ENGAGING THE CHILD, FAMILY, AND SIGNIFICANT ADULTS

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2.1 Introduction

Family engagement involves all aspects of partnering with youth and families in a deliberate manner to make well-informed decisions about safety, permanency, lifelong connections, and well-being. Family engagement is an intentional practice with utilization of particular skill sets to ensure relationships develop. Family engagement is founded on the principle that communicating openly and honestly with families supports disclosure of culture, family dynamics, and personal experiences. Engagement goes beyond mere involvement; it is about motivating and empowering youth and families to acknowledge their own underlying needs, positive capacities, and supports. True engagement supports families in taking an active role in creating change. It means engaging the child’s birth parents, prior custodians, and family members, as well as other community members and adults who are significant to the child and family, consistent with the child’s best interests in all aspects of permanency planning for the child.

Family engagement involves notifying relatives, both maternal and paternal, that the child is or will be placed in foster care, searching for extended family and community networks, aggressively pursuing leads, discussing roles and resources the family members and significant adults can provide, engaging them in the child’s life, and establishing permanent supports and lifelong connections for the child.

Family engagement is important throughout the child’s involvement with the child welfare system to:

- Ensure the child’s safety.
- Stabilize the child’s family when in crisis.
- Prevent the child’s placement in foster care.
- Provide supports for the child when foster care placement is necessary.
- Ensure service plans respond to the strengths, needs, and desires of the child and family.
- Reunify the child safely with his or her family when separation was necessary.
- Find permanent families when the child cannot return home.
- Establish the roles of family members in caring and supporting the child.
- Provide lifelong connections for the child.
- Transition the child to permanency.
- Connect the child and family to post-permanency resources for stability and success in life.

### 2.2 Framework

Local departments of social services (LDSS) shall meet federal and state legal requirements, and should use sound practice principles to achieve desired outcomes and to guide decision making on the engagement of the child, family, and community.

#### 2.2.1 Practice principles

Three fundamental principles in Virginia’s Children’s Services System Practice Model provide the philosophical basis and guide practice for decision making while engaging children and families:

**First, we believe in family, child, and youth-driven practice.**

- Children and families will be treated with dignity and respect. The voices of children, youth, and parents are heard, valued, and considered in the decision
making regarding safety, permanency, and well-being as well as in service and educational planning and in placement decisions.

- Each individual’s right to self-determination will be respected within the limits of established community standards and laws.

- Family members are the experts about their own families. It is our responsibility to understand children, youth, and families within the context of their own family rules, traditions, history, and culture.

- Children have a right to connections with their biological family and other caring adults with whom they have developed emotional ties.

- We engage families in a deliberate manner. Through collaboration with families, we develop and implement creative, individual solutions that build on their strengths to meet their needs. Engagement is the primary door through which we help youth and families make positive changes.

Second, we believe that all children and youth need and deserve a permanent family.

- Lifelong family connections are crucial for children and adults. It is our responsibility to promote and preserve kinship, sibling, and community connections for each child. We value past, present, and future relationships that consider the child’s hopes and wishes.

- Permanency is best achieved through a legal relationship such as parental custody, adoption, kinship care, or guardianship. Placement stability is not permanency.

Third, we believe in partnering with others to support child and family success in a system that is family-focused, child-centered, and community-based.

- We take responsibility for open communication, accountability, and transparency at all levels of our system and across all agencies.

- Community support is crucial for families in raising children.
2.2.2 Legal citations

The legal framework and specific requirements for engaging children and families when children are at risk of or in foster care are delineated in federal and state law. Key citations are provided below. See the law for complete language by clicking on the citation.

- Identifying and notifying relatives of the child’s removal from home
  - Social Security Act, Title IV, § 471 (a) (29) [42 USC 671]

- Identifying a relative for kinship foster care
  - § 63.2-900.1

- Seeking out relatives first as a placement option
  - § 63.2-900

- Providing for family and foster parent participation in the family assessment and planning team (FAPT)
  - § 2.2-5208

2.2.3 Outcomes

Engaging the child, families, and significant adults in the lives of children at risk of, or placed in, foster care helps LDSS achieve the following outcomes required in the federal Child and Family Services Review, each with specific outcome measures:

Permanency Outcome 1: Children have permanency and stability in their living situations.

- Fewer children are placed in out-of-home care.
- More children leave foster care and achieve permanency.
- Children achieve permanency with shorter lengths of stay in foster care.
• Increased timeliness to permanency.

• Fewer children re-enter out-of-home care.

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

• More children in foster care are placed in close proximity to their families and communities.

• More children in foster care are placed with siblings.

