



**207 Remote:  
Introduction to Family  
Group Decision Making (FGDM):  
Part I**

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**For  
The Pennsylvania Child Welfare  
Resource Center**

**University of Pittsburgh,  
School of Social Work  
Pittsburgh, PA**

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*“All names and identities used in this module are fictitious. Any resemblance to actual persons, living or dead, is coincidental.”*

## Acknowledgements

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Pennsylvania Coalition Against Domestic Violence  
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Agency  
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York County Youth Development Center  
A Second Chance Inc.  
Dauphin Department of Human Services

**Agenda for One-Day Workshop on  
207 Remote: Introduction to Family Group Decision Making: Part I**

**Day One**

<b>Estimated Time</b>	<b>Content</b>	<b>Page</b>
40 minutes	Section I: Welcome and Introductions	1
55 minutes	Section II: What is Family Group Decision Making?	8
30 minutes	Section III: Family Group Decision Making Values, Beliefs, and Benefits	14
3 hours, 20 minutes	Section IV: The Family Group Decision Making Process	18
35 minutes	Section V: Wrap-Up and Evaluation	38

# **207 Remote: Introduction to Family Group Decision Making: Part I**

## **Section I: Welcome and Introductions**

### **Estimated Length of Time:**

40 minutes

### **Learning Objectives:**

Participants will be able to:

- ✓ Identify the overall learning points that will be discussed during the training.

### **Method of Presentation:**

Lecture, Individual and Group Discussion, and Activity

### **Materials Needed:**

- ✓ Laptop
- ✓ Screen
- ✓ Zoom Room Flow Chart
- ✓ Managing Zoom Breakout Rooms: Instructor Guide
- ✓ Instructor-Prepared Word Document: WIIFM
- ✓ Instructor-Prepared Word Document: Parking Lot
- ✓ **Appendix #1: Key Point**
- ✓ **Handout #1: PowerPoint (participants will not receive, display in screen share)**
- ✓ **Handout #2: Idea Catcher (participants will not receive, display in screen Share)**
- ✓ **Handout #3: Agenda (participants will not receive, display in screen share)**
- ✓ **Handout #4: Learning Objectives/Competency (participants will not receive, display in screen share)**
- ✓ **Poster #1: Stacking for Success**
- ✓ **Poster #2: Family Group Decision Making...**
- ✓ **Poster #3: Jim Nice Quote 1**
- ✓ **Poster #4: Jim Nice Quote 2**
- ✓ **Poster #5: The Four Stages of FGDM**
- ✓ **Poster #6: The FGDM Meeting Guidelines**
- ✓ **PowerPoint Slide #1: Introduction to Family Group Decision Making (FGDM): Part I (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #2: Section 1: Welcome and Introductions (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #3: Agenda (participants will not receive, share in screen share)**
- ✓ **PowerPoint Slide #4: Learning Objectives/Competency (participants will not receive, share in screen share)**
- ✓ **PowerPoint Slide #5: Introductory Exercise (participants will not receive, share in screen share)**

# **207 Remote: Introduction to Family Group Decision Making: Part I**

## **Section I: Introduction**

### **Instructor Note:**

Typically, all training modules would be conducted in-person. To protect participants' health and safety during this time with COVID-19, Modules have been revised to be conducted remotely by Zoom.

Prior to participants joining the session, set up the Zoom breakout rooms following the Zoom Room Flow Chart, set up all instructor-prepared Word documents needed for the session, and open the online Workshop Attendance Form.

This module may be delivered in one 6-hour training session, or in two 3-hour training sessions. In the case of the latter, the Instructor Guide makes note where each three-hour session starts and ends.

Display **PowerPoint Slide #1 (207 Remote: Introduction to Family Group Decision Making (FGDM): Part I** up on the screen before the class enters the Zoom room. **Prepare a Word document for use when starting (WIIFM).**

### **Step 1: Greeting**

(8 minutes)

**Do:** Greet participants as they join the session. Confirm with participants that they can hear you and see the shared screen. Troubleshoot any technical difficulties. Conduct a final sound and screen sharing check before proceeding.

**Do:** Take attendance, making sure to get a verbal confirmation from participants that they are present. Review the 15-minute rule. Ask participants to notify you right away if they are late joining the session after any of the breaks or if for any reason they need to leave the session today. Share with participants that they will have a 15-minute break for every three hours of training.

**Instructor Note:** It is important to make note of attendance at the beginning of the day of this session and after each break. At the end of Day 1 of this module, attendance must be submitted to CWRC using the online Workshop Attendance Form located here: <http://forms.cwrc.pitt.edu/attendance/>

**Do:** Ask participants to have something ready to jot down a few important notes that they will need to refer to throughout the session. Provide the following and ask participants to take notes:

- Workshop ID number

**Do:** Explain that throughout our session today, you will display materials for participants to see on the screen. You may also put links or documents for them to access in the chat feature.

### **Review of Zoom Guidelines:**

## **207 Remote: Introduction to Family Group Decision Making: Part I**

**Say:** Let's review some guidelines that will help us have a successful session using Zoom.

**Do:** Review Zoom Guidelines including:

- If you are participating in this call by yourself and you have headphones, we suggest using the headphones. This will help you hear better and eliminate echo and other sound issues.
- If you are participating in this call with others in the same room, make sure only one computer or laptop is signed into the Zoom session. This will prevent echo issues during this call.
- If possible, sit in a quiet room with the door closed. If you need to move to a quieter location, we'll take a 15-minute break this morning and you can move at that time.
- If there is background noise around you and you are not speaking, please mute yourself until you are ready to speak. This will prevent everyone else from hearing the background noise.
  - Ask participants to confirm they see the mute button and are able to mute and unmute themselves.
- We encourage and expect that each of you will participate in all the activities in this module, just as you would if we were together in person. Please don't hesitate to ask questions and make contributions throughout the day.
- Ask participants to confirm they see and can use the chat feature at any time if needed.

Ask participants if they have any questions. Provide time for participants to respond and be sure to check the chat feature for any questions.

### **Step 2: Introductions**

(15 minutes)

Introduce yourself making sure to include background and experience working with Child Welfare and/or Human Resources.

Instruct participants that you will be asking them to introduce themselves. Give them some time to organize their response. **\*Can display on screen in a Word document for reference while they organize their response.**

- Ask them to share the county they are from, the number of years in the field of child welfare, their current position, the number of years in a management/supervisory role, whether they have hiring/firing/disciplinary authority, and approximately how many employees they are currently responsible for supervising.

### **Pre-training Considerations:**

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Participants should have received pre-work before the training. As part of the pre-work, they were asked to become familiar with their agency's policies and procedures surrounding Family Group Decision Making (FGDM). In addition, they were asked to bring to the training a copy of their agency's policies surrounding FGDM as well as their agency's FGDM referral form.

Prior to participants' arrival, **PowerPoint Slide #1 (Introduction to Family Group Decision Making (FGDM): Part I)** should be displayed.

Display **Poster #1 (Stacking for Success)**, **Poster #2 (Family Group Decision Making...)**, **Poster #3 (Jim Nice Quote 1)**, **Poster #4 (Jim Nice Quote 2)**, **Poster #5 (The Four Stages of FGDM)**, and **Poster #6 (The FGDM Meeting Guidelines)** prior to the start of the training day and refer to them where applicable. Display **Poster #6 (The FGDM Meeting Guidelines)** beside the Resource Center training guidelines.

If you feel comfortable doing so, it may be beneficial to draw parallels between what participants' experience during the training day and a real Family Group Decision Making meeting. Several parallels are offered below. Feel free to make any additional parallels throughout the training.

- Your role as an instructor is similar to that of a facilitator. Your job is simply to facilitate the learning process. The FGDM facilitator's role is to facilitate the decision making process. You have likely not met any of the participants, similar to a FGDM facilitator, who in most cases has not met any of the FGDM meeting attendees prior to the meeting.
- The individual that coordinated participants' attendance at this training is similar to the FGDM coordinator.
- The concept of guidelines established for the training and the concept of guidelines being established at the FGDM meeting (e.g., the Resource Center training guidelines poster and the guidelines offered on **Poster #6 (The FGDM Meeting Guidelines)**).

