





Multidisciplinary Assessment Team
(MAT)

OBJECTIVES

- To learn about the Multidisciplinary Assessment Team.
- To gain additional insight on underlying needs.
- To develop a basic understanding of the SOF report.

Integrated Core Practice Model



What is a Multidisciplinary Assessment Team?

- Collaboration between DCFS, DMH, and Community Mental Health Providers.
- Newly detained children, removed from both parents with Full Scope MediCal.
- Comprehensive assessment of a child's status (strengths, trauma exposure, mental health, developmental, physical health, education), family's strengths and needs in caring for the child, and family's natural and community supports.
- Findings are incorporated into the MAT Summary of Findings (SOF) report, and DCFS case plan in addition to going to court and the mental health service provider.

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What is a Child and Family Team?

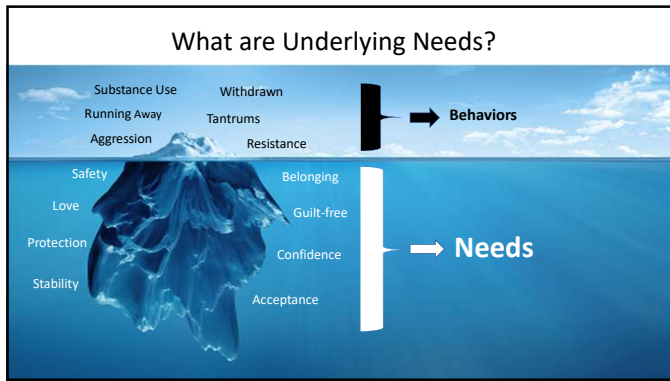
- Child and Family team includes the child and family along with professionals, community supports, and natural supports selected by the child and family.
- Child and Family Team Meeting allows the child, family and team members to share strengths, worries, underlying needs and create an action plan to help meet needs.
- Utilizes a strengths-based approach to help meet child and family goals and underlying needs.
- Respects the voice and choice of the child and family.

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Role of the MAT assessor

- Provides a clinical, trauma- and developmentally-informed lens to understand the strengths, underlying needs, and goals of the child and family throughout the process of dependency investigation and case planning.
- Helps the child/youth, family, and other team members understand the impact trauma has on the child/youth and family.
- Develops MAT SOF report and directly communicates findings often within a multi-agency meeting.

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Needs vs. Services	
▪ Natalie is failing all of her classes. She needs an IEP and tutoring.	▪ SERVICE
▪ Amanda is aggressive and constantly yells and fights with her siblings. She needs counseling.	▪ SERVICE
▪ Lily is very isolated from her classmates. She needs to have a sense of acceptance and belonging.	▪ NEED
▪ Giovanni cries when his mother doesn't visit him. He needs to know he is loved by his mother.	▪ NEED

MAT REPORT	
• Increase communication of findings throughout the MAT/CFT process and in the context of the meeting.	
• Focus on delivering actionable information early in the process.	
• Informs the discussion and helps the team focus on strengths and underlying needs.	

* The MAT Summary of Findings is a result of the collaboration of the family (when possible), the CSW, and the DCHS Provider at the MAT Team Meeting. A complete listing of services in consultation can be found on the frontpage of this report.

CASE AND CHILD INFORMATION			
Safety Reason for DCF's Involvement: General Neglect		Removal Date: 02/17/2021	
Language: English		MAT Referral Date: 03/01/2021	
Ethnicity: White		MAT Acceptance Date: 03/01/2021	
MAT Child's Full Name		DOB	Age
1. Camille Beauchamp	10/11/2018	2 years, 6 months	
2.			
3.			
4.			
Are the child and his/her siblings currently placed together? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
DCFS MAT Coordinator: Jackie Hopeworth CSW: Alissa Madison CSW Phone: 818-714-4063			

MAT PROVIDER AGENCY REPORT INFORMATION			
MAT Provider Agency: The HELP Alliance		Agency's telephone #: 818-383-7355	
MAT Assessment Name: Virginia Woolf, LMFT		Assessor Telephone #: 818-383-7441	
MAT ROF Team Meeting Date: 04/20/2021		Final ROF Report Completed Date: 04/20/2021	