2.3 Notifying and informing relatives of child removal

The LDSS shall document diligent efforts to notify in writing all grandparents and other adult relatives, both maternal and paternal, when the child is being removed or has been removed. Notification shall also be given to all parents, including adoptive and step-parents, of any sibling who has been removed from the custody of the parent(s) (The Preventing Sex Trafficking and Strengthening Families Act, P.L. 113-183).

Parents and relatives should be actively engaged in decision making for the child through a Family Partnership Meeting (FPM) prior to removing the child whenever possible (Section 2.9). Notifying relatives and documenting these efforts shall be the responsibility of all services workers involved in the child’s case. (See Child Protective Services manual, Section 4.3.3.8.5 and Section 8.2.5)

The purpose of the written notice is to explain the options the relative has to participate in the care and placement of the child in an effort to establish permanency for the child. This written notice shall occur within 30 calendar days after removing a child from the custody of the parent(s) (Social Security Act, Title IV, § 471 (a) (29) [42 USC 671]). It should be done within five (5) days when feasible.

LDSS may contact relatives without the family’s consent, written release, or court order when the LDSS determines that disclosure of information is in the child’s best interests and the person has a legitimate interest. The LDSS has authority to contact parents, grandparents, or any other individuals that the LDSS considers a potential caretaker for the child who is involved with child protective services, if the child has to be removed
from the parent or custodian (§ 63.2-105; 22 VAC 40-705-160 B; 22 VAC 40-705-10).

For additional information, see the Child Protective Services Manual, Part 9, Confidentiality, Section 9.7 on Release of Information to Legitimate Interests.

The LDSS may determine it is not in the child’s best interests to notify relatives involved in family or domestic violence, who have a barrier crime as listed in § 63.2-1719, or who are listed on the Virginia State Police Sex Offender Registry.

The written notice shall:

- Notify the family members that the child is being removed or has been removed and is in the custody of the LDSS.

- Invite the family members to discuss ways to be involved in the child’s life, including the possibility of becoming a foster parent for the child, and explain opportunities available through kinship guardianship assistance (§ 63.2-900.1).

- Request assistance in locating relatives who may be willing to be involved in the child’s life, including being considered as possible placements for the child.

- Explain the legal options available to relatives for the placement and care of the child.

- Describe the requirements for becoming a foster and adoptive foster family.

- Provide information on the types of services and supports available for children placed with foster and adoptive families.

- Explain the permanency options that may no longer be available if the relatives do not respond to the written notice.

- Provide contact information for LDSS staff responsible for responding to the relatives’ interest in caring for the child.

The sample Relative Notification Letter should be used for individuals who have been confirmed to be relatives, as it contains all required language. Through the agency’s search efforts, there may be certain individuals who are suspected to be relatives of the
child but have not yet been confirmed to be relatives. The agency is required to make efforts to locate all relatives of the child; however, it’s also important that the agency protect the confidentiality of the family until the individuals are confirmed as relatives. The sample Possible Relative Notification Letter includes examples of language that should be used in those types of letters.

A copy of the written communication shall be kept in the child’s case file. The date the written notice was sent and the date(s) any relatives responded shall be recorded in OASIS. The reasons for not notifying specific relative(s) shall be documented as well.

2.4 Roles and resources families and other individuals can provide

Family members and other individuals can provide important connections and support for the child at risk of or in a foster care placement. They can help the child in preventing foster care placement, during the foster care experience, in transitioning to permanency, and throughout adulthood. Strong connections with family members and significant adults provide the child with stability, long-term safety nets, and the necessary foundations for success in adulthood.

Relatives, siblings, friends and significant adults may assume diverse roles and provide different resources and supports for the child. Individuals not related by birth, marriage, or adoption to the child, but who have emotionally significant relationships with the child, may be willing to fulfill the functions of a family relationship for the child in foster care.

To the extent that it is age-appropriate, all children should be an active participant on the planning team. Youth age 12 and older shall be part of the planning team and shall be provided with the opportunity to choose up to two (2) members of the team who are neither a foster parent of nor a case/service worker of the youth and who he or she wants to involve with the team to help represent the youth’s needs and provide support during the process (§ 16.1-281). One of the individuals selected by the youth may serve, as necessary, as an advocate with respect to normalcy for the youth. The LDSS may only reject the member(s) selected by the youth if there if good cause to believe that the individual(s) would not act in the best interest of the youth and this must be documented.
The roles of individuals may include, but are not limited to:

- Providing information and leads on relatives and significant adults.
- Helping identify potential relative caregivers.
- Serving as bridges to help make connections with other individuals.
- Providing knowledge of the families’ cultural traditions and practices.
- Identifying strengths, supports, and resources of the child, youth, family, and community.
- Helping problem-solve in building on the child’s, youth’s and family’s strengths in meeting the child’s or youth’s needs.
- Participating in school activities or inviting the child or youth to participate in family and social events.
- Connecting personally with the child on a regular and ongoing basis, such as visits, phone calls, email, texting, videoconferencing, and computer social networking.
- Providing emotional support or mentoring for the child or youth.
- Participating in FPMs.
- Helping to develop and implement a plan to meet the child’s or youth’s needs for safety, permanence, and well-being.
- Providing respite or temporary care for the caregivers, transportation, financial resources, or employment and housing options.
- Serving as placement resources.
- Providing a permanent family for the child or youth.
- Providing lifelong connections for the child or youth.
• Helping to prepare and transition youth over age 14 to adulthood successfully.

