Our Mission
The mission of the San Francisco Elder Abuse Forensic Center is to prevent and combat the abuse, neglect and exploitation of elders and dependent adults in San Francisco. To accomplish our mission, we use the following strategies:

- Improve communication and coordination among the legal, medical, social services professionals who investigate and intervene in cases of elder and dependent adult abuse.
- Increase access to potential remedies and justice for those who have been victimized.
- Educate policy makers, professionals, caregivers, older adults and their families about preventing, reporting and stopping elder and dependent adult abuse.

Who
Public/Private partnership between the non-profit Institute on Aging and the following City and County of San Francisco Agencies: Department of Aging and Adult Services (Adult Protective Services and the Public Guardian), District Attorney’s Office, City Attorney’s Office, Police Department, and San Francisco General Hospital.

Services
- Forensic Review Meetings – Formal case consultation by our multi-disciplinary team of professionals
- Medical Evaluations – Physician gives input on medical/mental status at the request of the team
- Psychological/Neuropsychological Assessments – Geropsychologist conducts at request of the team
- Collaboration with community partners and city agencies on elder abuse public awareness campaigns and education to professionals

Accomplishments
- The team reviewed 53 complex cases of elder and dependent adult abuse in FY17-18
- The team neuropsychologist conducted 12 psychological evaluations in FY 17-18
- Strengthened understanding and collaboration between partner agencies
- Worked with partner agencies to improve cross-reporting protocol between police and APS

How to Contact
- For more information, or to present a case, contact Glen Fishman, Senior Program Coordinator, Elder Abuse Prevention Program, Institute on Aging: (415) 750-4187 / gfishman@ioaging.org
Creating an Elder Abuse MDT

Talitha Guinn-Shaver, MDT Technical Advisor
AGENDA

• About the EJI and the MDT TAC

• Starting an MDT in your Community
  ➢ Important things to consider

• The Benefits of Elder Abuse Case Review MDTs
WHAT IS YOUR PROFESSIONAL BACKGROUND?

- Administrative
- Financial
- Law Enforcement
- Legal
- Medical
- Mental Health Services
- Research
- Social Work
- Victim Services
- Other (please specify)
ELDER JUSTICE INITIATIVE

The **mission** is to support and coordinate the Department of Justice’s enforcement and programmatic efforts to combat elder abuse, neglect, and financial fraud and scams that target older adults.

The Initiative does so by—

- Promoting justice for older adults.
- Helping older victims and their families.
- Enhancing state and local efforts through training and resources.
- Supporting research to improve elder abuse policy and practice.
Elder justice is a complex issue that intersects with many disciplines.

Elder abuse can happen to anyone. It affects people of every ethnic background, gender, and financial status.
ABOUT THE MDT TAC

Our mission is to provide tools, resources, and individualized consultations to facilitate the expansion of elder abuse case review multidisciplinary teams across the nation.
SERVICES

• Responding to requests for materials (e.g., toolkits or research)

• Phone consultations to discuss problem solving (e.g., confidentiality issues)

• In-person consultations for communities needing a more hands-on approach

• Educational opportunities such as webinars

• MDT Guide and Toolkit
MULTIDISCIPLINARY TEAMS

MDT technical assistance at your fingertips

The Multidisciplinary Team Technical Assistance Center (MDT TAC) has chosen to focus on elder abuse case review MDTs due to their direct impact on the lives of abuse victims. Case review MDTs work collaboratively to investigate and prosecute cases, and to ensure victims receive the services they need to recover from abuse. Through regular, face-to-face meetings MDT case review teams discuss cases, share information, and develop a plan for moving each case forward.

