams to encourage members to contact one another.
- Before IFSP and other multidisciplinary team meetings:
 - Send invitations to team members in a timely manner. Use the Sample Invitation Message provided in the Resources section at the end of this chapter as a template for a written invitation to team members.
 - Remind team members, including interpreters, of upcoming meetings one or two days prior to the meeting.
 - Ask team members who cannot attend to provide their input in writing prior to the meeting so that it can be shared.
 - Arrange conference calling, if appropriate, for participation of team members who cannot attend in person.
 - Suggest that community professionals and vendors include information in their reports on how to best integrate their services into the “whole” intervention picture.
- At IFSP and other multidisciplinary team meetings:
 - Introduce each team member and explain their role on the multidisciplinary team.
 - Facilitate the group to establish and observe ground rules for listening, collaboration, and decision-making.
 - Recognize and state that outcomes and intervention strategies are team decisions.
 - Ask the team, “What would it take for us to integrate services in order to achieve the same goals?”
 - Ask interventionists to share techniques that support intervention strategies that are integrated at home and in other natural service settings.
 - Explore the possibility that interventionists provide services at the same time or in the same setting for the convenience of the child and the family.

- Suggest that service providers observe each other in different intervention environments.
- Remind multidisciplinary team members to avoid the use of technical jargon; identify and explain technical terms that are used that may not be familiar to all. Promote to the multidisciplinary team the perception of the child as a whole (that is, not focusing on only one or two aspects of development in isolation) and always as a member of a family. See *Supporting the Family to Be Active Members of the Multidisciplinary Team* in the Resources section at the end of this chapter.
- Review assessment reports and professional field notes periodically. Make notes about opportunities for addressing multiple outcomes in the family's natural environments and share them with team members and the core service provider.
- Participate in training on the multidisciplinary team process, such as that offered through the Early Start Comprehensive System of Personnel Development. The Early Start Foundations online course *Partnering for Effective Service Delivery* approaches the implementation of Early Start services from a multidisciplinary perspective. Encourage other team members to participate as well.
- Share newsletters and journal articles and ask other multidisciplinary team members to do the same. *Infants and Young Children* and *Zero to Three* are both highly respected publications with interdisciplinary perspectives.

RESOURCES

Sample Invitation Message	15
Supporting the Family to Be Active Members of the Multidisciplinary Team	17

Notes:

Sample Invitation Message

Good morning, *(insert name of invited team member here)*,

The *(type of meeting)* meeting for *(name of child)* has been scheduled for *(date)* at *(time)*. We will meet at *(meeting room/location)*.

At *(name of child)*'s parent's request, you are being invited to participate in the meeting, along with:

(List other team members and their agencies/roles)

The goal of this meeting is *(describe the goal of the meeting)*. You are being invited as *(describe the invitee's role at this meeting)*. Your participation is important because *(describe why the parent would like the invitee to attend or the programmatic reason that the person is being invited)*. The date and time of the meeting have been scheduled because they are convenient for *(name of child)*'s family. If you cannot attend, please identify a representative who may attend in your place. Alternatively, arrangements may be made to support your participation by phone or web conferencing.

Prior to the meeting, please be sure to: *(include all that apply)*

- Review the documents included with this message.
- Prepare multiple copies of your reports so that everyone at the meeting can follow along.

As *(name of child)*'s service coordinator and the facilitator for this meeting, I invite you to contact me by phone or email if you cannot attend the meeting or have any questions or concerns prior to the meeting.

We look forward to a collaborative team meeting.

Sincerely,

(Your name, Your email, your phone number)

In order to protect the family's right to privacy, prior to sending invitations by email, ensure that email transmissions are secure. See Chapter 2 for further discussion of confidentiality.

Supporting the Family to Be Active Members of the Multidisciplinary Team

As the Early Start service coordinator, you have the opportunity to set the stage for a positive, collaborative team experience for the families with whom you work. This early experience will prepare the family to be effective advocates for their child in the future as they traverse other service systems, whether or not they continue to need services from the regional center or special education systems.

To assist parents to be fully active members of the multidisciplinary team:

- Review assessment information and other information that will be shared about the child and family with the parents and other family members that the parents would like to have on the team. Encourage them to ask questions and let them know that you will do your best to answer their questions or find answers for them.
- Review the parents' rights with the family and give them adequate opportunity to ask questions about those rights.
- Plan with the family how they want to handle areas of conflict or disagreement that they might have with any part of the plan or with a service provider. Encourage them to write down information that expresses their concerns and to generate alternatives to address those concerns.
- Ask them who they would like to invite to participate in the meeting. Invitees should have special knowledge or expertise about or importance to the child and family.
- Connect them with the Early Start family resource center (FRC) for information, support, and education from other experienced parents.
- Encourage the family to prepare a profile of their child to share with the other members of the multidisciplinary team. The FRC or infant development program may have a template for helping parents prepare a profile that can be copied and shared with other team members. Or you may want to create a template yourself. A child profile may include the following questions:

Who is _____? (Describe your child, including such information as place in the family, personality, likes and dislikes. Include a picture of your child if you can.)

What are _____'s strengths? (Highlight all areas where your child does well, including home, community, and social settings.)

What are _____'s successes? (List all successes, no matter how small.)

What are _____'s greatest challenges? (List the areas where your child has the greatest difficulties.)

What are _____'s needs? (List the skills you would like your child to develop and the supports he or she needs and you need to support him or her.)

What are your dreams for _____? (Describe your family's vision for your child's future, including both the immediate and distant future.)

Other helpful information. (List all relevant information, including health care needs, that has not already been described.)

Adapted from Rebhorn, T. (2017). Developing your child's IEP. Retrieved from <http://www.parentcenterhub.org/pa12/#ref70>

Notes:

ENDNOTES

¹The information presented in the Quality Practices section was adapted from the following sources:

California Department of Developmental Services. (2005). *Early Start service coordinator's handbook*. Sacramento: WestEd.

DEC recommended practices teaming and collaborative checklists. (2017). Retrieved from <http://ectacenter.org/decrp/type-checklists.asp>.

Division for Early Childhood. (2014). *DEC recommended practices in early intervention/early childhood special education 2014*. Retrieved from <http://www.dec-sped.org/recommendedpractices>.

Qualified Personnel Committee of the California Interagency Coordinating Council on Early Intervention, California Early Start Personnel Manual Workgroup, & California Early Start Personnel Manual Stakeholder Group. (2010). *ICC-recommended Early Start personnel manual*. Sacramento: WestEd.

Strengthening Families Protective Factors Concrete Support in Times of Need: Action Sheet (2017). Retrieved from <https://cssp.org/resource/protectivefactorsactionsheets>.

PUBLISHING INFORMATION

Early Start Service Coordination Handbook was developed by the California Department of Developmental Services (DDS), through a contract with WestEd.

For information about California Early Start, contact DDS at 800.515.BABY, visit www.dds.ca.gov/services/early-start, or email earlystart@dds.ca.gov.

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