• Providing any needed post-permanency supports to help the child or youth be successful in the future.

2.5 Searching for relatives and significant adults

The LDSS shall diligently search for adult relatives and other individuals who have significant relationships with the child, including those adult relatives suggested by the child, birth parents or prior custodians (Social Security Act, Title IV, § 471 (a) (29) [42 USC 671]). The networks of the father and paternal family should be examined as thoroughly as those of the mother and maternal family, even if the father is currently absent from the child’s life.

Within 30 days of a child whose father is unknown entering foster care, the LDSS shall request a search of the Birth Father Registry to determine if any man has registered as a putative father of that child (§63.2-900). If a man has registered, the LDSS shall contact the man to begin the process to determine paternity. A search of the Birth Father Registry when the child enters foster care does not eliminate the requirement for a LDSS to request another search when filing for termination of parental rights if the goal of adoption has been selected (see Section 9.4). For information about the Virginia Birth Father Registry process, see Child and Family Services Manual, Chapter F, Adoption, section 8.

Searching for both maternal and paternal family and lifelong connections is an ongoing process throughout the child’s involvement with the child welfare system. It should begin as soon as the child is at risk of being placed outside of the home and continue with a sense of urgency until the child has achieved permanency. At a minimum, the service worker shall search for relatives at the time the child enters foster care, annually, and prior to any subsequent placement changes for the child (§ 63.2-901.1). These ongoing efforts shall be documented in OASIS using the diligent search screen and the paper case file. Additionally, these efforts shall be documented in the foster care plans and court reviews submitted to the court for all foster care hearings throughout the life of the case.
The family search and engagement process involves exploring the extended networks of people who have been involved with the child over the course of the child’s life. The service worker should reconstruct the child’s relationships over time to identify as many family members and other individuals as possible who have been significant and positive for the child. Every reasonable lead should be pursued quickly. When family members indicate interest in connecting with the child, the service worker should engage these individuals to gather information, build relationships, and explore placement options for the child.

The process of finding family and lifelong connections should be guided by the desires and needs of the child, consistent with the child’s developmental level. The child should be involved as soon as possible in the search process, taking into account the child’s circumstances and best interests. The service worker should identify the most appropriate individual to work with the child on the search process.

### 2.5.1 Preparing for and engaging the child and family in the search

The service worker should explain the search process to the child, the person working directly with the child, appropriate family members, and other involved individuals to:

- Prepare them for the process.
- Identify relatives and significant individuals.
- Explore the types of connections the child wants.
- Help the child express his desires about the outcomes of the relative search and set reasonable expectations as needed.

Conversations with the child and family about the search should be ongoing to identify additional relationships that they remember, to keep them informed, and to seek their input and desires throughout the process.

The following are some issues to consider when beginning a relative search:
• What are the roles, hierarchy, and authority of relatives in the raising of children, in both the presence and absence of parents?

• What is the family’s hierarchy of responsible relatives (e.g., godparents, grandparents, siblings) in the temporary or permanent absence of parents?

• Does the family practice or reject formal or informal placement of relatives’ children (e.g., adoption, guardianship)?

• How do gender and cultural traditions affect the family’s decision-making structure, child-rearing practices, and selection of a family spokesperson?

• What has been/is the family’s experience and attitude towards social service professionals and institutions?

• How have environmental conditions or changes affected the family’s socioeconomic stability, child-rearing practices, and family members (e.g., unemployment, migration, housing, rural or urban settings, language)?

(Relatives Raising Children: An Overview of Kinship Care, Crumbley and Little, 1997)

2.5.2 Examining the child’s and family’s extended networks

The service worker should use a variety of methods to identify as many individuals as possible in the extended networks of the child and family. The networks of the father and paternal family should be examined in addition to, and as thoroughly as, those of the mother and maternal family.

Search methods include, but are not limited to:

• Utilizing a person locator tool to locate family members and supportive adults. All agencies have free use of this search engine through the VDSS.

• Completing a genogram and/or ecomap with the youth and family to gain information about family members and significant people connected to the family (See section 5.8)
• Reviewing case records, including information gathered about the family search conducted during child protective service investigations and family assessments.