About the MDT TAC
Learn more about the mission, services, and resources available through the MDT TAC

MDT Guide and Toolkit
Start or grow a local elder abuse case review MDT with this research and resource rich toolkit

MDT Announcements
Keep up with MDT TAC activities by looking for new announcements here!
Chapters & Toolkit Items

How to Use this Guide
Understanding the purpose and design of this guide
- Glossary
- How to Use this Guide (with Citations)

1: Introduction to Multidisciplinary Teams
Understanding MDT models, including the need for and benefits of MDTs.
- Chapter 1 (with Citations)

2: Meeting the Needs of your Community
Crafting a needs assessment, choosing an MDT model, and defining your purpose
- Additional Foundational Activities
- Additional MDT Activities
- Needs Assessment Planner
- Needs Assessment Worksheet
- Statement of Need Planner
- Statement of Need Worksheet
- Chapter 2 (with Citations)

3: Selecting Team Members
Choosing and recruiting members for your team
- Member Roles and Contributions
- Sample: Recruitment Invitation - Denver
- Sample: Member Roles and Responsibilities - Lifespan
- Chapter 3 (with Citations)
HOW TO USE THIS GUIDE

Menu

- Chapters

Toolkit Items

- Glossary
- How to Use this Guide (with Citations)

How to Use this Guide

The goal of this guide is to encourage and facilitate the development and growth of elder abuse case review Multidisciplinary Teams (MDTs). In this guide, you will find information about MDT structures and functions, along with common issues with which a team will need to grapple in developing a case review MDT. There is no one way to create or maintain a MDT. Therefore, this guide offers a variety of ideas, sample materials, resources, and tools intended to guide the development and sustainability of an MDT.

Any community can start an MDT. The form and function of your MDT will depend on the community in which it is developed. It may at times be frustrating as you face obstacles in your community. This guide can assist you in anticipating and planning for challenges and applying the knowledge and experiences of other MDTs to the development of your team.

Currently, the elder abuse MDT approach has received little empirical evaluation, although there are exceptions. However, there are no published studies that provide clear direction on how to create and maintain high-functioning MDTs in any discipline, although work in this direction is burgeoning. Therefore, this guide draws heavily upon MDTs in other disciplines (child abuse, education, business, medicine).

This is a living document designed to be updated with new information, research, and Toolkit items as they become available. When new material is added, we intend to notify our colleagues of changes, as we can, through email blasts. Check back to our webpage often to view and download the latest materials. You may also sign up to be on our MDT TAC distribution list, by emailing Talitha Guinn-Shaver, MDT Technical Advisor at talitha.j.guinn-shaver@usdoj.gov.
2: MEETING THE NEEDS OF YOUR COMMUNITY

Needs Assessment, Organizational Structure, Affiliation, and Purpose

In laying the foundation for developing an MDT, many communities initially undertake a needs assessment. In addition, your community will want to consider the organizational structure of the MDT, the MDT's affiliation, and the purpose of the MDT. Many other decisions will flow from these three initial decisions.

Visit Existing MDT Models

Throughout this process, take field trips to visit other communities that utilize MDTs. It may be easier to find a nearby Child Advocacy Center that can model the MDT approach, as they are far more prevalent than elder abuse MDTs. Most Directors are willing to share their knowledge and experience with others. An added benefit is that Child Advocacy Centers vary in size and scope and you may find one that has comparable demographics to your own community. If you are unable to physically visit an MDT, most directors would be willing to talk with you on the phone.

Chapter 2: Summary

Conducting a needs assessment will provide your community with the evidence it needs to demonstrate to stakeholders that a need exists for an MDT. Other important decisions your community will need to make concern the organizational structure of the MDT, the organization with which the MDT is affiliated, and the primary purpose of the MDT. There are no right or wrong decisions; rather, they will depend on the needs of and resources within your community. These are important decisions, however, as all other decisions will flow from these three initial decisions. For more about foundational activities, see our Toolkit Item: Other Activities to Build the Foundation for an MDT.
STARTING A MULTIDISCIPLINARY TEAM IN YOUR COMMUNITY
Rooted in the biopsychosocial model, MDTs are defined as representatives from three or more disciplines who work collaboratively, bound by a common purpose.

