

MRS Conference Call Notes  
June 2009

Counties Participating 6/17: Columbus, Cumberland, Davidson, Forsyth, Gaston, Guilford, Jackson, Johnston, Pitt, Sampson, Swain

Counties Participating 6/18: Alleghany, Gaston, Guilford, Lee, McDowell, Pender, Person, Rockingham, Rowan, Surry, Watagua, Wilkes, Yancey

Counties Participating 6/30: Anson, Alamance, Bladen, Brunswick, Buncombe, Camden, Carteret, Caswell, Catawba, Clay, Dare, Davie, Durham, Edgecombe, Gaston, Gates, Halifax, Harnett, Macon, Madison, Nash, Onslow, Pender, Perquimans, Swain, Transylvania, Wilson, Yadkin

Agenda

Announcements from Raleigh

Safety Assessments, can they be safe on the first visit?

Completing Risk Assessment and Strength/Needs with family, what works and what doesn't?

Engaging families in the development of the Service Agreement

Shared Parenting - how are things going? Still hard to hold meeting within the 7 days?

How are you engaging community partners? Do you have MOUs? SOC?

News from Raleigh

Letters

- Letter 6/1 - Some small changes in the 5104 users manual
- Training calendar for July through December has been released. A few trainings are not being offered this time due to budget restrictions.
  - Request that if you are registered and cannot attend, please cancel so that they can offer your spot to someone on the waiting list.
- Letter 6/17 regarding NC Kids.
- The Division has made arrangements to use a new system for on-line training. Were using Illuminate but will be transitioning to Adobe Connect Pro so that we have up to 100 seats and can have multiple sessions at the same time. You will hear more about this in the coming months. We may use this format for MRS calls as well.

Survey was sent out with MRS meeting announcement:

1. In your county, are all or most safety assessments "Conditionally Safe" after the first visit?
2. Do you feel your staff/colleagues have a good sense of the difference between safety and risk?
3. Do your staff/colleagues regularly complete the SDM tools with the family during and FA?  
What about in an IA?
4. Do you use "Family Private time" in your CFTs?
5. Are most of your Shared Parenting meetings held within the 7 day timeframe required by policy?
6. Do you have MOU/MOA with any of the following: Law Enforcement, Court system, Other Community Partners?
7. Does your community have an active System of Care in place?

### **Safety Assessments, can they be safe on the first visit?**

The question has come up in training and other places: Is the allegation alone enough to warrant a safety response?

- Some people did not think you could have an initial safety assessment with a finding of “safe.”
- Policy states that just the allegation alone is not enough to warrant a safety response – therefore if there are no other safety issues you do make a finding of safe.
- Want to be sure it is clear that it is ok to have a “safe” at the start of a case.

### **Question/Comments from Counties 6/17:**

- Question #12 on the safety assessments cause questions on block #4 – when you get out there and you have a serious allegation and we get contradictions between child and parent what do you do?
  - Holly: When there is any question about safety, you should not say safe and if there are contradictions between child and parent then doesn't think you can confidently say safe.
- A lot of the questions are coming up regarding substance abusers and if you have young children can't get a response from them about parent's substance abuse. It takes several days to determine if parents are in fact using drugs.
  - Holly: Although we want to be checking on these things, the question is not really whether or not the parent is using, but rather is that use affecting the safety of that child, therefore it would be appropriate to make a safety response until you are more sure of the situation.
- If we are doing safety assessments on everything including a dirty house that is not really dirty, it dilutes the effectiveness in the eyes of the community of all safety assessments and the ones that are really critical will not be taken as seriously.
- Holly: Responses to surveys – about 13 counties reported that the large percentage of their assessments are conditionally safe,
- Holly: Cannot close a case (as in not transfer to 215) with only conditionally safe, must complete a safety assessment showing them to be safe.
- One county feels like that is a lot of paperwork.
  - To reduce paper, Guilford uses the original assessment but adds updates to the same piece of paper in red.
- If the parent does not have to sign the safety assessment why do we have to do this at the end, and using paper, can't the social worker just put this information in their documentation?
  - Holly: The documentation does need to have a safety assessment somewhere at the end of the case indicating that they are safe. To conserve paper use Guilford's approach.
  - Although parent does not have to sign safety assessment, it is best practice. If they were conditionally safe at first, but are safe at closure, then that was a change and parents should sign.