• Talking with the child, siblings, and previous and current caretakers.

• Talking with immediate and extended family members, including birth parents and absent parents; siblings, half-siblings, step-siblings, and adopted siblings; and maternal and paternal family members (e.g., adult siblings, grandparents, uncles, aunts, great aunts, and great uncles).

• Talking with adults who had emotional attachments or connections with the child, such as godparents, friends’ parents, teachers, counselors, service workers, coaches, church members, and neighbors.

• Using meetings, personalized letters, handwritten notes, phone calls, and emails to engage adults.

• Following up on any leads through Internet search methods. (See Family Engagement Toolkit)

   The service worker should pursue every reasonable lead and respond quickly when family members indicate interest in connecting with the child.

   All information gathered about the child’s relationships with family members and significant adults should be documented in OASIS and the paper case file for use throughout the child’s involvement with the child welfare system.

2.6 Engaging relatives and significant individuals in the child’s life

   As the service worker identifies family members and significant individuals, the service worker should explore opportunities for reconnecting and re-engaging them in the child’s life. See Section 2.4 for possible roles, resources, and supports these individuals can provide the child.

   The service worker should:
• Help the child determine whether and how relationships will be maintained with different individuals over time, consistent with the child’s developmental level.

• Engage appropriate family members and significant individuals in the child’s life, including the birth mother and birth father, consistent with the child's safety, best interests, and personal desires.

• Candidly discuss with the family members and significant individuals the specific strengths and needs of the child, as appropriate.

• Identify the specific roles and resources they can provide the child.

• Encourage them to connect and maintain involvement with the child as appropriate to the child’s needs.

Relationships with family members and other adults should be reconsidered throughout the child's involvement with the child welfare system. The child's needs and desires, and the individual’s circumstances, may change over time. Someone who initially was not able to assist the child may be a valuable resource at another time.

### 2.7 Working with parents that are incarcerated

By engaging the incarcerated parents early and regularly throughout the life of the child's involvement with the child welfare system, from arrest to release and re-entry to the community, the LDSS may improve permanency outcomes for children of incarcerated parents.

#### 2.7.1 Locating incarcerated parents

When a parent's whereabouts are unknown, the service worker should consider the possibility that the parent may be incarcerated. The service worker should make reasonable efforts to locate parents who may be or who are known to be incarcerated in city, state, and federal corrections facilities or detained by U.S. Immigration and Customs Enforcement (ICE).
2.7.2 Finding an inmate

- County jail. The parent can usually be located by contacting the County Sheriff Department’s administrative booking unit. Sometimes it may be faster to go to the jail in person. Inmates often use aliases when they are booked in county jail. Developing a working relationship with the Sheriff Department’s staff who are acquainted with repeat offenders and their aliases may assist the service worker in this type of search.

- State prison. If a parent has been sentenced to a state prison, the service worker may utilize the Virginia Department of Corrections, Offender Locator service to help locate an inmate. If an inmate was recently admitted or transferred, the information may not be available for several days.

- Federal prison. If a parent has been sentenced to a federal prison, the service worker may use the Find an inmate locator tool on the Federal Bureau of Prison website. The parent’s first and last name is needed.

- U.S. Immigration and Customs Enforcement (ICE). If a parent has been detained, the service worker may use the online ICE Detainee Locator System. This system will be able to locate a parent that has been detained by ICE in the last 60 days.
  
  o Detainees are not able to receive calls, but letters may be sent, utilizing name and alien registration number.
  
  o According to the Vienna Convention on Consular Relations, law enforcement agencies are required to notify all arrestees of their rights to contact their respective consulate. The federal government provides a list of foreign embassies with contact information. If the child is a U.S. citizen, the consulate may be able to advocate on behalf of the detained immigrant parent since children are often able to obtain dual citizenship.

An important reason to locate incarcerated parents is their right to receive notice that the child is in foster care. Failure to provide proper notice to incarcerated parents may result in denial of the parents’ fundamental rights but also may result in court
continuances and delay in helping children to achieve permanency in a timely manner.

2.7.3 Communicating with incarcerated parents

A parent’s ability to communicate is extremely restricted once he or she is incarcerated. They cannot easily access a phone or may not receive documents and notifications about their case plan and court hearings in a timely manner.

Connecting with program staff in the corrections facility may help the service worker in identifying the best contact methods for the incarcerated parent. It may be possible for the incarcerated parent to participate in team meetings and FPMs via telephone.

Unless the court has issued a ruling that releases the agency from having to make reasonable efforts to reunite the child with his birth parent, service workers are obligated to approach all cases involving incarcerated parents with the same urgency and respect as any other foster care case.

2.7.4 Identifying services for incarcerated parents

Though service referrals and the parent’s ability to access helpful programs are severely limited while incarcerated, the service worker shall still discuss the service plan with the parent, advise him to participate in any available programs and plan for additional community services upon release.