MDTs have a shared goal and shared definition of the problem they are addressing.
COMMON MDTS SERVING OLDER ADULTS

- Elder fatality review teams
- Hoarding teams
- Mental illness teams
- Elder abuse teams
- Guardianship teams
- Financial abuse specialist teams
- Code enforcement teams
CHOSE A STRUCTURE

What type of team will work best for your community? What agencies and organizations should be involved in starting your team?

https://www.justice.gov/elderjustice/2-meeting-needs-your-community

(See Organizational Structure paragraph)
What is the purpose of your team? What do you hope to accomplish together? Having a clear mission and agreed upon goals early on in the process of developing your team will help to keep everyone on track, working toward the same outcomes and clear about how to measure success.

https://www.justice.gov/elderjustice/4-building-strong-foundation
RECRUIT PARTICIPANTS

- Be as collaborative and open to a wide variety of participants as possible. Think about who is needed to resolve elder abuse cases effectively and efficiently.

- Understand the needs of your community. Understand local systems issues and politics. Propose solutions to problems.

- Clearly communicate the benefits of collaboration – “What’s in it for me?”

- Identify influencers and leaders within organizations and build relationships.

- Empower others.

https://www.justice.gov/elderjustice/selecting-team-members
SETTING THE STAGE FOR SUCCESS

Shared Decision-Making
The entire team participates in the decision making process, sharing information, and sharing successes.

Partnership
MDTs are characterized by a formal Memorandum of Understanding (MOU) or an Interagency Agreement (IAA).

Interdependency
Group and individual outcomes are influenced by the team.

Balanced Power
All members of the MDT have equal input and prohibit a single member from dominating the group.

Process
The development and use of protocols to introduce predictability and accountability into the case review process, including protocols for conflict resolution.
**DEVELOP ORGANIZATIONAL RULES**

- Clearly understand and agree upon interpretations of your state laws and statues
  https://www.justice.gov/elderjustice/file/960791/download

- Identify someone to serve as the coordinator
  https://www.justice.gov/elderjustice/6-mdt-coordinator

- Create MOUs for participating agencies
  https://www.justice.gov/elderjustice/5-ethical-legal-considerations

- Write protocols

- Learn more about building a strong foundation here
  https://www.justice.gov/elderjustice/4-building-strong-foundation
The heart of your MDT is the case review meeting itself. Ensure that presenters have the support they need to bring their case to the meeting by providing clear information about intake policy and procedures, presentation guidelines and by providing emotional support as needed.

https://www.justice.gov/elderjustice/8-case-review
Create mechanisms to evaluate team performance and make adjustments as needed.

Managing an MDT requires ongoing commitment and resources.
• Build into the MDT protocols periodic and ongoing training, both formal and informal, particularly as new members arrive and protocols and policies change, and the political landscape shifts.

• Attend to your team’s cross-training needs https://www.justice.gov/elderjustice/7-professional-development

• EJI has many educational resources and webinars that may help your team https://www.justice.gov/elderjustice/webinars
# COMMON CORE MEMBERS

- Adult Protective Services (APS)
- Aging services network personnel
- Geriatricians/physicians
- Law enforcement
- Prosecutors (District Attorneys)
- Psychologists/neuropsychologists
- Victim-witness advocates/victim service providers
Multiple agencies and/or organizations review cases of elder abuse.

Each agency maintains their professional role while collaborating with multiple agencies – each agencies’ work complements the other and lends an important perspective to the work.

The burden of investigating and responding to complex cases of elder abuse is shared.

Better case outcomes are often noted for the client, the community and the participating agencies.
Conducting various evaluations in-home as a team lessens the burden of multiple interviews for the alleged abuse victims, while simultaneously gathering information on needed services for older victims as well as evidence for possible prosecution.

An MDT enhances the probability that no matter where victims enter the system, they have access to coordinated services.

As victims may receive concurrent services by many disciplines, coordination of these services may reduce the number of systems victims have to navigate.

Collaboration promotes greater awareness of available services, and improves access to and receipt of services for victims.
Coordination creates an integrated array of services tailored to the victim’s multifaceted needs that build upon the family’s strengths.