### **Question/Comments from Counties 6/18:**

- One county has some that are safe initially but once they dig deeper they sometimes find something that is not safe.

- Holly: 13 of 27 surveys say that their safety assessments are always or almost always conditionally safe. Remember this is not about a finding, it is just about safety. Safety is different from risk.
- Holly: Clarification of the policy – if there is nothing to back up the allegation then you cannot base the safety assessment on the allegation alone.
- Sometimes before you even get there the family has not fixed the issue but they have made their own version of a safety plan.
- Another county has mostly conditionally safe. However they feel uncomfortable with physical and sexual abuse cases saying it is conditionally safe just because they can't prove it after the first visit. Families are not likely to smack a child in front of the social worker therefore supporting the allegation; they have to do more in-depth investigating.
- You do not need a safety response if they are safe! Some workers put safe on the form and then also complete a safety response.
- Holly: Make sure that the safety response is specific to this case, not a general response and that the actions are something that the family members are willing and able to do.
- One county may choose #12 if they are not sure what exactly happened to whom, and put conditionally safe.

#### Question/Comments from Counties 6/30:

- Some of the Division's concerns are that we don't want to be doing safety responses where the only thing we had was the report, and the report did not appear to be true, it feels false to families and waters down the value of cases where there is a true safety concern.
- County has a question – Can you close a case when it is conditionally safe?
  - Holly: No, you cannot because that means there are still safety issues. However you can make a case decision of substantiated or services needed where it is conditionally safe because you are not closing it, you are just transferring it to another service.
- For those safety assessments that are considered safe at the initial assessment, how long does the assessment continue until they decide to close the case. If it is safe, why are the social workers in the home?
  - Another county responded: Just because you find an initial safe status you still complete the entire assessment. This further information might actually make you change your safety assessment.
  - Think it is mostly the confusion with families that causes them to use conditionally safe because families don't understand if they have a safe safety assessment they don't understand why we are still involved. With the first visit it is overwhelming to the family to understand the role of CPS.
  - One county had a case that went to court and the family's attorney made an issue of the fact that it was initially safe, why did CPS continue the assessment and ultimately remove the children.
  - Holly: No one is trying to say that you should not use conditionally safe if you have legitimate concerns and there are things that the parents can put into place. We are talking about reports like a dirty house and you get there and it is not. If you have one where you are getting conflicting answers or really feel that you need to look more in-depth you need to use the conditionally safe. Also need to thoroughly explain the process to the family. The family needs to understand what the assessment means to them.

- One county says it is helpful to have families understand the role of DSS. They will complete a safety assessment, risk assessment and a strengths and needs assessment all at initiation and the family initials all documents (even ones that do not have a place for their signature). This helps to engage the families and for them to understand that it is not an adversarial process but that DSS wants to be a support to them, as well as more of the entire process.
- Holly: We are not telling you what you have to put on the safety assessment, just wanted to make folks aware that it is possible and legitimate to have an initial assessment of safe.
- Some workers put “alleged” by certain items on the safety assessment – it is in the report (such as drug use, or inadequate supervision).
  - Holly: Keep in mind that approximately 60% of our reports turn out to be Unsubstantiated or No Services Needed, so just the allegation is not enough. Need to look at what you found and discuss at staffing and determine if the evidence supports the allegation.
  - One county said they were trained the opposite. They said if they did not find it, they could not put allegations on the safety assessment. Could not have “allegations of” on the safety assessment.
  - Holly: Clarification. If you have no evidence and no concerns then no, you can’t put allegations on. However, if you have reports of substance abuse, and you get out there and there is an infant who can’t talk to you, but you see things that raise your suspicions, then you may be able to do that. The word allegations indicates that there are some concerns and we have reason to believe that we need to follow up on these because we can’t dismiss the allegations altogether.
  - Another county was also told at their CFSR that they should not use the word allegations on the safety assessments.
  - Holly: The directions are clear that we are not to use the allegations alone to make a safety assessment finding, so maybe we should not use the word allegation at all. Want to ensure that we don’t assume that all reports are true, because they are not. Trying to walk a line here.
- This goes to the Principle of Partnership – Judgments can Wait. Don’t jump to the conclusion that just because we got a report the family has safety issues.