It will be necessary to prepare a Word document titled, "Good Purpose Statement." Examples, which will be provided once more in Section V, now follow:

- Develop a plan to support [insert parent/caregiver name here] while always ensuring that [insert child/ youth name here] is safely with [his/her] family. (regarding staying in own home)
- Develop a plan so that [insert child/youth name here] can safely return home. (regarding returning to own home)
- Develop a plan for [insert child/youth name here] to be safe and in a structured environment, so that she can graduate school (generic could apply to in-home, out-of-home, etc.)



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- To celebrate the youth and develop a plan so that the youth can make a successful transition to adulthood (regarding transitions)

It is important to keep in mind that there are likely participants in the training who do not work for a public Children and Youth agency. You will likely have participants who work in areas such as Juvenile Probation, Mental Health, Education, Drug and Alcohol, Faith-Based Community, as well as parents and community members. It will be necessary to make connections for these participants. Also, remember that not all participants will be well versed in the jargon and acronyms that are used by child welfare professionals. It will be important to speak in a language that everyone understands and to take time to clarify certain points and acronyms for these individuals when unfamiliar language is used, not only by you as an instructor, but also by other participants in the training.

### **Step 3: Instructor Introduction and Resource Center Guideline Review**

(4 minutes)

Introduce yourself, providing a brief explanation of your background and experiences with Family Group Decision Making (FGDM), and welcome participants.

Review the guidelines for the Pennsylvania Child Welfare Resource Center (*i.e.*, *The 15-Minute Rule* (which should already be posted in your training room), sign in sheet, and evaluation.

### **Step 4: Review of Agenda, Competency, and Learning Objectives**

(4 minutes)

Note that **Handout #2 (Idea Catcher)**, has been provided for participants to record thoughts or ideas that they gain from the training that will benefit the implementation of FGDM in their community.

Display and review **PowerPoint Slide #3 (Agenda)** and **PowerPoint Slide #4 (Learning Objectives/Competency)**. In addition, refer participants to **Handout #3 (Agenda)** and **Handout #4 (Learning Objectives/Competency)** to ensure participant understanding. Also, briefly discuss the rationale and purpose for the training. Answer any questions, as necessary, and inform participants if their questions relate to a topic that will not be discussed during the training. Any questions that will not be answered throughout the course of the training should be posted on the *Parking Lot*. Note that you will be available during the two breaks to explore further those questions or to provide additional resource information.

### **Step 5: Introductory Exercise/Participant Introductions and “What’s In It For Me?”**

(9 minutes)

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**Facilitator Note:** The ideal team size is 4 members. You must have at least two teams. As participants say their name, list the names in order on the shared screen for participants to see. Starting with the first participant who shared their name, count off by the total number of teams that will result in teams of an appropriate size. List the team number beside each participant's name to reference throughout the session as needed.

- If there are 8 participants or fewer, count off by 2.
- If there are between 9 and 12 participants, count off by 3.
- If there are 13 or more participants, count off by the number of teams that will result in teams of an appropriate size.

**Say:** Ones, you are a team. Twos, you are a team... [etc.].

**Do:** Explain how teams will work together via Zoom on team activities throughout this module. Explain that next teams will work together on introductions. You will review the instructions with the large group, and then provide guidance on how to enter your team's breakout room in Zoom.

**Say:** In this activity, you will work in your team breakout rooms. You will discuss the questions or activity as a team and arrive at a consensus on your team's preferred response. When all teams have decided on a response, we will return to the large group room and debrief the question or activity in a larger group.

Using **PowerPoint Slide #5 (Introductory Exercise)** as a guide for participants, engage the participants in an exercise that has them get to know each other and identifies who and what service entities are represented at the training. Ask participants to share the following:

- Name
- Occupation
- Agency
- One interesting fact about them or their family
- Whether they referred family to/attended/coordinated/facilitated a Family Group Decision Making meeting
- What they want to get from this training (*What's In It for Me?*)

As participants offer their information, use it as a guide to gauge the level of participant knowledge in the room. Adjust delivery as necessary. In addition, as participants offer their *What's In It for Me?* information, capture that information on a Word document. It should take 20 minutes or less to complete the entire exercise.

Tell participants that, as they may have recognized, if there are participants in the training from a variety of systems, FGDM involves numerous systems when it is implemented (e.g., child welfare, probation, drug and alcohol, mental health, school districts, etc.). This practice can be utilized in numerous settings and systems (e.g.,

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working with issues for families, children, church, and elderly). Since many children and families are involved with more than one system, FGDM offers the opportunity for the family to have one plan and be supported by all systems in accomplishing the plan. Participants should understand that to implement FGDM successfully, many of these systems should be represented from the beginning. A great deal of energy has to be put into educating the separate systems and bringing them together to have a voice in implementing FGDM. It is essential that this work is completed during the initial phases of implementation; otherwise, it will be difficult to educate these systems and have them participate effectively in the practice once it is being implemented.

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### **Section II: What is Family Group Decision Making?**

#### **Estimated Length of Time:**

55 minutes

#### **Learning Objectives:**

Participants will be able to:

- ✓ Identify the origins of Family Group Decision Making (FGDM) and its current usage in Pennsylvania.
- ✓ Identify the unique features of FGDM compared to traditional social work practice.

#### **Method of Presentation:**

Lecture, Large Group Discussion, Small Group Breakout Room Activity

#### **Material Needed:**

- ✓ Laptop
- ✓ Screen
- ✓ Instructor-Prepared Word Document: WIIFM
- ✓ Instructor-Prepared Word Document: Parking Lot
- ✓ **DVD #1: Pathways to Permanence**
- ✓ **Handout #5: History of Family Group Decision Making**
- ✓ **Handout #6: The Practice of FGDM vs. Traditional Practice**
- ✓ **Handout #7: Unique Features of FGDM**
- ✓ **PowerPoint Slides #6: Section II: What is Family Group Decision Making?**
- ✓ **PowerPoint Slides #7-8: Bean Exercise Questions**
- ✓ **PowerPoint Slides #9: What is Family Group Decision Making?**
- ✓ **PowerPoint Slide #10: History of Family Group Decision Making**
- ✓ **PowerPoint Slides #11-12: The Practice of FGDM vs. Traditional Practice**
- ✓ **PowerPoint Slides #13-15: Unique Features of FGDM**
- ✓ **Poster #2: Family Group Decision Making...**
- ✓ **Poster #3: Jim Nice Quote 1**
- ✓ **Poster #4: Jim Nice Quote 2**
- ✓ **Poster #5: The Four Stages of FGDM**

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### Section II: What is Family Group Decision Making?

**Instructor Note:** Prior to delivery of this section, ensure that you have **Word Document (Family Group Decision Making...)**, **Word Document (Jim Nice Quote 1)**, **Word Document (Jim Nice Quote 2)**, and **Word Document (The Four Stages of FGDM)**.

**PowerPoint Slides #7-8 (Bean Exercise Questions)** have been developed so that you will need to press the spacebar, down arrow key, right arrow key, or left click the mouse to display each scenario. The scenarios will not all be visible upon the initial display of these PowerPoint slides.

#### **Step 1: Bean Exercise and Introduction to Widening the Circle Polling in Zoom Feature)**

(14 minutes)

##### Zoom Polling Feature -- **Group**

To enable the **Polling** feature for all members of a specific group:

1. Sign into the Zoom web portal as an administrator with the privilege to edit user groups.
2. In the navigation menu, click **User Management** then **Group Management**.
3. Click the name of the group, then click the **Settings** tab.
4. Navigate to the **Polling** option on the **Meeting** tab and verify that the setting is enabled.

If the setting is disabled, click the toggle to enable it. If a verification dialog displays, choose **Turn On** to verify the change.

