

CHILD & FAMILY TEAM MEETINGS

SUMMARY

Child and Family Team (CFT) meetings are a primary intervention in Safety Organized Practice. CFT meetings are the process of bringing together the family and their network for a specific purpose in order to develop a plan to address worries and next steps.

SOP AND CFT MEETINGS

- A foundational principle of Safety Organized Practice (SOP) is that teaming with a family and building their network are necessary, critical practices to ensure child safety, permanency and well-being.
- Another core principle of SOP is that the person who caused the harm or danger to the child cannot ensure child safety on their own until they have demonstrated acts of protection over a sufficient period of time; therefore, a network of other adults who care about the child is needed to help ensure safety.
- Child and Family Team (CFT) meetings — also known as CFTMs, Family Team Meetings, or SOP family meetings — are a process of bringing together the child/youth, parent(s) or other caregiver(s), and the family's network/team for a specific purpose in order to discuss what's working well, worries and next steps.

WHEN SOP CFT MEETINGS OCCUR

- A common misunderstanding is that SOP CFT meetings are specifically for the process of Safety Mapping; however, this is only one way in which an SOP CFT meeting can be used. Some ways and case decision points at which CFT meetings can be used include:
 - **Safety Mapping:** The process of working with a family and their network to develop Harm and Risk/Danger Statements, Safety Goals and next steps/plans to work toward achieving those goals.
 - **Emergency Removal:** Bringing together the family and their network after law enforcement has removed a child to determine if there is any way the child may be returned home safely.
 - **Imminent Risk of Removal:** Bringing together the family and their network when it appears removal may be necessary, in order to determine if there is any plan that can keep the child safe in the care of his/her parents.
 - **Safety Planning:** Developing a short-term plan to keep children safe in the care of their parents during an Emergency Response investigation; this may be part of an Emergency Removal or Immediate Risk of Removal CFT meeting.
 - **Case Planning:** Developing the family's case plan in a Voluntary or Court-Ordered Family Maintenance (FM) case, Family Reunification (FR) case, or Permanency Planning (PP) case.

SOP CFT MEETING DIALOGUE STRUCTURE

PURPOSE	Why specifically are we meeting today?
CONTEXT	Is there anything that might pull our attention away from our focus today?
GROUP AGREEMENTS	How do we want to work with each other?
NETWORK/STAKEHOLDERS	Is everyone here who should be here? If not, what should we do to get them here?
DESIRED OUTCOME	What do we want to walk away with from this meeting (plan, decision, etc.)?
CONTENT	Related to our purpose, what are we worried about, and what's working well?
NEXT STEPS	What steps do we need to take? Who does what? By when? Next meeting date?
+/Δ FEEDBACK	What worked? What should we do differently next time?

- **Planning with Youth:** With the youth and their team, developing the Transitional Independent Living Plan or, for non-minor dependents, the Transitional Independent Living Case Plan.
- **Preventing Placement Disruptions:** Bringing together the child/youth, their caregiver and the network/team to develop a plan for intensive supports to help stabilize a placement.
- **Planning for Unsupervised Visits:** Developing a safe plan with the family and their network when moving from supervised to unsupervised visits.
- **Planning for Transition Home:** Developing a safe plan with the family and their network when a child is moving from FR to FM.
- **Developing Aftercare Plans:** Bringing together the family and their network to develop an aftercare plan that the network will implement in an ongoing manner after the case is closed.
- **Addressing Needs of Children/Youth:** Planning for additional services and supports when children or youth have behavioral health, educational, placement or other needs.
- **Permanency Roundtable:** Bringing together a child's/youth's team to focus on identifying and securing a permanent plan for the child/youth.
- **Other:** Any other specific purpose when there is a worry that needs to be addressed by the family and network/team.

MEETING PARTICIPANTS

- The quality of the network or team you build is vital to a successful CFT meeting process. Use tools such as genograms, ecomaps and the Circles of Support/Safety Circles with the parents, child and extended family to identify who should be part of the CFT meeting and become part of the network/team.