**Structured Decision Making Tools - Completing Risk Assessment and Strength/Needs with family, what works and what doesn't?**

Introducing those tools and doing those with the family – how is this going? If you are, how’s it working, if you are not, what are the barriers?

**Question/Comments from Counties 6/17:**

- One county said it really depends on the family – with some families it goes quite well to do with them, and others you would not get very far.
  - Holly: If you do not complete them with the family, make sure that they understand what the risk assessment is and how it will affect the case decision.
- Holly: We find that social workers are using the tools with the family but showing nothing in the documentation talking about what was specifically discussed.
- Other counties are also concerned that this is just a check box yes it happened, but no details on the conversation/discussion are in the narrative.
  - Holly: Goes to one of the questions on the CFSR “was family centered practice used in this case” – this is one of the areas where we can tell if FCP was used.

- On the 5010 documentation, one of the questions under case activity is “Was the paperwork discussed with the family?” Why did the state add that question if they also want more details in the documentation?
  - Holly: Just because there is a checkmark, this does not mean that there shouldn't be any detail in the documentation. The 5010 is just a place to check it off, but everything that is checked off should have some notes in the narrative.
- If you document the strengths and needs on the form, do you have to re-do it in the documentation?
  - Holly: No, not re-do it, but talk about what the conversations were like in the documentation “The family did not realize that the relationship with mom was a strength due to the fact that they have been arguing recently. Despite a few weeks of arguments, the relationship has been strong for years, and both parties are respectful during recent disagreements.” is what would be in the documentation, “Relationship with mom” is what would show under “strengths” on the 5010.
- Holly: Many people have told her that in doing the Risk Assessment with the family they get a more information than maybe they did in the initial interviews

#### Question/Comments from Counties 6/18:

- One county said the family assessment piece takes longer with the family because you are doing the tools with the family. Having everyone there to complete the tools there at closure is very challenging.
  - Holly: Even with an investigative assessment you need to go back out to see the family to present the finding. There is no requirement that everyone be there to do the tools. It is about engaging the family – you should present them to the family, but you don't have to have every single person there, especially if the finding will likely be No Services Needed.
- One county feels that Strengths and Needs is one of the best tools the Division has done. Very useful to share with service providers when they get to 215. But as good as that is, the Risk Assessment is just as bad. They feel it is useless – the ratings do not correlate with the things they are seeing in the household and the tool intimidates the families, so they steer workers away from doing the Risk Assessment with clients because it causes negative feelings and overwhelms the family.
  - Holly: These tools did not come from us, they were research based out of Michigan (they had no differential response, and they were only validated on substantiated cases), but the Division is looking at our files to make a tool more appropriate to NC. However there will always be exceptions to the average or typical (ex: although being a younger parent is typically a risk factor, not all young parents are riskier).
  - These were presented to Children's Services last week but the executive board wants to meet and ask some questions which probably won't happen until August.
  - We have completed the validation study within NC.
  - Still will never want to hand the tool to a family and say “here, read this.” There will always be the need to have discussion and walk through them very specifically with the family and explain how each item affects their risk. And if they don't fit the “norm” – i.e. a young parent who's age is not a risk factor, point that out to them as well and let them know that you feel that unlike many people, they are strong in that area.