**Note:** If the option is grayed out, it has been locked at the Account level, and needs to be changed at that level.

5. (Optional) If you want to make this setting mandatory for all users in this group, click the lock icon, and then click Lock to confirm the setting.

Show **PowerPoint Slides #7-8 (Bean Exercise Questions)**. Read the first statement on the *Bean Exercise Questions* PowerPoint slide. Tell participants that, if they or someone in their family (extended or immediate) experienced the circumstance or situation just offered, they are to either use the Zoom feature or on a piece of paper number from 1-10 and have them check off those statements that refer to them. Continue reading each statement, ensuring that participants have time to consider whether the statement applies to them/their family and asking participants to use Zoom polling or sheet of paper if they or their family experienced the circumstance or situation offered. By the end of the exercise, very few individuals will have all their beans in their right hand.

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Ask a few participants to share how their family coped with one of the situations represented by the beans they noted. It is not necessary that participants disclose which family member they are discussing. Share that all of these questions are ways that a family could get involved with child welfare services. Ask participants what they believe to be the purpose of this exercise. Two possible purposes follow:

- To assist participants in understanding that any family can become involved in “the system,” thereby creating a sense of commonality between participants and the families with whom they work; and
- To have participants realize that the families who go through the Family Group Decision Making (FGDM) process are often very similar to their own families.

Ask participants whose families responded to the identified issues by pulling together to support one another. Ask them to offer if they believe this approach would be beneficial as well as why. At this time, tie in the concept of Widening the Circle in relation to ensuring that a family must have the proper support network in place to help them through difficult times. Often times, the families we work with do not have needed supports in place to successfully deal with life circumstances. Explain that FGDM efforts work toward Widening the Circle and identifying much more than just the nuclear family as participants. When Widening the Circle, the family decides who will participate and who they want involved in helping create their plan – except for the child welfare professional, who must be present at the meeting and must accept the plan. When Widening the Circle occurs, the family is empowered to make the decisions for its members.

**Instructor Note:** You may want to use a drawing on flip chart paper to illustrate the widening of the circle (*i.e.*, typical families involved in the children and youth system before and after Widening the Circle).

### **Step 2: Review of Jim Nice Quotes** (5 minutes)

Present that FGDM is an alternative method for developing the Family Service Plan. The best way to describe FGDM is with the quotes on **Poster #2 (Family Group Decision Making...)**. Please display **PowerPoint Slide #9: What is FGDM?** to highlight this definition. Then show **Poster #3 (Jim Nice Quote 1)**, and **Poster #4 (Jim Nice Quote 2)**. Ask a volunteer to read the quote on **Poster #2 (Family Group Decision Making...)**. Explain that the first quote differs from traditional practice in many ways. One way in which it differs is that, in traditional practice, families are often expected to attend agency meetings where service providers recommend a level or type of service. The family is then expected to follow all agency recommendations. Ask a volunteer to read **Poster #3 (Jim Nice Quote 1)**. When using FGDM, this quote emphasizes the family’s ownership of the meeting as well as the honor it truly is for a family to choose to invite a professional to their family meeting. Share that FGDM encourages family empowerment and family involvement including extended family, friends, neighbors, community supports, etc. FGDM respectfully encourages the family

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to come together as the best people to make short and long-term decisions for its members. Share that one of the principles from Kinpower in New Zealand is “Your own family as your best guide.” Invite participants to think about their own family, struggles and life experiences. Direct participants to **Poster #4 (Jim Nice Quote 2)** and read the poster aloud. Family Group Decision Making speaks to the simplistic and innate way families come together to take care of their own.

### **Step 3: History of FGDM**

(5 minutes)

Provide a brief history of FGDM using **PowerPoint Slide #10 (History of Family Group Decision Making)** and **Handout #5 (History of Family Group Decision Making)**. Explain that Family Group Decision Making first became known internationally when it became law in New Zealand, with the 1989 Children, Young Persons, and their Families Act. This act established federal legislation that made it mandatory for all serious child welfare and juvenile justice cases to participate in the FGDM process. The indigenous people of New Zealand, the Maoris, played a central role in this practice, when they presented “PUAO-TE-ATA-TU” (DAY BREAK) to the Department of Social Welfare. In this report, they made 13 recommendations that were the foundation of the Maori project, New Zealand’s first efforts at Family Group Conferencing. This practice spread from New Zealand to Australia, Great Britain, Ireland, Europe, Canada, and the United States. Around the same time, Larry Graber, a manager in Oregon’s Children Services, created the Family Unity Model and with the help of Jim Nice and other associates introduced FGDM in Oregon and other states. Since the practice was introduced in the United States approximately 20 years ago, it has gradually grown and is currently being implemented in over 35 states and hundreds of counties across the United States (American Humane Association, 2010: Conference Announcement).

### **Step 4: Introduction to the Four Stages of FGDM and Comparison of FGDM and Traditional Practice (Using Chat Feature)**

(18 minutes)

Using **Poster #5 (The Four Stages of FGDM)**, explain that there are four stages to the FGDM process.

Have a large group discussion and ask them to compare their understanding of FGDM to their current/traditional case practice. What is different? What is the same? Ask each group to record their responses in the chat room.

Continue large group discussion on traditional practice. Below are likely responses:

- Worker develops the plan in the office with little input from the family; and,
- Worker only has one or two family members involved in developing the plan, *etc.*

Record key concepts on prepared work document and gain group consensus on what traditional practice looks like. After this discussion, describe the FGDM planning

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process using **PowerPoint Slides #11-12 (The Practice of FGDM vs. Traditional Practice)** and **Handout #7 (The Practice of FGDM vs. Traditional Practice)**.

Display **PowerPoint Slides #13-15 (Unique Features of FGDM)** and screen share **Handout #7 (Unique Features of FGDM)** and highlight the unique features that make FGDM different. Offer the fact that, beneficial to the agency and related professionals, the family's issues or problems typically create the content and context of the meeting. In FGDM, the concentration is first on the strengths and then on the concerns that can be addressed using those identified strengths of the family.

Paul Sivak, (University of California, Stanislaus) first presented that FGDM is transformational because FGDM requires individuals and entire systems to change their thinking and to change how they do business. FGDM challenges some contemporary ideas as well as how certain agencies conduct business.

Traditionally, human services agencies see their role as one in which they direct and educate misguided and uninformed families. FGDM views the family as the best resource for themselves with formal supports acting as a small piece of the larger picture. FGDM challenges communities to build partnerships and create bonds that previously might not have existed. It takes a lot to change an entire system's way of thinking, but that is just what happens when FGDM is implemented well.

In addition to the previously shared material, FGDM offers the unique concept of speaking in the language of concerns. It is important that participants understand that speaking in the language of concerns allows people to talk about how they feel in an appropriate manner. The language of concerns is also usually easier to hear from someone, including other family members (e.g., "I am concerned about..." vs. "Your problem is...").

### **Step 5: Pathways to Permanence Video**

(13 minutes)

**Instructor Note:** As different DVD players may offer different timing, you will need to cue the video before the training to be ready to play it in this section. The portion of the **DVD #1: Pathways to Permanence** at which to start (roughly 5:23) reveals a young woman with red hair stating, "While working on this film, we visited some communities that are using a very progressive idea to help families keep their children from bouncing around in foster care." The portion at which to end viewing (roughly 11:28) reveals a clip, set to music, of a family finishing their conference.

Show the **DVD #1: Pathways to Permanence** (5:23 to 11:28) via this link: <http://www.pacwrc.pitt.edu/Curriculum/207IntroToFGDMVideos.html>. This portion of the video offers information about promising practices in family engagement – one of which is Family Group Decision Making. After viewing the video, ask participants, as a large



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group, to offer some of the unique features that they observed in the video compared to the traditional approach to practice.

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### **Section III: Family Group Decision Making Values, Beliefs, and Benefits**

#### **Estimated Length of Time:**

30 minutes

#### **Learning Objectives:**

Participants will be able to:

- ✓ Identify the values and beliefs of FGDM.
- ✓ Identify the need for and importance of a paradigm shift.
- ✓ Identify the benefits of FGDM to families, communities, and workers.