Collaboration produces creative solutions that no one agency could produce on its own.

Working as an MDT provides informal social support for victims, enhanced monitoring and follow-up beyond the crisis period, potentially reducing the recurrence of elder abuse.

Collaboration facilitates more effective and positive outcomes for clients. For example, if health care professionals need to spend time being social workers, then fewer medical needs may be attended to, but if someone else can do the social work, then health care professionals can focus on the medical needs of the client.
BENEFITS TO TEAM MEMBERS

- Responsibility for a case (ensuring safety, permanency, and well-being) is shared among the MDT members. This not only lends greater confidence to team members regarding case planning, but it may reduce liability risks due to the input of high-level agency representatives and qualified medical and legal consultants brought in when appropriate. Decisions regarding the client are better informed and reviewed prior to implementation.

- Every agency has legal and policy restrictions on their response to elder abuse that other agencies may be able to fill if the need is known.

- MDT members may back each other up, pointing out the importance of various MDT disciplines to victims.
BENEFITS TO TEAM MEMBERS

Through exposure to different disciplines, team members:

• Learn each other’s mandates and jargon
• Broaden and enrich their understanding of elder abuse
• Sharpen their professional skills to better manage and build cases

MDT members can access the pool of experts on the MDT to obtain assistance in resolving difficult cases.

• Learning how other professionals in the community handle similar situations can bolster MDT member’s confidence.

• MDTs can instill confidence that the case is being handled the best way possible by obtaining validation from other team members.
BENEFITS TO TEAM MEMBERS

- MDTs can enhance job satisfaction by promoting collegiality and motivation, while supporting one another by providing a safe place to vent frustration, relieve tension, and share feelings of helplessness.

- MDTs extend and leverage interagency resources in part by reducing the financial and staff burden on individual agencies.

- If one agency does not have the resources a victim needs, someone else on the MDT likely does.

- MDTs can identify service gaps and make system changes.

- MDTs improve the ability of agencies to share information and track families across agencies.

- Through group decision-making, fewer errors are made.
BENEFITS TO THE COMMUNITY

- Providing a forum for balancing the interests and perspectives of professionals from diverse disciplines, clients, and society.

- Enhancing relationships among public and private service providers.

- Creating community responsibility for victim safety.

- Strengthening families, which strengthens communities.

- Extending the reach of limited resources within a community.
CONTACT THE MDT TAC

For consultation referrals or to collaborate, contact:

Talitha Guinn-Shaver

202.598.0292

Talitha.j.guinn-shaver@usdoj.gov
Elder Abuse
MDTs:
Overcoming Challenges

Talitha Guinn-Shaver,
MDT Technical Advisor
AGENDA

• About the EJI and the MDT TAC
• Stages of team development
• Common roles and dynamics
• Exploring common barriers and solutions
• Principals of good collaboration
• Meeting facilitation tips
WHAT IS YOUR PROFESSIONAL BACKGROUND?

- Administrative
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- Legal
- Medical
- Mental Health Services
- Research
- Social Work
- Victim Services
- Other (please specify)
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- Responding to requests for materials (e.g., toolkits or research)
- Phone consultations to discuss problem solving (e.g., confidentiality issues)
- In-person consultations for communities needing a more hands-on approach
- Educational opportunities such as webinars
- Newly launched MDT Guide and Toolkit
TEAM WORK FUNDAMENTALS
STAGES OF TEAM DEVELOPMENT

1. Forming
2. Storming
3. Norming
4. Performing
GAMES PEOPLE PLAY – TEAM ROLES

• **Task roles** - refer to the actions of individuals that help move the project, decision, task along.

• **Maintenance roles** - refer to the actions of individuals that help preserve the relationships in a group.

