Meetings with Families

## **4 Types:**

1. **Initial Team Decision Making** **(TDM) Meeting**
2. **Family Team Meeting (FTM)**
3. **Family Preservation Initial Family Meeting (FP IFM)**
4. **Initial Family Meeting (IFM) for Out of Home Services**

## **Initial TDM Meeting Criteria (*DCF Facilitator*):**

**1. The behavior (action or inaction) of a parent(s)/primary caregiver(s)**

**2. Is threatening a child’s safety, and**

**3. DCF is considering separating the child from the parent(s)/ primary** **caregiver(s).**

* ***Please see PPM Appendices 0D-0M for Initial TDM Protocol, Guidance, & Referral Forms.***

## **A Family Team Meeting (FTM) is available when:**

**Practitioner has spoken with relevant family members, consulted with a supervisor, and concluded that there is NOT a caregiver action/inaction that is threatening the child’s safety; however, there are identified risk factors related to the child’s/family’s wellbeing that need to be lessened.**

**The Family, the practitioner, and the practitioner’s supervisor agree to bring everyone together as a team to determine what the best next steps are to increase the child’s/family’s wellbeing and functioning.**

 ****

Some examples that **\*may\*** indicate the need for a Family Meeting are listed below. However, just because it is listed *does not mean* that it automatically rules out holding a TDM related to the concerns. Critically thinking through TDM criteria and consultation with one’s supervisor should guide the determination of whether teaming is needed and if so, which type of teaming (Initial TDM or Family Team Meeting).

* Child with Behavior Problems (*suicidal, danger to self-and/or self-harming behaviors, out of control, sexually acting out, aggressive behaviors, criminal activities, or gang involvement)*
* Child is repeatedly running away
* Child is truant
* Child is refusing to come home
* Caregiver is refusing to allow child to come home
* Wanting to explore service options
* Helping a family to re-engage with services
* Addressing identified complicating factors
* Child may need out of home treatment (acute, PRTF, etc.)

## **Family Team Meetings can be Facilitated by:**

1. **Primary practitioner working with the family, or their supervisor**
2. **Neutral facilitator (***team member not directly working with the family***)**
3. **TDM Facilitator**
	1. **TDM Facilitators should be utilized sparingly, when there is a high need for neutrality in the family meeting.**
	2. **Initial TDM Meetings will take priority for TDM Facilitators.**

## **How Family Team Meetings are scheduled:**

* When the primary practitioner/supervisor/neutral team member is facilitating the meeting, a referral form is not needed.
	+ **The primary practitioner (***person calling the meeting***) is responsible for setting the date/time/location of it and inviting everyone to attend.**
* If an Initial TDM Facilitator is being requested to facilitate a Family Team Meeting, you will need to fill out and submit your region’s “Family Meeting Scheduling Form” to your region’s TDM scheduler.
	+ A region may choose to allow their scheduler to assist with meeting invitations; It’s at their discretion. If they are not going to assist, the primary practitioner is responsible for communicating the meeting details and inviting everyone to attend.

## **The Guide/Framework for facilitating Family Team Meetings includes:**

1. **The Facilitator of the Family Team Meeting shall map/chart the conversation using either:**
	1. PPS2019/3 Columns Mapping **OR**
	2. Family Meeting Mapping
2. **Any data collected on Family Team Meetings are *not* to be entered in the TDM database.**

## **Family Team Meeting Summaries**

1. The Facilitator of the Family Team Meeting shall **provide a copy** of the mapped conversation at the end of the meeting to all of those in attendance.
2. The Primary Practitioner should ensure a copy of the mapped conversation is included in the file/**uploaded to KIDS**.

## **Family Preservation Initial Family Meeting (IFM)**

The Family Preservation Initial Family Meeting (IFM) initiates the partnership between the family, DCF staff and service providers. This team shall share responsibility for ensuring the family receives services and supports required to maintain the child(ren) safely in the home and prevent future maltreatment.

**The purpose of the IFM is to discuss the reasons for the referral to Family Preservation Services, discuss the safety and/or risk concerns of all parties, including the family, and reach a consensus with the family.** The role of the CPS Specialist and the FPS providers shall be clarified with the family. A Family Preservation Initial Service Plan, with the goal of maintenance at home, shall be developed with the family. This plan outlines activities to be completed prior to the Family Case Plan using the PPS 3048.

* + ***Please see PPM 4215 & 3048 for additional meeting details and requirements.***
1. **Initial Family Meeting (IFM) for Out of Home Services**

The role of the Case Management Provider (CWCMP) is to facilitate the Initial Family Meeting (IFM). They organize, plan, and schedule the IFM in conjunction with DCF staff.  The CWCMP shall contact the family the same day as the referral to introduce themselves and to plan for the IFM.

It is during the IFM for Out of Home Services that the Foster Care Initial Service Plan (ISP) is completed. The purpose of the Foster Care ISP is for DCF to introduce the family to the Child Welfare Case Management Provider (CWCMP). The DCF CPS Specialist shall explain to the parent(s)/caregiver(s) what to expect in the next 30 to 45 days while they work with the CWCMP. The ISP shall include immediate next steps for reintegration to address the safety and risk factors. A visitation plan shall be included and coordinated with the CWCMP and parent(s)/caregiver(s).

* + ***Please see PPM 5220, 5223, 2751, & 3031 for additional meeting details and requirements.***