#### **Method of Presentation:**

Lecture, Large Group Discussion

#### **Material Needed:**

- ✓ Laptop
- ✓ Screen
- ✓ Zoom Room Flow Chart
- ✓ Managing Zoom Breakout Rooms: Instructor Guide
- ✓ Instructor-Prepared Word Document: WIIFM
- ✓ Instructor-Prepared Word Document: Parking Lot
- ✓ **Appendix I: Word Document: Key Points**
- ✓ **Handout #8: The Values and Beliefs of FGDM (participants will not receive, display in screen)**
- ✓ **Handout #9: Benefits of FGDM (participants will not receive, display in screen)**
- ✓ **PowerPoint Slide #16: Section III: Family Group Decision Making Values, Beliefs, and Benefits (participants will not receive, display in screen)**
- ✓ **PowerPoint Slides #17-18: The Values and Beliefs of FGDM (participants will not receive, display in screen)**
- ✓ **PowerPoint Slide #19: Benefits of FGDM (participants will not receive, display in screen)**
- ✓ **PowerPoint Slide #20-21: FGDM in Pennsylvania (participants will not receive, display in screen)**

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### **Section III: Family Group Decision Making Values, Beliefs, and Benefits**

#### **Step 1: Key Points Activity**

(13 minutes)

**Instructor Note:** Ensure that **Appendix #1 (Key Point)** is posted on a Word document, as it will be needed to facilitate the next activity. You can use breakout rooms for 5 minutes or use the Zoom polling feature.

**Instructor Note:** The ideal team size is 4 members. You must have at least two teams. As participants say their name, list the names in order on the shared screen for participants to see. Starting with the first participant who shared their name, count off by the total number of teams that will result in teams of an appropriate size. List the team number beside each participant's name to reference throughout the session as needed.

- If there are 8 participants or fewer, count off by 2.
- If there are between 9 and 12 participants, count off by 3.
- If there are 13 or more participants, count off by the number of teams that will result in teams of an appropriate size.

**Instructor Note:** The **Zoom Room Flow Chart** and **Managing Zoom Breakout Rooms: Instructor Guide** are resources should you have questions about the Zoom breakout room process.

**Say:** In this activity, you will work in your team breakout rooms. You will discuss the questions or activity as a team and arrive at a consensus on your team's preferred response. When all teams have decided on a response, we will return to the large group room and debrief the question or activity in a larger group.

**Say:** Before you conclude your time in your team breakout room, please identify one team member to report out your team's response when we are back together as a large group.

List on a Word document the four key points from **Appendix #1 (Key Point)** for the breakout rooms. Review each key point, asking volunteers to read each key point. Explain that these five key points were chosen because they represent the heart of FGDM.

Next, participants will breakout into four rooms and have them choose a key point to discuss. Give the participants about five minutes to explain the significance of their chosen key point to each other in their small groups. Then, as a large group, move from

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point to point asking the participants to explain the significance of that principle. This activity recognizes that FGDM values and beliefs are universal and participants share how they, as individuals, relate to their values and beliefs. It is very rare that an individual does not identify with any of the FGDM convictions.

### **Step 2: Values and Beliefs of FGDM**

(4 minutes)

Tell participants that having an understanding of what Family Group Decision Making (FGDM) is sets the stage to explore the values and beliefs inherent to FGDM. Display **PowerPoint Slides #17-18 (The Values and Beliefs of FGDM)**, screen share **Handout #8 (The Values and Beliefs of FGDM)**, and review both items. Give participants the opportunity to process through each point and look for validation for different values and beliefs. Emphasize each value and belief and stress that each is the backbone of the practice. These values and beliefs shape the practice and make it possible for those who implement it to believe in it and allow it to transform their agency and how they do business. The list of values of FGDM comes from Jim Nice (Family Unity Project) and the Pennsylvania FGDM Leadership Team.

### **Step 3: Presence of FGDM Values and Beliefs within the Agency**

(4 minutes)

Once everyone returns to their tables, engage the larger group in a discussion surrounding how participants demonstrate these values in their agency. Have participants compare the values of their current agency practice with **PowerPoint Slides #17-18 (The Values and Beliefs of FGDM)**. Ask participants to identify some shifts that could be made within their organization to embrace the FGDM values more in their daily work.

**Instructor Note:** Have any research you come across available for individuals who may want access to this information. Benefits that are stated as statistically significant are findings from studies that are cited from the [American Humane Association](#) and can be found in the References. This section would be a good place to add anecdotes to illustrate the material further.

### **Step 4: FGDM in Pennsylvania**

(9 minutes)

Now that the group discussed FGDM, and the associated values and beliefs, ask the group to identify what they believe are likely benefits of FGDM. **Display PowerPoint Slide #19 (Benefits of FGDM)**. Record the group's responses on a Word document. After this discussion, screen share **Handout #9 (Benefits of FGDM)**. Review both items in relation to the list of benefits participants just created. During this discussion, use anecdotes to illustrate the benefits. Ask participants if they have seen any of these benefits in their practice and encourage them to share these experiences.

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Based on anecdotal information and participants' experiences with FGDM participants have developed a list of benefits. Pennsylvania continues to recognize the potential of FGDM. The FGDM Evaluation committee has created standardized tools for counties to use to gather feedback about FGDM participation to measure impact and implementation of FGDM. Display **PowerPoint Slides #20-21 (FGDM in Pennsylvania)**. These forms are obtainable at <http://www.pacwrc.pitt.edu/FGDM.htm> and [engagepa.pitt.edu](http://www.pacwrc.pitt.edu/engagepa.pitt.edu) or by contacting The Pennsylvania Child Welfare Resource Center.

The evaluation focuses on participants' experiences in FGDM conferences and adherence to the FGDM model with regard to family leadership, community partnerships, and cultural safety. Family leadership includes the extent to which participants respect and support the family as the driving force in developing the plan. Community partnerships examine role clarity and conference preparation. Cultural safety examines the extent to which the coordinators conduct the conference in a way that felt right to the family group.

# **207 Remote: Introduction to Family Group Decision Making: Part I**

## **Section IV: The Family Group Decision Making Process**

### **Estimated Length of Time:**

3 hours, 20 minutes

### **Learning Objectives:**

Participants will be able to:

- ✓ Recognize that FGDM requires extensive preparation.
- ✓ Identify the basic components of each phase.
- ✓ Identify the key components of the FGDM referral process.
- ✓ Describe how to identify an appropriate family for FGDM.
- ✓ Identify how a referral source explains FGDM to a family.
- ✓ Explain how a coordinator evaluates the appropriateness of the referral in Stacking for Success.
- ✓ Understand the role of all parties involved in the FGDM process.

### **Method of Presentation:**

Lecture, Small Group Discussion, Large Group Activity

### **Materials Needed:**

- ✓ Laptop
- ✓ Screen
- ✓ Zoom Room Flow Chart
- ✓ Managing Zoom Breakout Rooms: Instructor Guide
- ✓ Instructor-Prepared Word Document: WIIFM
- ✓ Instructor-Prepared Word Document: Parking Lot
- ✓ **Appendix #2: Word Document Referral Stage Activity Concepts**
- ✓ **Handout #10: Stacking for Success (participants will not receive, display in screen share)**
- ✓ **Handout #11: Presenting FGDM to Families (participants will not receive, display in screen share)**
- ✓ **Handout #12: Identifying a Purpose (participants will not receive, display in screen share)**
- ✓ **Handout #13: Referral Form (participants will not receive, display in screen share)**
- ✓ **Handout #14: The Four Stages of FGDM and Related Roles (participants will not receive, display in screen share)**
- ✓ **Handout #15: Pre-Conference (participants will not receive, display in screen share)**
- ✓ **Handout #16: The FGDM Meeting (participants will not receive, display in screen share)**
- ✓ **Handout #17: The FGDM Meeting Guidelines (participants will not receive, display in screen share)**
- ✓ **Handout #18: Keys to Successful Private Family Time (participants will not receive, display in screen share)**