- Holly: One of the main goals in sharing this with the family is transparency to let them know some of the things that we are basing our findings on.
- One county feels that, much like you can do a supervisor override to increase the risk, there should be a way to mitigate the risk for factors like age that they can't control (supervisory "underride".)
  - Rick Zeckman: That was heard loud and clear in the workgroup and is in the current draft.
- Holly: Engaging the family in the Strengths and Needs or Risk Assessment is the gateway to the partnership we are seeking if we get to in-home services. Lets the family know that we are not going to do all the work here, but asks the family to participate in their own services.
- One county said we always think of things as black and white sometimes so when we say you have to do it with the family some workers think they can't write one word on the tool before going to the family, but they have some workers who do part of it before they go there, but if they negotiate with the family they will cross out and write in the renegotiated part and initial it. This saves time once you get to the visit.
- One county learned a trick where you can split the page, you can look at the question and the definition at the same time – they have Word 2007, so may or may not work with earlier versions.
- Another county incorporated the definitions into the tools so they are right there.

#### Question/Comments from Counties 6/30:

- One county has been successful with the Strengths and Needs and Risk Assessment – they do them with the family on the first visit along with the MRS brochure. They let them know at the beginning that at the end of the assessment they will do them again with the family. They present them as something DSS wants to do "with" them not "against" them. Particularly when it is a family assessment this engages the family.
- One county had a severe DV case and they did the Strengths and Needs and Risk Assessment with the whole family and then did one with the mom alone to show her the one that would be just for her if dad was not in the picture. This was very eye-opening for her and made her follow through with the courts so he is probably going to do some prison time and she feels safe and supported and that she has power by following through with the court intervention.
  - Holly: One of the barriers she has heard other people talk about is that Supervisors say that workers feel that the assessments are skewed too low.
- One county thinks that workers feel that the risk assessment is not a partnership decision. Although we want to engage them, if they say their risk is low and the social worker believes it is high, we need to go with the high risk and that is difficult for workers.
  - Holly: Absolutely. We need to be able to talk to the families but explain up front before you even start the assessment tool that we are statutorily required to do this, and if we cannot agree on everything, we may have to put something is higher than the family believes in order to do a thorough risk assessment.
  - The skill in having to explain things like this does not come naturally and is probably something that workers need to practice talking this through, perhaps with their supervisors before they are "on the spot" with the family.
- Holly: Several counties said they do these with the family even in an Investigative Assessment and there is nothing in policy that says you can't do that. If they are open to doing this, it is always good to engage the family as much as possible.



## Engaging families in the development of the Service Agreement

If we are engaging them early in the assessment then we are a step ahead in getting their input for the service agreement.

### Question/Comments from Counties 6/17:

- Have to make services agreements realistic and something that the family can do, and engaging families in the development of them, makes this work better
- Works better if you do it with them at their home and include the children if they are old enough.

### Question/Comments from Counties 6/18:

The subject of private family time at the CFT was put on the table to open the discussion. Who is using this? How is it going?

- One county has not used it per se, but if the family is prepared beforehand (they have already had their private time) they sometimes come in with 6 or 7 family members and they have the solution worked out. So preparation is key. They have been thrilled with the ideas the families have come up with. So far 100% of the ideas have at least been considered and most very workable.
- One county was really looking forward to the Engaging Families training that had to be cancelled, hoping that can be offered again.
  - Holly: That was an NCSU training and they will try to offer it again after July.
- One county is having trouble with using a facilitator with no budget money. What are other people doing?
  - One county has all workers but one trained as facilitators and have used them since day one. Planning on contracting with someone after July 1.
  - Another county has 4 trained facilitators and supervisors are also trained – they just don't facilitate those cases that are served by workers on their team.
- Looking at ways to get training when there is no travel budget.
  - Holly: There is no easy answer, NCSU has been willing to come to counties when there are enough people but they do not have the funds to do this currently either.
- Another county uses the family time frequently but they have done that since before CFTs – all the professionals walk out of the room and give the family some time to talk about the plan when everything has been laid out on the table. It has always worked well.
- Holly: Family private time can do several things 1) some people are not comfortable talking in front of professionals but they will talk to each other in private and 2) some families think that if they sit there quietly long enough that DSS will tell them what to do (because that has been their past experience) and they can just do it, so, by leaving and giving them their own time it lets them see that we really do want them to develop their own solutions.
- Someone asked for a job description for a facilitator, Holly will email this out – if anyone else wants one, let her know.
- Wondered if there was any state training on completing the CFT form. Have different facilitators who do it somewhat differently but she has seen ones from other counties that are totally different so she wonders if they are doing it correctly. (Particularly question 18 through the end.)
  - Holly: No official training, not sure if they are addressing this in Step by Step yet (someone said no). Holly is in talks with counties about how the Division can provide some guidance about how to fill it out. Some of the items would likely be



filled out by the social worker, not all by the facilitator. We can revisit this at an MRS meeting – the last time it was before anyone had used it yet, so we can do it now that people are using it and have questions.