- Offer children and youth the chance to attend CFT meetings, as appropriate to age and development.
 - If the child/youth does not want to participate, complete the Three Houses and/or Safety House with the child to incorporate their voice into the CFT worries, working well and next steps.
- For families in Emergency Response referrals or FM/FR cases, work with the parent and child/youth to identify and select CFT meeting participants. Skilled engagement with parents can almost always result in their willingness to include necessary team members, even if they are initially reluctant and afraid to do so.
- For youth in Permanency Planning or Extended Foster Care, work with the youth to identify and select CFT members. They may wish to include important adults, friends, or their boyfriend/girlfriend on their team.

POTENTIAL CHILD & FAMILY TEAM MEMBERS

Child/youth	Social worker	Family's neighbors
Mom	Child's clinician	Family friends
Dad	Child's teacher	Youth's friends
Siblings	Child's resource parent	Parent's sponsor
Tribe	Child's CASA	Parent's clinician
Parent's significant other	Youth's significant other	Parent's substance abuse counselor
Extended family (aunts, uncles, grandparents)	Child's/youth's mental health case manager	Other individuals important to the family

Note: This is not an exhaustive list; anyone important to a child or family should be invited to be part of the CFT.

MEETING STRUCTURE & DOCUMENTATION

- Use the SOP Meeting Dialogue Structure (*previous page*) to guide the agenda and flow of any CFT meeting.
- Be clear about the specific purpose of a given meeting and develop next steps related to that purpose.
- Use the Three Questions with the team, related to the specific purpose of the meeting:
 - What are we worried about?
 - What's working well?
 - What needs to happen next?
- For meetings to address concerns around child safety, use the Safety Mapping process (Harm/Danger, Complicating Factors, Safety, Supporting Strengths) or the SOP-CFT Meeting Framework to map and document the meeting.
- Always address the child's behavioral health and placement needs as part of the meeting to meet State mandates around CFTs (*see column at right*).
- Document CFTMs that meet the State mandates in CWS/CMS using the instructions provided in [All County Letter \(ACL\) 17-104](#).
- CFT meetings should happen as often as needed to check on the plan, ensure the network is following through, revisit child safety, and address new needs.

CALIFORNIA STATE MANDATES FOR CFT & CANS

Child and Family Teams (CFT) are a State-mandated practice for developing a child and family team plan around all needs related to a child/youth and family while the child is in foster care. The intention for the CFT process is integration of care across practice models, services, strategies and plans.

SOP provides a toolkit and strategies to meet State CFT mandates. Both SOP and CFT involve developing a team that includes the child/youth, family, their natural supports, the agency, the tribe, and appropriate service providers (including behavioral health providers), with the purpose of identifying and meeting the needs of the child/youth and family to ensure safety, permanency and well-being for the child/youth.

CFT meetings easily function as SOP meetings when SOP language, structure and strategies are utilized. SOP meetings can meet the CFT mandate if requirements are met in three areas:

1. Required Participants

To meet CFT requirements, team members must include the child/youth, family, social worker, child's current caregiver, tribe, Foster Family Agency social worker and/or Short-Term Residential Therapeutic Program (STRTP) representative, as well as behavioral health staff when the child is receiving or may need specialty mental health services (SMHS), including Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), or Therapeutic Foster Care (TFC).

2. Meeting Timing/Frequency

CFT meetings must occur:

- Within 60 days of the child's placement in foster care
- Every 90 days for youth receiving ICC, IHBS or TFC
- Every six months with case plan creation for youth not receiving SMHS
- For possible placement changes
- As frequently as needed to address needs of the child/youth, including the need for new or increased SMHS

3. Focus on the Child/Youth's Needs

CFT meetings must include specific discussion regarding the placement, behavioral health and other needs of the child/youth, and a plan to meet those needs. The Child and Adolescent Needs and Strengths (CANS) must be completed through the CFT meeting process and used to inform the case plan.

SOP & CANS

The SOP CFT meeting process provides an organic, family-friendly way to complete the CANS. At the first CFTM, the information you gather about the needs and strengths of the child, parent and caregiver will enable completion of a draft CANS tool. Bring the draft CANS to the subsequent CFTM at which the case plan will be developed, and ensure case plan objectives are developed for each need identified on the CANS, supported by the youth's strengths and parent or caregiver resources.

Summary

Counties can meet the mandates of CFT within the SOP framework by creating policies for SOP child and family team meetings that are consistent with the requirements of CFT mandates regarding timing, participants, child-focused planning and the CANS.