## **207 Remote: Introduction to Family Group Decision Making: Part I**

- ✓ **Handout #19: Plan Parallels (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #22: Section IV: The Family Group Decision Making (participants will not receive, display in screen share)**
- ✓ **Process (participants will not receive, display (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #23: FGDM Practice (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #25: Presenting FGDM to Families (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #26: A Purpose Statement Should... (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #27: Pre-Conference (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slides #28: Who Attends FGDM Conferences (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #29: Phase 1: Welcome & Introductions (participants will not receive, display in screen share) (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #30: Phase 2: Information Sharing (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #31: Phase 3: Private Family Time (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #32: Keys to Successful Private Family Time (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #33: Plan Documentation (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #34: Phase 4: Presentation of Family Plan and Acceptance (participants will not receive, display in screen share)**
- ✓ **Poster #1: Stacking for Success**
- ✓ **Poster #5: The Four Stages of FGDM (revisited)**
- ✓ **Poster #6: The FGDM Meeting Guidelines**

## **Section IV: The Family Group Decision Making Process**

### **Step 1a: Review of Sections I through III**

(4 minutes)

Recap previously learned information from Section II and Section III as a segue into the next portion of the training. Share that Section II defined Family Group Decision Making by stating that the process is a family gathering that encourages family decision making and empowerment.

Also in Section II, a brief history was discussed, FGDM was compared to traditional practices, and the unique features were discussed. Section III discussed the values and beliefs, as well as the benefits associated with the FGDM process.

### **Step 1b: FGDM Practice**

(4 minutes)

Display **PowerPoint Slide #23 (FGDM Practice)**. The FGDM process focuses on the three main goals of safety, permanence, and well-being for children. FGDM practice supports these main goals by promoting strength-based, family-driven, culturally appropriate, and collaborative approaches.

### **Step 2: Source of Referrals and Stacking for Success**

(20 minutes)

Display **Poster #5 (The Four Stages of FGDM)**. In doing so, remind participants about the four stages and inform them that they will now take a closer look at each of the stages. Tell participants that the first stage they will see is the referral stage.

Explain the purpose behind conference referrals or why referrals for FGDM are given. Conference referral purposes may include:

- Keeping child in a safe and stable home
- Reunification
- Support caregivers
- Developing or revising family treatment plan
- Placement prevention
- Transitional conference

Before proceeding, it is necessary to acknowledge that each county's practice may look a little different depending on their community and how FGDM practice is implemented. Despite the differences in practice, the general principles are consistent.

Note that the referral process may look different in different counties. Referrals can be generated from a number of places depending upon the county and their stage of implementation. Referral sources might include child welfare, juvenile probation, mental



health, drug and alcohol, community members, and self-referrals, based on a county's protocol. Some counties start with referrals from children and youth and juvenile probation and then expand the referral sources.

As part of pre-work – distributed to participants in the form of a letter they received prior to the training – participants were asked to:

- Become familiar with their agency's policies and procedures surrounding Family Group Decision Making (FGDM) prior to the training
- Bring to the training, a copy of their agency's policies surrounding FGDM as well as their agency's FGDM referral form

Ask participants to locate their policies and procedures at this time. Facilitate a large group discussion surrounding agency policies and procedures as they pertain to identification of cases for FGDM as well as their referral processes. Tell participants that, when considering making a referral for a family to go through the FGDM process, Jim Nice suggests six questions to consider.

Show **PowerPoint Slide #24 (Stacking for Success)**, reference **Poster #1 (Stacking for Success)**, and screen share **Handout #10 (Stacking for Success)**, clarify what is involved in being committed to the practice and what makes a family appropriate for FGDM. Note that Stacking for Success is divided into six layers. Be sure to underscore the points below about Stacking for Success. When discussing each question, in conjunction with the points offered below, ask participants to offer who they believe needs to answer each question (*i.e.*, referral source, family, or both).

**Instructor Note: Poster #1 (Stacking for Success)** has been provided, in addition to the PowerPoint slide and handout, for you to reference later as you feel is appropriate to avoid the need to search for the PowerPoint slide.

While some of the points on the PowerPoint and handout are self-explanatory, a few of the questions warrant further clarification. In addition to any points that you would like to offer to clarify what is involved with Stacking for Success, consider offering the following points:

- 1: With regard to the first level, "Do you have hope for the family? Do you believe the family has the ability to come together and be successful in creating a family plan?" participants must further consider the fact that:
  - It is essential that the referral source have hope for the family's success. In addition, for the family to succeed in the plans they create, they must believe that the referral source believes in their ability to succeed. This belief on the part of the referral source is evident when the referral source supports the family with their follow up and implementation of the family's plan.

- 2: With regard to the second level, “Is the family voluntarily participating and have they agreed to participate in the Family Group Decision Making Process?” participants must further consider:
  - How was FGDM described/offered to the family? Were they coerced into taking part; or, were they shown the value of the process and chose to take part in it based on its own merit?
  - For FGDM to have the best chance of success, Jim Nice stresses that the FGDM process must be a voluntary one. Think about it from the perspective of the family. Would one be more willing to take part in an effort when asked or when they are told? Moreover, consider how lasting change truly is when one is asked to make that change vs. when one is mandated to make change.
- 3: With regard to the third level, “Is the purpose clear and understandable? Does it motivate everyone to attend?” participants must further consider:
  - What is the purpose?
  - How the purpose was developed?
- 4: With regard to the fourth level, “Can the people invited accomplish the purpose?” participants should know:
  - That Jim Nice often asks, “Are there enough berries to make the pie?” In other words, does the family have a good resource network to accomplish the purpose and follow through with the plan?
- 5: With regard to the fifth level, “Are you willing to attend the conference and consider the family plan?” participants must be aware of the fact that:
  - If the referral source is not willing to attend the meeting and or consider the family’s plan, an FGDM meeting should not be held. Other engagement efforts should be used to develop a Family Service Plan.
- 6: With regard to the sixth level, “Are you willing to help the family with the follow up?” participants must consider:
  - Whether the referral source is truly committed to the practice and the family, if not, the family’s chances for success are much lower.

After the referring worker answers the Stacking for Success questions, if doubts or other questions exist (e.g., about timing and family readiness), the referring worker should then talk with their supervisor and consider talking with their FGDM Coordinator – in the best of all circumstances, at the same time. Discussions with supervisors and coordinators will assist referring workers and other involved professionals to better assure that families have a safe meeting environment and an opportunity for success.

### **Step 3: Stacking for Success Small Group Activity (Breakout Rooms)**

(25 minutes)

Tell participants, now that they considered the concepts necessary to “stack for success,” they will be given an opportunity to apply their learning to a family on their caseload. In the following activity and throughout the training, participants will be asked to discuss real cases on their current caseload. In doing so, it will be necessary that they only refer to individuals on their caseload using first names (and last initials, if necessary).

**Instructor Note:** Another delivery option exists for the remainder of the content. Whether you choose this option will be left to you and should be based on group size and dynamics. In this option, allow participants to break into four groups, as noted below, and have the four groups discuss their cases. After the groups discuss their cases, allow them to process out background information as a large group and choose two of the four cases on which to work for the remainder of the session. As the method of delivery written into content is the preferred option (*i.e.*, that participants work on four separate cases), the remaining content will reflect that method. If you choose to deliver via the method in this instructor note, you will have to adjust delivery and timing on your own. The method in this note may prove useful when working with large groups with talkative individuals.

When participants finish their discussions and believe that the case is a good FGDM case based on having answered the Stacking for Success questions, be prepared to challenge them to ensure that the case is indeed a good case with which to move forward. An example might include participants believing it is a good case despite having no hope for the family to succeed. In essence, they are setting the case up for failure. Again, challenge them when applicable.

Next, participants will return to their small breakout room groups. Once participants form small groups, tell them that it will be critical to uphold confidentiality.