CHILD AND FAMILY TEAM			
PROFESSIONALS/CONSULTANTS:			
<input checked="" type="checkbox"/> CSW	<input checked="" type="checkbox"/> DI	<input type="checkbox"/> ESW	<input type="checkbox"/> Therapist
<input type="checkbox"/> Medical Provider	<input checked="" type="checkbox"/> Other	<input type="checkbox"/> Teacher	<input type="checkbox"/> Public Health Nurse
FAMILY MEMBERS AND SUPPORTS:			
Who Was Interviewed and Dates:			
Camille Beauchamp, child, was assessed on 03/18/2021, 03/19/2021, and 04/18/2021			
Aunt Beauchamp, Paternal Grandmother and Caregiver was interviewed on 03/18/2021, 03/19/2021			
Aunt Beauchamp, Mother, was interviewed on 03/18/2021, 03/19/2021, 03/24/2021			
Henry Beauchamp, Father, was interviewed on 03/19/2021 and 03/24/2021 at Family Engagement			
Wells Dallas, MAT Facilitator, was interviewed on 03/17/2021 at Staff Engagement			
Alissa Madison, CSW, was interviewed on 03/17/2021 at Staff Engagement and 03/24/2021			
Melissa Jones, DI CSW, was interviewed on 03/17/2021 at Staff Engagement			
Henrietta Filimich, DI CSW, was interviewed on 03/17/2021 at Staff Engagement			
Who Was Not Interviewed and Why: N/A			

CHILD ASSESSMENT SUMMARY
Strengths of This Child:
<ul style="list-style-type: none"> Parents reported Camille is "the smartest toddler...she talks a lot and she picks up on everything". Parents report Camille is affectionate, she gives hugs and kisses. Parents reported Camille is "silly" and has "a funny personality". Caregiver reported Camille is an intelligent, sweet, and caring girl. Assessor observed Camille to be bonded to Parents and Caregiver. Assessor observed Camille enjoying reading books with her Mother and Caregiver. Assessor observed Camille to verbalize her needs in clear sentences.
Trauma Exposure:
<ul style="list-style-type: none"> Camille was removed from her parent's care due to allegations of General Neglect by her parents on 02/17/2021, due to exposure to Father's substance use and domestic violence between Mother and Paternal Aunt. Parents reported Father did not use substances in Camille's presence. Mothers reported Camille was not present during the physical altercation between Mother and Paternal Aunt as Camille was with Caregiver in another room. Camille was separated from her parents and placed in foster care.
Mental Health History, Current Symptoms and Behaviors:
<ul style="list-style-type: none"> Camille does not have any prior mental health treatment. Per Caregiver, Camille is able to drink from a cup and eat with a fork and spoon. Per Caregiver, Camille continues to take a bottle for soothing purposes. Per Caregiver, Camille has a healthy appetite as she is able to eat a variety of foods such as chicken, salmon, carrots, fruits and veggies. Caregiver and Mother explained that Camille is able to ask for food when she is hungry. Caregiver reported Camille had difficulty falling asleep and crying asleep at the beginning of the detention. Caregiver explained Camille is able to take daily afternoon naps for lasting about 1 hour. Caregiver and Mother explained Camille is able to calm herself down when she is upset and cries for about 1-3 minutes. Caregiver and Mother reported Camille is toilet trained and only uses a pull-up at night. Parents reported that Camille is able to show a range of emotions, such as when she is happy she smiles and laughs, and when she is upset she will frown and fidget her arms. Parents and Caregiver describe Camille's personality as happy, curious, silly and easy-going. Assessor explained Camille enjoys being around her family. Caregiver reported that Camille will ask to call Mom and Dad when she misses them or is thinking about them.

CHILD ASSESSMENT SUMMARY
<ul style="list-style-type: none"> Parents reported Camille asks to come home with them at the end of visits. Parents reported at times Camille is sad and cries when saying good-bye to her parents at the end of visits. Parents and Caregiver reported Camille has been clingy towards them since the detention. Assessor observed Camille to be shy when greeting Assessor and needed prompts by her Mother and Caregiver. Assessor observed Camille playing with toys and looking pictures in books. Assessor observed Camille's ability to follow directives by her Mother and Caregiver during the Assessment such as "come here" and "draw on the paper."
Recommendations: Camille has been significantly affected by the traumatic exposure to family violence, as well as by the separation from her parents due to the CPS involvement. Camille would benefit from continued support and services to help her process her trauma, her distress and sadness, and by strengthening her secure attachment to parents and caregivers.
Assessor Developmental Functioning: (Communication, Problem Solving, Self-Help, Problem Solving, Fine Motor, Gross Motor, Social Interaction, Relationships, Resilience for Independence)
At the time of this assessment, assessor utilized Ages and Stages Developmental Screening Questionnaire (ASQ-3), 30 months form as well as the Ages and Stages Social Emotional Screening Questionnaire (ASQ-SE-2), 30 months form to obtain the following results: 03/24/2021
Strengths: Camille has reached all of her age-appropriate developmental milestones. She is thriving in her abilities in Communication, Gross Motor, Fine Motor, and Problem Solving, and Personal-Social skills.
<ul style="list-style-type: none"> Communication: <ul style="list-style-type: none"> Camille is able to make sentences that are at least three to four words long. When Caregiver points to a picture of a ball (kitty, cup, hat, etc.) and asks Camille "What is that?" Camille is able to correctly name at least one picture. Gross Motor: <ul style="list-style-type: none"> Camille is able to jump with both feet leaving the floor at the same time. Fine Motor: <ul style="list-style-type: none"> Camille is able to string small items such as beads, macaroni, or pasta "stringing wheels" onto a string or shoelace. Camille is able to turn pages in a book one page at a time. Problem Solving/Cognitive: <ul style="list-style-type: none"> Camille is able to find a chair or stool to stand on when she can reach something she wants.