• **Hindering roles** - refer to actions of individuals that hinder the group's process and progress.

https://web.stanford.edu/group/resed/resed/staffresources/RM/training/grouproles.html#hinder
HINDERING ROLES

- Dominating
- Withdrawing
- Degrading
- Uncooperative
- Side Conversations
OVERCOMING CHALLENGES
STEP ONE: IDENTIFY THE PRESENTING PROBLEM(S)

Common MDT Challenges include:

- Members not attending meetings
- Members not bringing cases for discussion
- Members bringing inappropriate cases for discussion
- Members attending meetings, but not participating in the work of the team
- Members “participating” in meetings, but acting in ways that hinder the team’s work and goals
- Members not following through with assigned tasks related to cases
WHERE DO PROBLEMS COME FROM?

- Logistical issues – Where, when, accessibility, etc.
- Structural issues – Framework, affiliation, purpose, leadership, roles
- Procedural issues – How you work together: Mission, MOUs, Intake, case flow, how you run meetings, etc.
- “Cultural” issues - an evolving set of collective beliefs, values, attitudes, behaviors, roles and dynamics
- “Political” issues – navigating power, authority, social networks, and influencers
LOGISTICAL ISSUES

Challenges can arise around:

- Meeting location
- Meeting time
- Parking/Accessibility
- Room set up/seating arrangements
- Timeframes
- Technology
  - Remote participation
  - PowerPoint presentations
Common Challenges

- Lack of articulated mission/goals of MDT
- No dedicated coordinator
- Leadership is lacking needed skills
- Team is lacking key players
- Person attending can’t make decisions for his/her agency
Common Challenges

- Misunderstanding or disagreement about policies and procedures
- Ineffective guidelines or rules that do not meet the needs of the team
- Case referral/intake process is complicated
- No Memorandum of Understanding with partnering agencies
“CULTURAL” ISSUES (SEE PAGE 1-2 OF CH.9 HANDOUT)

EVOLVING SET OF COLLECTIVE:

BELIEFS
VALUES
ATTITUDES
BEHAVIORS
ROLES
DYNAMICS

• Cultural issues could be related to
  • Team culture
  • Partner agency culture
  • Larger community culture

• Differences in professional language
• Differences in organizational culture
• Misunderstandings about philosophical frameworks of each other’s work
• Misunderstandings about the mandates and limitations of each other’s work
• Changes in population or community needs
Common Challenges

• Power imbalances among team members

• Difficult histories between agencies of team members

• Desire to use the MDT forum to serve one agency’s needs

• “Lip Service” – attend meetings so they can say they are doing something without taking an active role on the team
SCENARIO 1

Dear MDT TAC:

Our team began working together last year. Initially, it was difficult because we had trouble finding a location that was convenient for everyone. But, we finally did and people are attending the meeting regularly. However, now we are not getting enough cases and sometimes we have to cancel the meeting. We know the cases are out there. Can you help?

Sincerely,

Searching
SCENARIO 2

Dear MDT TAC:

Our team has been around forever. For the last year it seems that we are hanging on by a thread. I know that elder abuse is happening in our community, but we don’t seem to be making an impact and the team is on the brink of dissolution. What can we do to revitalize our team and meet the needs of our community in an impactful way? I fear we have run out of steam and I don’t know if I have it in me to keep trying to make this work.

Sincerely,
Frazzled
Dear MDT TAC:

I am a new facilitator for a long-standing team. Unfortunately, our team seems to work like a dysfunctional family. One of our most needed members attends but does not participate, pokes holes in solutions offered by the team (especially if they involve his agency doing anything) and generally makes everyone uncomfortable. How should I deal with this member and how can I improve the overall functioning of my team?