**Instructor Note:** As a reminder, **Managing Zoom Breakout Rooms: Instructor Guide** is a resource for you, should you have questions about Zoom breakout room functionality.

Ask participants, in their small groups to discuss cases on their current caseload that they feel are appropriate for referral to the FGDM process – meaning that they meet the criterion identified on **Handout #10 (Stacking for Success)**. Tell participants, in reviewing their cases, that each small group should decide on one case at their table with which to proceed. They will continue to use the identified case for subsequent activities throughout the day. After participants identify a family they believe is a good candidate for Family Group Decision Making, ask each small group to provide a brief background on their chosen family as well as how they meet the criterion for questions one, two, five, and six listed on **Handout #10 (Stacking for Success)**. Questions six,

two, one (and possibly five) are the only questions that participants, as the referral sources, can answer independently. The other questions are decisions made by the family or with the family.

#### **Step 4: Presenting FGDM to Families** (5 minutes)

Now that participants discussed how the referral source will answer the Stacking for Success questions that pertain to referral sources, they must consider how the family might answer the Stacking for Success questions that pertain to them. For families to have a position regarding FGDM, they must first be well-informed about the FGDM process.

Display **PowerPoint Slide #25 (Presenting FGDM to Families)** and screen share **Handout #11 (Presenting FGDM to Families)** and review. The referral source completes the appropriate referral forms/referral process and notifies the coordinator that the family is interested in the FGDM process. Share that the county's referral forms offer a brief overview of the family and their situation, basic demographic information, and the reason for the referral. Tell participants that the coordinator has to ensure the referral source is committed to the practice and truly believes the family can participate in the FGDM process safely and successfully.

**Instructor Note:** Emphasize that depending on the county, the referral process may be different (*i.e.*, in some counties, the supervisor must sign off on the referral before it goes to the coordinator).

### **END OF 1<sup>ST</sup> PART OF 3-HOUR SESSION**

### **2nd PART OF 3-HOUR SESSION**

Welcome everyone back to the 2<sup>nd</sup> Part of the 3-hour session for FGDM. Review some of the highlights briefly from the 1<sup>st</sup> Part of the 3-hour session. Have participants recall the (1) The Practice of FGDM vs. Traditional Practice), (2) some of the unique features, (3) values and beliefs and benefits of FGDM and the and (4) Stacking for Success).

Then let the participants know that we will start this session with FGDM Purpose Statements.

#### **Step 5: FGDM Purpose Statements** (10 minutes)

Tell participants that they should notice that step four of Stacking for Success is the identification of a clear and understandable purpose for the meeting. While part of the coordinator's role is to help refine the purpose statement, it is the role of the family and referral source to discuss the potential purpose of the FGDM meeting. Without knowing

it, families will usually create goals that focus on, but are not limited to, the Adoption and Safe Families Act permanency goals:

- Reunification with parent
- Placement with a permanent guardian
- Placement for adoption after parental rights are terminated
- Placement with a fit and willing relative
- Another planned permanent living arrangement (APPLA)

With this in mind, it is important that the referral source be able to develop a detailed and goal-oriented purpose statement.

Display **PowerPoint Slide #26 (A Purpose Statement Should...)** and review the components of a well-developed purpose statement. Emphasize the importance of establishing a purpose for the meeting by underscoring that purpose statements:

- Serve to motivate meeting participants and provide focus for coordination and discussions during the actual meeting
- Will vary from family to family and situation to situation
- Should connect back to the outcomes of safety, permanence, and well-being; balanced and restorative justice; and/or other agency outcomes

**Instructor Note:** Ahead of time, it will be necessary that you prepare a flip chart titled, “Purpose Statements.” Example purpose statements follow; however, feel free to use your own. If creating your own, offer more than one statement, trying to offer statements that reflect the Adoption and Safe Families Act permanency goals. The goals are reunification with parent; placement with a permanent guardian, placement for adoption after parental rights are terminated, placement with a “fit and willing relative,” and “another planned permanent living arrangement” (APPLA).

- Develop a plan to support [insert parent/caregiver name here] while always ensuring that [insert child/ youth name here] is safely living with [his/her] family. (regarding staying in own home)
- Develop a plan so that [insert child/ youth name here] can safely return home. (regarding returning to own home)
- Develop a plan for [insert child/ youth name here] to be safe and in a structured environment so that child/youth can graduate school. (generic could apply to in-home, out-of-home, etc.)
- To celebrate the youth and develop a plan so that the youth can make a successful transition to adulthood (regarding transitions)

Leaving **PowerPoint Slide #26 (A Purpose Statement Should...)** displayed, show the Word document that you prepared earlier – which offers sample purpose statements – and compare the purpose statements to the PowerPoint slide. Make sure to identify, in

the sample purpose statement, the components on the PowerPoint slide. In conjunction with **PowerPoint Slide #26 (A Purpose Statement Should...)**, tell participants how the purpose you offer on the Word document is an example of a best practice purpose statement.

### **Step 6: Purpose Statement Large Group Activity (Breakout Rooms)** (10 minutes)

Tell participants that, since they now have an idea of what a purpose statement should look like, they will have a chance to create a purpose statement for the family they previously identified in their small groups.

It is crucial to tell participants that creating a purpose statement must always be done with the family. While the referring worker may have an idea of what the purpose “should” be, the referring worker must engage the family to discover what they believe the purpose of the meeting is. The referring worker and the family may work together on the purpose; however, the family must be the driving force behind the purpose and should not be coerced into choosing a certain purpose. Times may exist when a coordinator negotiates – given the coordinator’s neutral stance – with the referring worker and the family to come to consensus on a purpose; however, again, the family must be the driving force behind the purpose and should not be coerced into choosing a certain purpose. The purpose should always be in the family’s own words. It is only for training purposes that participants are creating a purpose statement without family input.

**Say:** In this activity, you will work in your team breakout rooms. You will discuss the questions or activity as a team and arrive at a consensus on your team’s preferred response. When all teams have decided on a response, we will return to the large group room and debrief the question or activity in a larger group.

**Say:** Before you conclude your time in your team breakout room, please identify one team member to report out your team’s response when we are back together as a large group.

Continue to display **PowerPoint Slide #26 (A Purpose Statement Should...)**. Screen share **Handout #12 (Identifying a Purpose)**. Tell participants that the handout contains the information on the PowerPoint slide revealing what a good purpose statement includes/does. Ask one of the small groups to volunteer their identified case for use by the large group to practice creating a purpose statement. Facilitate a large group effort to develop a purpose statement for the chosen case. Tell participants to reference **Handout #12 (Identifying a Purpose)**. Allow approximately 5 to 10 minutes for this discussion.

Offer suggestions for change where appropriate. Participants will likely offer purpose statements that are actually Bottom-Line Concerns (e.g., the child must not have any contact with the perpetrator of sexual abuse, the mother must participate in drug/alcohol treatment, the child must be supervised, the child’s medical needs must be met). When

this is the case, it will be important to help participants understand why their response is not a purpose statement but is rather a Bottom-Line Concern. When they offer Bottom-Line Concerns as purpose statements, you may simply ask them, “What would happen if that were not accomplished?” They may respond by stating the potential outcome of that Bottom-Line Concern not being met (e.g., placement, continued placement, etc.). Explain that this outcome is the focus of your purpose statement. If the child is currently residing in their own home and the desired outcome is to avoid placement, potential purpose statements may include, “To maintain the child safely in their own home,” “To maintain the child safely with family,” etc. If the desired outcome is for the child to exit placement, potential purpose statements may include, “To return the child safely to their own home,” “To maintain the child safely with family,” etc. Note that all purpose statements focus on the child.

Also, draw attention to the fact that the purpose statements referencing the child residing with family should not specifically state the mother or father. If parents are separated, divorced, or otherwise not residing together, the purpose statement should not suggest that the plan is for the child to live with one parent specifically. This decision should be left to the family. Ask participants, “If the purpose statement suggests that the child return to the mother, is this purpose motivating for the father and the father’s side of the family?” Participants should respond in the negative. It is important to remember that the purpose statement must motivate all parties.