#### Question/Comments from Counties 6/30:

- The facilitator's role in educating the family about their role in the CFT prior to the meeting has made the family more engaged in the meetings.
- Don't have to complete the Family Services Agreement completely at the first CFT, there is nothing wrong with scheduling another time to complete the remainder of the form. If they have made limited progress and can't handle any more, completing a piece of paper just to complete it makes it worthless.
  - Holly: Each family has a different amount of stuff they can handle at one time.
- Holly: Several counties in the survey said they used family private time in some cases. This is awkward for some and very beneficial for others. Sometimes if the family is just staring at you and not saying anything, leaving the room for a moment makes the family realize that they really do need to speak up and if they can talk among themselves privately first they may be more willing to do so.
- Billy (from Catawba) – had a CFT meeting in an adoption situation and during a break the family talked to a provider in the room that they were not comfortable talking with in the entire meeting room. This helped the family immensely with some issues that did not necessarily need to come out for the entire group and therefore led to a resolution of the issues. This wasn't exactly family private time, because it was with a provider as well, but it changed everything.
  - Holly: You can let the family know that the professionals will leave the room but if they want a particular one to remain in the room, or call them back in (just that one) that is their right because it is their meeting and can allow them to create solutions.
- Billy has told families up front that if they want/need some family alone time they can ask for a break so that they can have some at any point during the meeting.
- Holly: Some people in the survey said their facilitator offers a break and sometimes the families naturally have some alone time during that break. Some people said that families decline it. That is fine, but we need to make sure that they really do not want or need it. Sometimes the family is more comfortable with having the entire group remain together. Each family will be different, and they need to not only know but really comprehend that this is their meeting and we want to make them a true partner and conduct the meeting in the way that makes them the most comfortable.

#### **Shared Parenting - how are things going? Still hard to hold meeting within the 7 days?**

Half of the respondents to the survey said this is still an issue. Let's talk about why and for those who are successful at holding the meetings within 7 days, how do you do it?

#### Question/Comments from Counties 6/17:

- Catawba tries to set up the 1<sup>st</sup> shared parenting meeting at the first visit – the first 20 minutes of the first visit are the SP meeting.
- Strong SP among some foster and biological parents, but all foster parents have not yet embraced this yet and do not want to be involved in these activities.
- Gaston has the licensing worker facilitate the SP meeting.
- Most counties confirmed that SP is a clear part of foster parent training. Some counties even have a contract that the foster parents have to sign – Holly has gotten this from one county and she will send it out.

- Johnston has a handbook that they will forward out.
- Holly: When you are thinking about a SP meetings, don't get stuck in thinking that they always have to be face to face. If emotions are high, or there is some other reason that the parents are not ready or able to have one in person within 7 days, can have it over the phone.

#### Question/Comments from Counties 6/18:

- One county has most of them at the day of removal – they do this by saying to the parents at removal “This is who your child will be staying with” and they have the two sets of parents meet at the office with the “selling point” (to the biological parents) that this is the opportunity for you to tell them something about your child.
- Concern from another county – Aren't emotions running high? Yes, until the biological parents start talking to the foster parents. The foster parents can de-escalate the biological parents and calm them more than the social workers can (they didn't take away their children, they are going to care for them.)
- Another benefit to having them right up front is that the foster parents feel more comfortable because from day one they have some information on the children so it gets the relationship between the foster parents and the children off to a good start.
- Another county has the licensing workers facilitate the SP meetings. The foster care worker is in there, but the licensing worker who knows the foster parents, and did not do the removal from the biological parents is front and center.
  - Holly: Several counties have said that they do them the day of removal and they all find it very helpful.
- Holly: Some of the barriers she has heard is that it feels like the families are not ready or there are so many strong emotions but remember sometimes we assume things that are not so, maybe like the county above mentioned, the emotions won't be out of control with the foster parents, just against the social workers. Also remember that the first meeting can be a phone call.
- One county “sells” the biological parents by waiting until they ask “Where is my child going?” and when they can say “A foster home, would you like to meet the foster parents?”, the biological parents usually say yes. They then tell the biological parents that they will do everything they can to make it happen today. It immediately diffuses the situation and lets the biological parents know that you are not trying to hide their children.