CHILD ASSESSMENT SUMMARY

When looking in the mirror, Camille is able to point and identify her legs in the mirror when asked "Where is Camille?"

- Personal-Social:
 - Camille is able to spoon feed herself without spilling.
 - Camille is able to completely dress in several articles of clothing such as shirt, pants, and underwear by herself.

Although scores on ASQ-SE did not indicate urgent concerns about Social-Emotional difficulties, Camille's exposure to the trauma she has experienced poses a risk to her ongoing emotional, behavioral, and developmental functioning.

Recommendations: Camille is not in need of supplemental developmental support services at this time.

Physical Health

- Mother reported she received regular prenatal care throughout her pregnancy.
- Mother reported Camille was born full term at 9 months and was delivered via natural birth at Happy Valley Hospital.
- Mother reported at birth Camille weighed 8 lbs, 10 oz, and measured 18 1/2 in. long.
- Mother reported Camille's immunizations are not up to date due to Camille's skin sensitivity as her legs eczematized after earlier immunizations. Per Mother, she was instructed by PCP to spread out future vaccinations.
- Camille's H1H1 Exam was completed on 10/17/2021 by Peter Castanheira, MD at time this Gabriel Valley Medical H1H1 Physical Exam Results: Age: 2 (Yrs.) 5 (Mos.) 6 (Wks.) Height: 34.00" (29) Weight: 22 lbs. 4.10 oz. (34) BMI: 15.5 (95%).
- Per H1H1 report, Camille is underweight. "Caregiver reports child is a good eater, eats 4-5 meals a day. Mother is very petite and thin. Dad is tall and thin. Caregiver has no concerns. Caregiver to follow up with Primary Medical Doctor for Hemoglobin and lead testing and monitoring future weight changes."

Recommendations: It is recommended Camille continue to attend her all well child exams and complete immunizations per instructions of her primary care doctor. Camille needs to have a dental evaluation every 6 months. Camille will benefit a referral from Women, Infants, and Children (WIC) in order to access nutritional counseling, and monitor her health and weight.

Education/Daycare:

Camille does not attend a daycare, she is cared for full-time by her Caregiver.

Recommendations: Camille will benefit from Early Head Start services to facilitate her exposure to developmental stimulating activities.

Observation of Child Interactions with Family (as observed by Assessor):**CHILD ASSESSMENT SUMMARY**

On 03/19/2021, Assessor observed a visit between Camille, and Parents via telehealth platform. The visit was monitored by Caregiver, Annie Beauchamp. Also present at the visitation was Paternal Great-Grandmother and Camille's cousin, Rene (age 4). Parents were affectionate with Camille and cousin and greeted them with a hug and a kiss on the cheek. Camille was receptive to her parent's affection. The family was observed having a family dinner at the park. The family was engaged in conversation during dinner and parents were observed to help Camille eat her dinner by feeding her and prompting her to eat on her own as well. The family transitioned to playing on the apparatus at the playground when dinner was finished. Parents were observed actively playing with Camille and her cousin on the playground. Parents and Camille were observed climbing ladders and stairs, sliding down slides, and taking turns pushing each other on the swings. Family was observed playing pretend and being in a restaurant. Camille was observed laughing and smiling when playing with her family. Camille was observed having a joyful affect when being carried on her Father's shoulders. Assessor observed Camille's mood shifted and had a sad affect when parents told her it was almost time to end the visit. Parents were seen walking Camille to her Caregiver's car while consoling her. Mother buckled Camille into the car seat with child restraints and parents said goodbye to her. Mother and Camille appeared to be crying when the car door closed. Caregiver reported Camille is able to calm down within a few minutes as she tries to distract her and console her. Caregiver reported at times Camille has difficulty when saying goodbye to her Parents but has adjusted over time.