The program staff at the corrections facility can help determine what services the inmate is already receiving and what is available.

Many correction facilities include services such as but not limited to:

- Parenting programs.
- General Educational Development (GED) and educational opportunities.
- Anger management.
- Drug and alcohol programs.
• Domestic violence programs.

• Counseling/mental health services.

As parents near their release, child welfare agencies should also be sure to discuss the service plan with them and the remaining steps to achieve reunification if this continues to be the permanent plan for the child. If not, discuss with the parent appropriate ways to develop the plan for permanency for their child.

2.7.5 Visitation with incarcerated parents

Children have the right to regular contact with their incarcerated parents and incarcerated parents have the right to continue to parent their children. Unless the court has determined that visiting the parent will put the child in danger, children and incarcerated parents have the right to regular, ongoing visits.

It is important for the service worker to understand the rules of each correctional facility. Developing a working relationship with the program staff at the facility provides for better coordination for visits and the provision of information to the incarcerated parent. This knowledge will also assist the service worker in determining if visitation is safe and appropriate for the child or youth.

Because each jail and prison has different visiting rules, it is recommended that the service worker call the facility prior to a visit (including the day of the visit) to determine that the inmate does not have restrictions on visits. If the incarcerated parent is located in Virginia, visitation policies may be found on the Virginia Department of Corrections website.

2.7.6 Documenting involvement of parent who is incarcerated

The service worker shall document in OASIS and in the foster care paper case record all efforts to involve the parent who is incarcerated, including but not limited to:

• All efforts made to locate and engage the parent who is incarcerated (see Section 2.6 on engaging relatives in the child’s life).
• All efforts made to establish ongoing communication and visitation with the child, as appropriate.

• Child’s visits with the parent.

• Ways the parent is involved in service planning.

### 2.8 Using teaming in child welfare practice

In Virginia, several models of teaming are used to engage children, youth, and their families as partners in shared decision-making in child welfare. For example:

• FPMs are used at specific decision points and are facilitated.

• Family Assessment and Planning Teams (FAPTs) are used with the Children’s Services Act (CSA) process.

• Teams jointly determine whether the child’s best interest is to remain in the same school when the child’s placement changes.

• Youth teams work collaboratively with older youth as they prepare for adulthood and establish permanent lifelong connections with significant adults.

• Child and family team meetings (CFTM) are used to provide continuity in communication and goal setting with team members over time, adding key partners as needed.

These teams often share a common set of values and goals, including:

• Achieving safety, permanency, and well-being for the child.

• Engaging the family and its natural, informal, and community supports.

• Building upon the strengths of the child and family.

• Identifying the needs of the child and family.

• Sharing decision-making.
• Developing the service plan, ensuring appropriate services and supports are provided, and assessing progress and making adjustments over time.

One team should be utilized to meet multiple purposes when feasible, as long as the activities of the team are consistent with law and guidance.

2.8.1 Benefits of teaming

Families, staff, and other team members have the opportunity to work together in planning, coordinating, and decision making. Research supports that child, youth, and family interventions are more effective when the family provides their input as to what decisions are made. When a child or youth and family share ownership in identifying their unmet needs as well as the interventions that may address these needs their commitment to change is evident. Team members then begin to take responsibility for contributing to the family’s outcomes and team members exhibit more effective and functional cooperation as the team works toward addressing safety, permanence, and well-being for the child or youth.

2.8.2 Values and key principles of effective teaming

The core value of teaming is that the entire team shares the responsibility to strengthen the family and help support children and youth to reach their fullest potential. Families are the core members of the team.

The team should develop a unified vision of what would need to happen for the child to leave foster care. With this concept in mind, the team assesses, prepares for, and implements a plan for the child to safely leave foster care when risk is reduced and the safety and well-being of the child is secure in the family.

Some key principles of effective teaming:

• A group of committed persons, both formal and informal supports, come together to form a working team to collaborate with the child and family. Team members have sufficient knowledge, skills, cultural awareness, authority to act, flexibility to respond to specific needs, and the time necessary to work effectively with the child and family.
• The language, culture, family beliefs, traditions, and customs of the child and family are identified, valued, and addressed in culturally appropriate ways via special accommodations in the engagement, assessment, planning, and service delivery processes.

• The child, parents, family members, and caretakers are active, ongoing participants with the team. They each have a significant role, voice, and influence in shaping decisions made about child and family strengths and needs, goals, supports, and services.

• Everyone on the team has a voice in expressing their perspective on child and family strengths, needs, supports, and services.

• Conflicts are discussed and resolved by focusing on the specific needs of the child and family.

• The child, family, and team collaborate to develop meaningful service plans that address the child’s and family’s needs and enhance their strengths.