#### Question/Comments from Counties 6/30:

- Hearing that there are tremendous benefits to having them as early as possible – it calms the parents. Several counties try to do it at placement, and although it sounds like emotions would be running too high at this point, it actually tends to calm the biological parents.
- Nash still tries to do them at placement, or as soon as possible. By the 7 day meeting if not prior. Eases the fear of biological parents.
- Another county has found when they tried it at placement it really did calm the biological parent. This was a situation where the infant was positive for drugs so very emotional but she saw the foster parent as nurturing and eased her tension.
- What is a good way to do it when the parents are incarcerated?
  - Holly: May be able to meet in the jail, or at the 7 day hearing the parents will be brought to the courthouse.

- One county has done it when the parents are brought over to court, or also by letter. The foster parent will write a letter to the biological parent and the social worker takes it to the incarcerated parent and if the biological parent wants to respond, then the social worker will carry that letter back to the foster parent.
- Sometimes children are placed with relatives who do not have a close relationship with the biological parents, so the child is in custody but not a foster parent, is it still a 7 day contact?
  - One county tries to include the relatives just the same as they do with the foster parents. Typically the relative is someone that the biological parent has had some input about, so usually the biological parent feels better about the situation.
  - Holly: It is still important, sometimes even more so to have these contacts. Something will come up that the relative was not aware of, and the likelihood of accidental contact is higher, so it is good to have ground rules.
- One of their barriers is when children go into therapeutic foster homes, those foster parents have concerns/issues with shared parenting.
  - Holly: The shared parenting meeting applies to all foster parents, including therapeutic ones.
- One county has a contract that they do with the therapeutic foster parents and shared parenting is a part of the contract.
- Holly: Other counties have this with all foster parents so that it is clear that shared parenting is a requirement for all foster parent situations.

### **Engaging community partners**

Especially now in tight fiscal times we have to think of new ways to provide services to families. Does anyone have anything that they are doing that is working really well to get partners to the table.

### **Question/Comments from Counties 6/17:**

- Some counties attend the other agencies staff meetings since there is a lot of overlap in clients. Also extend the invitation to the other agencies to come to DSS meetings.
- This has cut down significantly on the number of children being placed into DSS custody from Juvenile justice for Johnston County.
- Many counties have MOAs of MOUs with other community agencies.
- Counties on this call were seeing very positive results of interagency collaboration.

### **Question/Comments from Counties 6/18:**

- One county has formed a law enforcement protocol committee that meets quarterly with Law enforcement, juvenile justice, GAL, etc. and discuss any issues. Although workers probably see it as more paperwork from the mandates coming out of it, they have found that it helps to ensure that issues are touched on during each case. This has become more than just law enforcement, but more of a community meeting. Although there are not many service providers (but DV and the schools are on there) they reach out to them when the need arises.
- Holly: We will probably need to reach out to more of the informal community resources with dollars for formal programs going away (churches, etc).
- Holly: Responses to SOC questions were interesting, people seemed to think that Mental Health had one but DSS didn't. The whole idea is not to have separate SOC but to have one for the community.

### Question/Comments from Counties 6/30:

- One county wanted to know if anyone had a MOU or MOA with the court system and who enters into that – individual judges or the Chief Judge?
  - One county had the Chief develop the rules and the other judges have to abide by them. The program manager and the agency attorney developed those with the Chief Judge.
  - Tom said there is some guidance from the Division and AOC regarding this. Candice Britt has been the contact for that so she may have some examples. Holly will follow up on this and send out.
- Holly: Important to ensure that any kind of local rules, MOA, or MOU aren't just made and then just sit there. Keep them alive and alter and update them when necessary.
- One county said you can do a lot of this through the Community Child Protection Team – keep partnerships alive and develop new ones through these. CCPTs are a good kick off point.