### **Step 7: Referral Form**

(14 minutes)

Tell participants that we are now going to assume participants and their identified family answered affirmatively to all of the Stacking for Success questions, as they were clearly unable to get the family’s answers to the questions specific to them at this time. As such, we are now ready to make a referral.

Screen share **Handout #13 (Referral Form)** and briefly review the sample referral form. Reinforce the fact that this is only a sample form. Agency forms are diverse in setup and content and might look very different. Ask participants to locate their agency’s referral form, which they were asked to bring to the training as pre-work. Ask volunteers to share the differences and similarities between their referral form and **Handout #13 (Referral Form)**. Is there any information that their agency’s referral form requires that they feel is beneficial that is not listed on the handout? Is there any information on the handout that they feel would be beneficial to incorporate on their agency’s referral form?

Ask participants to answer the following questions while considering their small group’s identified case:

- Can the referral form be completed by the referral source only?
- Can the entire form be completed at this point?
- What additional information would one need?
- How would one get that information?

Emphasize that participants do not currently have all the information that they need to complete a referral form. Ask participants who they think would know all of the information. Participants should respond that the family would know this information. Stress the importance of having the referral source involve the family in the identification of referral information and suggest that this may be accomplished when the idea of FGDM is presented to the family.

Explain that the information gathered through the referral process and form is provided to the coordinator. This transfer of information might occur during a face-to-face meeting with the referral source or by using other methods. Note that during the referral information transfer, the coordinator will explore whether or not the referral source feels that FGDM is an appropriate option for the referred family – likely by asking questions similar to those on the Stacking for Success handout.

**Step 8: The Four Stages of FGDM and Related Roles: Referral Stage Small Group Activity (Survey or simultaneous chat feature as a large group)**  
(14 minutes)

**Instructor Note:** The points associated with the Referral Stage Activity are available as **Appendix #2 (Referral Stage Activity Concepts)**. This activity will assist participants in better understanding concepts associated with the referral process (one of the learning objectives for the curriculum) – specifically the roles of those involved in the process.

Tell participants that one of the learning objectives for the curriculum is to “Identify concepts involved in the FGDM referral process.” To help accomplish this objective, we are going to conduct a contest that will gauge what they already know about who does what (*i.e.*, roles) during the FGDM referral process.

Ask participants as you read a role share in the chat room which one does it refer to:

- Family
- Referral Source
- Coordinator

Tell participants that we are placing heavier emphasis on the referral source’s role, as this training is intended to provide those who do not plan to be coordinators or facilitators with the needed information to make referrals and participate in the process. Tell participants that they will consider the remaining stages and their related roles as you proceed through the training.

**Step 9: FGDM Stage II: Preparation**  
(5 minutes)



Displaying **Poster #5 (The Four Stages of FGDM)**, explain that once a referral is accepted, the next stage is Preparation. The purpose is to set the stage for the meeting, ensuring that all parties who should be involved are involved. In doing so, it is the coordinator's responsibility to make sure that all parties are all on the same page regarding the meeting purpose and fully understand the process, the benefits, and their roles in the process. The FGDM meeting tends to be the central focus of the process. Because the meeting tends to be the central focus, the Preparation stage of the process tends to occur quickly (and gets short-changed) or does not occur at all. However, cheating this stage or skipping it entirely is counterproductive, as literature says that ineffective preparation and planning will likely result in an ineffective FGDM meeting. Research indicates that 22 to 35 hours is the standard time spent preparing for a meeting. The length of time can prove challenging, as there are time constraints placed on the situation. Despite the challenges, it is crucial that every effort is made to prepare adequately for the FGDM meeting, as proper preparation will better ensure that the remaining stages progress more smoothly.

As mentioned when discussing the purpose of the Preparation stage, it is crucial that the right people are at the table. One of the coordinator's roles is to help the family identify who the "right" people are – keeping in mind that the FGDM meeting is the family's meeting, as such, the family decides who will be part of their meeting. Reminding participants of the discussion earlier in the morning regarding Widening the Circle, ask them to consider the case that they identified in their small groups and consider what connections are known to exist. For example, do they know the father's location or are they aware of other family members, *etc.*?

### **Step 10a: Pre-Conference** (5 minutes)

Explain that the next step in preparation is the Pre-Conference meeting with the service providers who were invited to attend the family's meeting. Display either **PowerPoint Slide #27 (Pre-Conference)** or **Handout #15 (Pre-Conference)** and highlight the following key points:

- Discuss the purpose of the FGDM meeting
- Review the roles of each participant
- Identify Bottom-Line Concerns (*i.e.*, the concerns that absolutely need addressed so the agency could accept the plan). Bottom-Line Concerns must be very specific, and the plan the family creates must address those concerns.

The review of Bottom-Line Concerns might occur at the Pre-Conference meeting or might occur independently with the referral source. In addition, the Pre-Conference meeting may look different if participants attended a meeting before. Pre-Conference meetings should be conducted face to face whenever possible. Ask volunteers to answer the following questions:

- Keeping the family you selected in mind:

- Who are the service providers involved?
- What other systems are involved?
- What information should be shared with them?
- What information should be gathered from them?

**Instructor Note:** Participants might bring up a question regarding families not being included in the Pre-Conference meeting. If this question arises, tell participants that this is the one time it is important not to have family at the table for the sole reason of ensuring that all providers are on the “same page” and do not unintentionally sabotage the Family Group Decision Making meeting.

Ask participants to offer whether they have taken part in a Pre-Conference meeting. For those that have, ask them to talk about their experiences.

**Step 10b: Who participates in FGDM conferences?**  
(4 minutes)

Ask the participants who would typically attend FGDM conferences. Show **PowerPoint Slide #28 (Who Attends FGDM Conferences)**. Please review the information on the PowerPoint, adding that it is preferable for there to be twice as many natural supports as professional supports. In your search for natural supports, be sure to explore relationships from both sides of the family.

**Step 11: Communication Between the Referral Source and Coordinator**  
(5 minutes)

It is important to note that communication between the referral source and coordinator does not end at the conclusion of the Referral stage. An open line of communication must continue to exist throughout the entire process. During the Preparation stage, the coordinator may need to hold discussion with the referring worker surrounding, but not limited to, topics such as:

- Identifying who from the child welfare team needs to attend the family meeting
- Verification of information originally obtained in the referral process
- Preparation for what the worker may experience during the meeting
- Safety issues
- Supports needed
- What the agency would need to see to accept the plan (*i.e.*, Bottom-Line Concerns)

Share that the final step of preparation is to solidify the Bottom-Line Concerns with the referral source. Give some examples to assist the participants. Some example Bottom-Line Concerns might include:

- The child must not have any contact with the perpetrator of sexual abuse
- The plan must address the mother's drug/alcohol related issues
- The plan must address supervision of the child
- The plan must ensure that the child's medical needs are met

While Bottom-Line Concerns are specific to the needs that must be met, they do not prescribe how the family must meet those needs. The family must be given the ability to plan for how the needs will be met.

It is important to consider the fact that, in conjunction with the "open lines of communication" concept and solidifying Bottom-Line Concerns, some counties hold an additional Pre-Conference meeting between the coordinator and the facilitator(s) if different individuals fill the roles of coordinator and facilitator. Doing so ensures that the Bottom-Line Concerns are reasonable and that everyone agrees with all concerns.

Ask participants to consider the family they identified and share some potential Bottom-Line Concerns. What would they look like and are they motivational?

### **Step 12: The Four Stages of FGDM and Related Roles: Preparation** (5 minutes)

Ask participants to remember **Handout #14 (The Four Stages of FGDM and Related Roles)** and review *Stage 2: Preparation* at a high level, making sure to emphasize the role of the referral source. During the preparation stage, explain that participants should be looking to involve the community partners who are willing to participate in supporting the family.