• The team monitors the status, progress, and effectiveness of interventions, making adjustments to the service plan when needed.

The teaming process and its membership evolve over time as the needs of the child/youth and family change.
2.9 Using Family Partnership Meetings (FPM)

A FPM is a team approach for partnering with family members and other partners in decision making throughout the family’s involvement with the child welfare system. The team is facilitated by a trained individual who is not the supervisor or service worker for the child or family. It builds upon the strengths of the child, family, and community to ensure safety, a permanent family, and lifelong connections for the child.

Holding the FPM prior to the foster care plan/review being written allows the entire team to provide input and gives all team members the opportunity to discuss any concerns/needs so the team is fully aware of what information will be shared with the court. A FPM should be held prior to the dispositional hearing to develop the service plan with the family and establish the foster care goal and concurrent goal. In the event a FPM was held immediately prior to the removal or within five (5) days of the removal, a Child and Family Team Meeting (CFTM) may substitute for the FPM to develop the initial foster care plan. A FPM should also be held prior to all review and permanency planning hearings to determine the appropriateness of the goal (the outcome of the meeting may or may not be a change of goal) and to determine if there are changes needed in the services provided.

See section 2.10 for more information on CFTMs.

For complete guidance on FPMs, see the Family Engagement section on VDSS’ website.

2.9.1 Addressing five critical decision points

A FPM is required to be held for every family involved with the child welfare agency at five (5) critical decision points. The purpose of the meeting should be to address these decision points:

- Once a CPS investigation or family assessment has been completed and the family is identified as “very high” or “high” risk and the child is at risk of out-of-home placement.

- Prior to removing a child, whether emergency or planned.
Prior to any change of placement for a child already in care, including a disruption in an adoptive placement or a placement or the disruption of a placement in a QRTP (Section 6B.3.1.2).

Prior to the development of a foster care plan for the foster care review hearing and permanency planning hearing. The purpose is to discuss permanency options and concurrent planning, as well as the foster care goal.

When a meeting is requested by the parent (birth, foster, adoptive, or legal guardian), child, or service worker to address one of the four decision points above.

2.9.2 Participants in Family Partnership Meetings

The FPM should include birth parents, youth, other significant parties identified by the birth parents and/or youth, and neighborhood-based community representatives.

Each FPM convened at the critical decision points after a child’s removal should include all the team members invited to previous meetings and should include the foster and/or adoptive parents of the child so that the birth parents and current caregivers can begin to build and/or strengthen relationships to ensure that the child achieves timely permanency.

For children in foster care with a goal of reunification, the service worker shall have face-to-face contact with the birth parents at every critical decision-making point throughout the case, unless the parents cannot be located or parental rights have been terminated (§ 63.2-906). As FPMs are required at critical decision-making points in foster care, this face-to-face contact should be completed at the FPM.

Participants and their respective roles in the FPM are described below:

- **Facilitator.** This individual is trained to lead the group through a solution-focused process. The FPM is facilitated by a trained individual who is not the service worker for the child or family or the supervisor of the case. The facilitator is responsible for keeping the group focused and moving through the decision-making process, allowing family members to actively participate. The facilitator ensures the voices of parents and youth are heard. The
facilitator communicates with the service worker who is working with the child or family to identify any potential emotional or physical safety concerns that may impact the quality of the meeting. When the child is present, the facilitator remains aware of his or her well-being, promotes a safe and protective environment, and translates for the child, when needed. At the end of the meeting, the facilitator provides a summary report to participants outlining decisions, action steps, and any follow-up needed.

- **Birth parents.** The birth parents are recognized as the experts on their family’s needs and strengths. Their presence and involvement is integral to the meeting. While the FPM may proceed without the birth parent as long as other family members are present, there should be careful thought and consideration given to determining whether to have the meeting without the birth parents in attendance. In particular, the agency should decide whether the participation of other family members only will lead to effective decisions, or if the meeting should be rescheduled in order to try again to include parents.

- **Service worker connected to the family.** The service worker first talks with his or her supervisor to determine whether a FPM is needed for the child or family. The service worker is responsible for making the referral for the FPM. The worker relays all relevant information to the facilitator that includes the purpose of the meeting and any potential physical or emotional safety concerns that may impact the meeting, and ensures both the maternal and paternal family and all individuals that are involved with the family are invited to the meeting. The service worker is prepared to provide information to participants about the meeting purpose and provide any information and previous services received by the family. The service worker is responsible for making a decision if absence of consensus or if safety concerns are evident. The worker assesses any safety issues that may potentially come up and communicates those issues to the facilitator. If it is determined that an individual cannot participate due to safety reasons, the worker talks with the facilitator to determine strategies for participation (i.e., conference call, separate meeting.) The service worker prepares the family for the meeting by explaining the FPM process. The service worker also talks with the family to
determine whether child care arrangements have been made for the family during the FPM.