CHILD NEEDS AND SERVICES RECOMMENDED

- NEED #1:** Camille needs services to help her coping, and regulate her emotions and distress.
- NEED #2:** Camille needs consistent, reliable caregivers and a stable living environment to develop her capacity to feel trusting and secure.
- NEED #3:** Camille needs to participate in activities with peers that are fun and will promote socialization skills.
- NEED #4:** Camille needs to achieve optimal physical health as she can grow and thrive.

HOW CAN TEAM MEMBERS HELP MEET THESE NEEDS? (Including time frame)

Child	<ul style="list-style-type: none"> • Camille will benefit from age-appropriate therapy to work through her separation distress. • Camille will benefit from participating in age-appropriate activities with peers to promote social development. • Camille will benefit from follow up visits with her pediatrician and specialists to monitor her health. • Camille will benefit from Women, Infants, and Children (WIC) in order to access nutritional counseling, and monitor her health and weight.
Parent	<ul style="list-style-type: none"> • Mother will benefit from continuing parenting classes. • Mother will benefit from continuing individual therapy. • Father will benefit from continuing parenting classes. • Father will benefit from continuing individual therapy. • Father will benefit from continuing his treatment program.
Current Caregiver	<ul style="list-style-type: none"> • Caregiver will provide an emotionally safe place for Camille. • Caregiver will make sure Camille is present for all of her necessary appointments including therapy. • Caregiver will follow up with medical services. • Caregiver will facilitate age-appropriate extracurricular activities for Camille. • Caregiver will facilitate Early Head Start. • Caregiver will facilitate Women, Infants, and Children (WIC).
DCFS	<ul style="list-style-type: none"> • DCDF will continue to monitor case plan and ensure all services are completed.
Mental Health	<ul style="list-style-type: none"> • MAF Assessor educated Camille's Caregiver and mother about the effects of trauma and separation. • MAF Assessor will link Camille to mental health services. • As reunification proceeds, and at discretion of Camille's therapist, the family might benefit from a dyadic mental health treatment such as Child-Parent Psychotherapy (CPP) to enhance attachment/bonding and promote healing from trauma.
Family Supports	<ul style="list-style-type: none"> • Camille benefits from consistent contact with her relatives.
Other	<ul style="list-style-type: none"> •

CHILD REFERRALS		
Referral #1:		
Pacific Clinics	1460 N Lake Ave Suite 101, Pasadena, CA 91107	(626) 296-7710
Description/Linkage Status: To be provided with age-appropriate individual mental health services.		
Referral #2:		
Pacific Clinics Head Start & Early Start	2500 E Foothill Blvd. Suite 403 Pasadena, CA 91107	(818) 949-0019
Description/Linkage Status: Access to books and age appropriate extracurricular activities.		
Referral #3:		
Women, Infants, and Children (WIC)		(888) 942-2229
Description/Linkage Status: Food, nutrition counseling, and access to health services are provided to low-income women, infants, and children.		

CURRENT CAREGIVER/PLACEMENT INFORMATION		
Current Caregiver's Full Name: Annie Beauchamp Telephone #: (626) 710-0298		
Caregiver Type: Paternal Grandmother	FFA SW (if applicable): N/A	
Caregiver for: Camille Beauchamp	FFA (if applicable):	Telephone #:
Strengths/Concerns of Current Caregiver in Ability to Meet Child's Needs: Annie Beauchamp is the Caregiver and Paternal Grandmother for Camille Beauchamp. Annie was cordial, polite, and respectful, as well as accommodated assessor's visits in a timely manner. Annie presented with an overall happy mood/affect. She made eye contact at all times, and provided all information to assessor to complete the MAT assessment. Annie reported having a good support system, comprised of her extended family, and friends. Annie was observed to tend to Camille's needs in a timely manner. Camille was observed to have a loving, playful, and affectionate relationship with Annie. Annie was observed to speak to Camille with a soft and excited tone of voice. Camille was observed providing Camille with options in order to foster her independence. Camille appeared to be comfortable and content with Annie. Annie appeared capable of adapting well to having Camille in her care and made arrangements to meet her needs.		
Does the MAT team believe the current placement is able to meet the child's needs? Yes If no, what alternate placement is considered by the MAT team?		
NOTE: 1) This is a non-binding recommendation, as DCFN, and not the MAT team, is responsible for the final placement recommendation to the court. 2) If the MAT team cannot agree on a recommendation, then no recommendation need be made in this report.		
Identified Alternate Caregiver Name: Relation to Child: Location/City: Telephone #: Identified by:		
Identified Alternate Caregiver Name: Relation to Child: Location/City: Telephone #: Identified by:		

Final Comments or Observations (may be from Summary of Findings Meeting, pending moves, other new information):