### Additional questions or items to discuss at future meetings:

#### From 6/17:

One county wanted Holly to ask if counties have any policy covering damage that foster children might do in the home (or vehicle) of foster parents?

- Sometimes use disability money.
- Some counties have a policy that they are not responsible, that they have to file with their insurance, but they have helped out on occasion.
- Any help goes a long way to helping support foster parents.

#### From 6/18:

If they remove all Level 3 and 4 placements, anyone who could provide some insight as to how to deal with that would be appreciated.

- Particularly for level 3 sex offender children that may be dumped in the community – any suggestions as to what to do with them?
- Rick said if that does indeed happen there would be a transitional period but at this point it is hard to say, until the budget is passed, the proposed budget changes daily.
- Once we know we will join with counties to determine how best to serve these children.

#### From 6/30

One county has a situation where the parents do not want them to consider any of their relatives for placement resources.

- Tom said that federal policy states you have to notify all close relatives that are a placement possibility unless it is not in the child's best interest. Look at the Administrative Letter on Fostering Connections that went out about this.
  - Holly: Need to explore the reasons that the biological parents may not want their relatives involved and let them know that bottom line, if it is the law we will have to do it. But may need to look closely at those family members – are there legitimate reasons for the biological parent's concerns?
- Billy – Does this then mean we have to have those relatives at the CFT?
  - Holly: Not prior to placement, although we may have to place children there, those relatives do not have to attend the CFT prior to placement if the family does not want them to. Although ideally they will, the CFT and placement options can be separate. Once they are placed however, that will change, and they will

need to be included. It is a fine line. So don't wait until these things become an issue, be working with the family from the beginning to try to address issues before they blow up.

CFTs and GALs – One county asked if we invite them or is it the family member's call whether or not to invite them?

- Billy - The GAL is a mandated provider, but if the family is adamant that the GAL is not present, they need to have the role of the GAL in court explained to them. Let them know that the GALs report will be heard in court and the family needs to understand that the GAL will get a report regarding the meeting and that they don't want to antagonize the GAL. See if they can be involved at least over the phone or for part of the meeting.
- Holly: Critical that you fully explain the GAL role to the family and how much of a voice these folks will have in court.
- One county explains all this, but ultimately it is the family's decision and the DSS honors this, but explains potential consequences.
- One county sometimes has a judge order a meeting with the GAL present, and the family refuses the GAL there. In this case they have a separate meeting with the GAL but they are clear with the family that the meeting is not their CFT, it is a meeting for the DSS to meet our mandates from the judge.
- Another county has the GAL at the PPAT and not always at the CFT.
- One county has PPAT and CFT back to back and has the PPAT first. Then they formally end the PPAT and if there is anyone there that the family is not comfortable with those persons are asked to leave.
  - Holly: Asked if the PPAT was always first, because it might flow better to have the CFT first because the family has more voice in the CFT.
- Another county asked how they handled the scheduling of that?
  - The county that did it this way was a small county so they only have about 3 PPATs.
  - Holly: When you are looking at combining these, we may need to move away from the idea that all the PPATs need to be on the same day. Understand why we did it that way in the past because some of the same people need to be at all of them, but this is not practical if you will have a CFT afterward. There is an adjustment issue for the professionals.
- Question – how much leeway do we have in scheduling the PPAT – if the PPAT is a few days late because of trying to combine CFTs is that acceptable?
  - Counties do not think the timeframe is possible. Large counties trying to schedule 40 PPATs a month cannot violate federal regulations to extend PPAT to try to schedule CFTs connected to the meetings.
  - Holly: Different things will work for different counties – each county will have to find what is workable for them.

July Meetings: 15<sup>th</sup>, 21<sup>st</sup>, and 30<sup>th</sup>