- **Child(ren)/Youth.** In deciding whether or not a child should participate, the service worker considers the child’s developmental and chronological age and the parents’ suggestions and concerns, and consults with others that have a working knowledge of the child’s capacity, such as a therapist or counselor. It is recommended that youth 9 and older, unless otherwise determined, participate in FPMs. This does not preclude involving youth below age 9 if the service worker believes they have the capacity to participate. While all youth are consulted about meeting participants, some youth may not identify whom they would like to attend.

- **Extended family and non-relative supports.** Both maternal and paternal relatives as well as non-relative supports are invited by youth, parents, and/or the service worker as supports, to assist, and/or to be a resource. Their participation is always supported and encouraged. Extended family members are also asked about other individuals involved with the family who may be a potential support.

- **Members chosen by the youth.** For youth 12 years of age and older, they shall be given the opportunity to choose up to two (2) members of the team that are not their service worker or their foster parent. The agency may reject the individual chosen by the youth only if the agency has reason to believe that the individual will not act in the best interest of the youth.

- **Current caregivers (kin, foster).** These individuals are also seen as key team members who assist in providing information regarding the child’s adjustment, progress, and needs, and assist with developing ideas and reaching a decision.

- **Supervisor.** The supervisor of the service worker connected to the family is responsible for being knowledgeable of the case. The supervisor utilizes the meeting as an opportunity to assess the strengths of their worker and identify areas in need of improvement. The supervisor serves as the expert about the process for accessing various services within their locality and ensures that
all agency “non-negotiables” (issues that must be addressed by law, policy, or court orders) are addressed.

- **Community partners.** These individuals are defined by their identity as a member of the family’s community whether based on neighborhood, ethnicity, religion, school, or other connection. They are invited by the agency and/or the birth parents, based on existing partnership to provide support, resource expertise, and an external perspective to decision making. Their presence in the meeting is agreed to by parents.

- **Service providers.** These are persons currently or previously involved with the family who come to the meeting prepared to discuss current or previous services provided to the child and/or family and any current or future recommended service needs.

- **Guardian ad litem (GAL) and CASA volunteers.** These court-appointed representatives responsible for representing the child’s best interest are invited to the FPM. These individuals often have useful information that can help inform the family engagement process. GALs can also give guidance and set parameters around legal issues that may be discussed during the meeting.

- **Other public agency staff.** This group may include home finding, independent living, family preservation staff, adoption staff, adult services staff, benefits workers, or others available to provide expertise/information depending on the purpose of the meeting and the type of FPM.

### 2.9.3 Scheduling Family Partnership Meetings

The service worker and supervisor should discuss the convening and timing of an FPM. Requested meetings should be scheduled within two (2) weeks of the request, or as quickly as possible if safety issues are present. In scheduling these meetings, consideration should be given to the work schedules of parents and other relatives, transportation issues, availability of an interpreter when the parents’ primary language is not English, need for child care, and any other barriers that might prevent parents and relatives from participating.
2.9.4 Paying for Family Partnership Meetings

Local Community Policy and Management Team (CPMT) policies may allow the use of State Pool funds to purchase services necessary to support a structured FPM e.g., trained facilitation.

2.9.5 Documenting the Family Partnership Meeting

All FPMs shall be documented in OASIS, including participants, location, and recommendations. This information is ultimately linked to data on child and family outcomes in order to ensure continuing self-evaluation of the FPM process and its effectiveness. See guidance on Documenting Family Partnership Meetings.

2.10 Using Child and Family Team Meetings

FPMs are only one means to engage the family in decision making. They generally occur infrequently over the course of a case and, therefore, are not sufficient in and of themselves to ensure partnership with family. Additional strategies are needed. VDSS encourages the use of a regular CFTM as a continuation of the work of FPMs. These meetings include the youth, parents, extended family and all service providers. They provide a mechanism by which regular review of services and progress is shared among all the individuals involved in the case and where the family’s needs and preferences routinely inform decision making.

In the matrix below, the FPM and CFTMs are compared and contrasted. The opportunities for family engagement, incorporation of voice and choice and teaming are addressed in both, but differences are also highlighted.