Sincerely,

Frustrated
PRINCIPALS OF GOOD COLLABORATION

Or “Everything You Need to Know You Learned in Kindergarten”

- Share and be a good friend
- Say Please and Thank you
- Play nicely/don’t be mean
- Clean up your own mess and say sorry.
- Don't take things that aren't your
TRUST IS LIKE CURRENCY THAT BUYS BETTER OUTCOMES

• The more you work together → the more trust you develop → the more you learn from each other → better case outcomes

• Working cases – more efficient and proficient
  • Case from the SF Elder Abuse Forensic Center – Western Union and teamwork
CULTIVATING TRUST

• Get to know each other personally
• Have strong, clear, and agreed upon collaboration documents (MOUs, etc.), so that everyone knows what to expect and contribute.
• Active listening – try to understand one another’s perspective, clarify when needed
• Address problems and conflict head-on and promptly.
• Hold one another accountable (kindly).
• Don’t blame – focus on solutions and supporting one another’s work.
• Work cases together (homevisits).
• Remember why you are here – your clients.
### MEETING FACILITATION TIPS

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<tr>
<th>Tip</th>
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<tbody>
<tr>
<td>Develop a meeting structure</td>
<td>Be mindful of everyone’s time and organizational limitations</td>
<td>Keep in mind “cultural differences” between professions</td>
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<tr>
<td>Communicate outside of the meeting</td>
<td>Spread the kudos</td>
<td>Have clear goals and a shared vision</td>
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<tr>
<td>Cultivate respectful communication</td>
<td>Ongoing training education and refinement of procedures</td>
<td>Provide opportunities for members to get to know each other</td>
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RESOURCES

MDT Guide and Toolkit

https://www.justice.gov/elderjustice/how-use-guide

Team Building Exercises for MDTs


Games People Play

https://web.stanford.edu/group/resed/resed/staffresources/RM/training/grouproles.html#hinder

Team stages from MIT

http://hrweb.mit.edu/learning-development/learning-topics/teams/articles/stages-development
CONTACT THE MDT TAC

For consultation referrals or to collaborate, contact:

Talitha Guinn-Shaver
202.598.0292
Talitha.j.guinn-shaver@usdoj.gov
QUESTIONS & SUGGESTIONS

can be emailed to

elder.justice@usdoj.gov
Elder Abuse Forensic Centers: The Who, The What, and The How to Start One
Panel Members

Candace Heisler, Heisler & Associates, Domestic & Elder Abuse Trainer & Consultant

Talitha Guinn-Shaver, Multidisciplinary Team (MDT) Technical Assistant, Elder Justice Initiative, U.S. Department of Justice

Nick Levenhagen, JD, Staff Attorney, Bet Tzedek Legal Services

Shawna Reeves, MSW, Director of Elder Abuse Prevention, Institute on Aging

Gloria Wong, MSW, Adult Protective Services, City and County of San Francisco
Who Is Here?

- APS
- Prosecutors
- Law Enforcement
- Civil Attorneys
- Health Care
- Mental Health
- Others
Who Is

• Part of an MDT of any type

• Part of a Forensic Center MDT

• Who is from a community thinking about starting a Forensic Center with an MDT?
Dr. Rosalie Wolf

“Multidisciplinary teams...are now a hallmark of elder abuse prevention programs.”
Overview of This Session

• Variety of MDT responses have developed—e.g., hospital based, community based, and more recently Forensic Center based.

• Focus on this workshop is on Forensic Centers
  • First in Orange County and now more in CA, TX, and NY.
  • Each operates an MDT but how those teams and the FC that operates the team vary widely.
Workshop Goals

• Highlight what distinguishes an FC from an MDT
• Identify the ingredients of a successful MDT
• Describe some barriers you may confront when starting or sustaining an FC
• Compare and contrast some aspects of FCs operating around the US
Differences Between a Community Based MDT and FC MDT

• Greater criminal justice participation
  – FC: involvement of particular experts, e.g., geriatrician, gero-psych, and forensic accountant
  – FC MDT members integrate services (e.g., coordinated home visits and cognitive assessments
  – FC MDTs develop specific action plans for each case. Members hold one another accountable for completing those plans.
  – The FC also may conduct education and training programs
Workshop

• Discuss aspects of developing and sustaining a FC MDT
  – Planning
  – Membership
  – Leadership
  – Barriers and Obstacles
  – Sustaining

• Q&A