<table>
<thead>
<tr>
<th>Comparison of FPM and CFTM</th>
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<tbody>
<tr>
<td>Family Partnership Meetings (FPM)</td>
</tr>
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</table>

E Section 2 Page 27 of 31 2 Engaging the Child, Family, and Significant Adults
<table>
<thead>
<tr>
<th><strong>Purpose:</strong> To involve birth families (parents and extended family members) in all critical case decisions and to ensure a network of support for the child and the adults who cares for him/her.</th>
<th><strong>Purpose:</strong> To involve birth families (parents and extended family members) in on-going case planning, monitoring and adjusting; to ensure that all team members have access to all information about the case; to ensure that all team members understand the goal(s) of service provision and the current plan to protect the child and to achieve permanency; and to ensure a network of support for the child and the adults who cares for him/her.</th>
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<tbody>
<tr>
<td><strong>When:</strong> At the point that a critical case decision must be made; potential child removal; potential child placement change (placement disruption or change in foster care goal); or reunification.</td>
<td><strong>When:</strong> As often as needed. Ideally, meetings will be held at least monthly and the next one will be scheduled at the end of the current one.</td>
</tr>
<tr>
<td><strong>Who:</strong> family and extended family; youth; social worker; supervisor; family supports as identified by the family; providers (maybe); attorneys (maybe); CASA (maybe); eligibility worker (maybe); community representative; FPM facilitator.</td>
<td><strong>Who:</strong> family and extended family; youth; social worker; supervisor (maybe); family supports as identified by the family; foster and adoptive family or placement representative; school representative; all treatment providers; attorneys; CASA; eligibility worker (maybe) Probation officer (if applicable), etc.</td>
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</tbody>
</table>
| **Logistics:** scheduling to maximize parent and family participation; ideally held in neutral location; consider use of conference calling; and transportation and child care should be provided by LDSS. | **Logistics:** scheduling to maximize full team participation, including parents, foster and adoptive parents and critical extended family members; usually held at LDSS or service provider office; consider use of alternative meeting space and/or conference calling; and transportation and child care should be addressed (meetings are scheduled in advance, so community based or natural resources can be.
**Values based upon:**

- All families have strengths.
- Families are the experts on themselves. Families can make well-informed decisions about keeping their children safe when supported.
- Outcomes improve when families are involved in decision making.

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- All families have strengths.
- Families are the experts on themselves. Families can make well-informed decisions about keeping their children safe when supported.
- Outcomes improve when families are involved in decision making.
- A team is more capable of creative and...

<table>
<thead>
<tr>
<th>Stages of the Meeting/Agenda:</th>
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<tr>
<td><strong>Introduction:</strong> purpose and goal; introduction of participants; and meeting guidelines.</td>
<td></td>
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<tr>
<td>Identify the situation: Define the concern/decision to be made.</td>
<td></td>
</tr>
<tr>
<td>Assess the situation: safety needs; risk concerns; strengths and supports; hx of services; participants’ perception of the situation; and worker recommendation(s).</td>
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<tr>
<td>Develop ideas: brainstorm in three categories, placement/custody, actions to provide safety, and services to reduce risk.</td>
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<tr>
<td>Reach a decision: consensus based decision (if possible) and addressing</td>
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<tr>
<td><strong>Introduction:</strong> names and roles.</td>
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</tr>
<tr>
<td>Review of progress: each team member (starting with parents) provides an update of progress made in the last month and which services have been completed and/or which treatment goal have been met.</td>
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<tr>
<td>Identification of concerns/services needing adjustment: each member (starting with parents) addresses areas of concern and/or what is not working well or may need to be adjusted.</td>
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<tr>
<td>Review of goal(s): team explores fit between progress, services and goals; team members (including family) make recommendations as to improving fit or...</td>
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### Summary of Differences:

| Led by a facilitator.                  | Led by service worker. |
| Supervisor as well as service worker attend. Family participation is the most critical aspect. Extensive pre-work ensures family is engaged in the meeting process. | Supervisor does not always attend; Parent and youth participation is critical. |
| Formal and informal supports are invited and are part of the team. | Extended family participates as the family wishes or as makes sense. |
| Agenda and meeting process are standardized and more formal (reflect importance of decision being made). | Agenda is informal. |
|                                                  | Outcome is action plan for the next several months leading to permanency or safe case closure. |

### Benefits of FPMs:

| Families who are treated with respect can contribute more concretely to the identification of their family and children's needs. | Provides a mechanism for insuring: ongoing family engagement and ongoing learning. |
| When families and extended families are part of the decision making process, they are more likely to participate in services to keep their family together or to complete tasks in order to have their children safely returned. | Ensures timely monitoring and adjustment of services. |
| Children are protected through the | Increases parent, child and extended family buy-in. |
|                                                  | Speeds progress towards permanency or case closure. |
|                                                  | Team decision making results in high |
2.11 Using the Family Assessment and Planning Team (FAPT)

The FAPT plays an integral role in service planning for children involved in the child welfare system who receive services and funding through the CSA. Local CPMT policies determine how the community coordinates family engagement principles with FAPT processes. The LDSS will need to consult CPMT local policies and procedures for complying with CSA and family engagement requirements.