Explain that the Statewide FGDM Evaluation examines role clarity and conference preparation (participants understood the reason for the conference and were prepared to participate). Nearly all of the individuals surveyed agreed or strongly agreed that they understood the reason for the conference and were prepared to participate. Encourage participants to reach out and support the FGDM participants to help them understand the process and their role.

### **Step 13: FGDM Meeting Phase I: Welcome & Introductions** (4 minutes)

While displaying **Poster #5 (The Four Stages of FGDM)**, share that the third stage in the FGDM process is the actual FGDM meeting. Using **PowerPoint Slide #29 (Phase 1: Welcome & Introductions)** and **Handout #16 (The FGDM Meeting)** explain that phase one of the meeting is *Welcome and Introductions*.

To this end, the facilitator/co-facilitator will conduct introductions, making sure to offer who they are and their role. The facilitator welcomes participants and thanks them on behalf of the family. The facilitator then identifies the purpose of the meeting and makes sure all participants agree to this purpose.

Display either **Poster #6 (The FGDM Meeting Guidelines)** or **Handout #17 (The FGDM Meeting Guidelines)**. Explain the importance of these guidelines in setting the tone of the meeting during the *Welcome and Introductions* phase of the FGDM meeting. In setting the tone, facilitator(s) should emphasize that family leadership is key and the family is the driving force of the meeting and family plan. The Statewide FGDM Evaluation examines family leadership and has found that nearly all surveyed individuals agreed or strongly agreed that the family was encouraged to take a leadership role in the meeting.

Another key component of FGDM is cultural safety. In adherence with cultural safety, facilitators should promote comfort, safety and privacy during family group conferences. Conference participants should be encouraged to speak freely and openly without apprehension.

Although not something written in meeting guidelines, keep in mind that any child welfare professionals in the room should not take notes during the meeting. As a large group, ask participants to offer why they believe not taking notes during the meeting is important. Ultimately, the reasons for not taking notes revolve around the fact that the FGDM meeting is the family's meeting and one in which the family must feel safe. If a professional appears to be taking notes about the family, the family may feel threatened or leery about openly speaking.

The FGDM process also promotes cultural safety by encouraging the family to engage in family rituals where appropriate. For example, the facilitator may invite the family to open the meeting with their family ritual (e.g., prayer, song, poem, etc). The Statewide FGDM Evaluation examines cultural safety and found that nearly all individuals surveyed agreed or strongly agreed that the conference was held in a way that felt right to the family.

#### **Step 14: FGDM Meeting Phase 2: Information Sharing: Strengths** (8 minutes)

Display **PowerPoint Slide #30 (Phase 2: Information Sharing)** and offer that phase two of the FGDM meeting is *Information Sharing*. This phase begins with the referral source having the opportunity to present the case as it relates to the stated purpose. Minimal information should be shared at this time – only what must be known by the family so that they can effectively plan to achieve the purpose of the FGDM meeting.

This phase involves discussing strengths and achievements. The strengths set the positive and supportive tone for the remainder of the meeting and can be anything

including individual accomplishments, something the family is doing well, or any other characteristics that are positive. A facilitator must document all the comments on the flip charts. Emphasize the importance of strengths in the process. A few concepts to consider include:

- Many families that become involved with children and youth are facing difficult crises. In times of stress and difficulty, it becomes harder to see the positives. Families need to hear (from family members and professionals) the strengths that they bring to the table. While it is extremely valuable to hear the strengths from family members, hearing strengths from professionals (especially the referring worker) reaffirms their belief in their capacity to succeed and shows that the referring worker truly believes in the family and has hope for them.
- The group will use the strengths as the foundation to assist the family in addressing the concerns and creating their family plan.

Provide multiple examples and ask participants whether they are strengths-based (some examples should be clearly strengths-based, some unclear and some that are clearly not strengths-based). Ask participants to reflect back on their families and identify strengths.

### **Step 15: FGDM Meeting Phase 2: Information Sharing: Concerns**

(5 minutes)

Explain what concerns are, making sure to emphasize that concerns are the areas that individuals and the family would like to see the family address. They help inform what the family plan considers. This means that it is important that concerns focus on accomplishing the purpose, not just general concerns. Share that a traditional casework clinical model involves social workers identifying problems and telling families how to fix them. Jim Nice's example below illustrates the fallacy of identifying and fixing problems:

*Think of your spouse, significant other, or someone else in your family whom you love. When you leave this training, go to that person and using your best social worker skills, identify all of the problems that person has. Next, using your best thinking, share with the person all the ways that their problems can be fixed. Then call me tomorrow and tell me how your evening went.*

### **Step 16: FGDM Meeting Phase 2: Information Sharing: Bottom-Line Concerns**

(5 minutes)

Share that Bottom-Line Concerns are presented as the final portion of the concerns section of the FGDM meeting. This is the only point at which the referral source and service providers should offer concerns. The reason for this is that families know each other best, and families will be able to give specifics about their concerns. By the time the providers and agency have the opportunity to share their concerns, the majority, if not all, of the concerns that need to be addressed to accomplish the purpose tend to be

offered. In identifying their concerns, families often share the same concerns as the child welfare agency. As a result, it is very likely that they will have already identified and listed the agency's Bottom-Line Concerns. This being the case, one approach the child welfare professional can take in sharing the agency's Bottom-Line Concerns is to use the work the family has already done. The child welfare professional, with the family's permission, may walk to the flip chart pages that contain the family's concerns and simply circle those concerns that the agency has identified as Bottom-Line Concerns. If there are any Bottom-Line Concerns that the family has not already identified, the child welfare professional should identify them at this point.

Stress that not every meeting will have the Bottom-Line Concerns (*i.e.*, youth transition, aging population or family self-referrals) that are addressed above.

### **Step 17: FGDM Meeting Phase 2: Information Sharing: Resources** (4 minutes)

The last step in phase two of the FGDM meeting is sharing of resources. Families will begin by offering resources that are available to them. When the family has finished sharing resources, the referral source and service providers may then share resources. Stress that these are options or suggestions and not requirements for the family. This may also be the time when a guest speaker would present information on a possible resource or on a particular concern that the family is addressing (*e.g.*, mental health, drug and alcohol, or possibly domestic violence issues).

### **Step 18: FGDM Meeting Phase 3: Private Family Time** (5 minutes)

Display **PowerPoint Slide #31 (Phase 3: Private Family Time)** and inform participants that phase three of the FGDM meeting is Private Family Time. Explain that prior to entering *Private Family Time*; families are asked how they would like to share their meal.

Tell participants that, in order to reinforce the private family time concept, they are going to take part in an activity. Distribute a white paper plate to each participant and ask him or her to draw food that symbolizes their culture and/or reminds them of their childhood or adolescence, holidays, and/or evokes a strong memory – maybe something that they had at a family reunion or a wedding. Share with participants a food that evokes a strong memory in you and explain why. Ask participants to talk briefly about the food they drew at their table and why it is important to them.

**Instructor Note:** You may notice a difference in participant energy levels at this time. It has been seen in pilots of this curriculum that participants tend to start out with a low energy level but the energy level increases during and after this exercise. This is an excellent opportunity to point out how food is an important part of our culture and energizes everyone – similarly to the families with whom we work.

Tell participants that, just as the sharing of a meal is important in our lives, it is equally important in the lives of families with whom we work. During this time, families may be asked if they would like to share the meal with the service providers, referral source, and the facilitator(s) or if they would like to eat while they begin discussing their plan in *Private Family Time*. Tell participants that, whenever possible, meeting coordinators should encourage family members to bring food and share a meal at their meetings.

### **Step 19: Keys to Successful Private Family Time**

(5 minutes)

Again, reference **PowerPoint Slide #31 (Phase 3: Private Family Time)** and discuss *Private Family Time*, which is phase three of the FGDM meeting. This is the time for the family to talk in private and devise a plan that addresses the concerns identified earlier in the meeting. The facilitator remains available to answer any questions. Review and discuss **PowerPoint Slide #32 (Keys to Successful Private Family Time)** and **Handout #18 (Keys to Successful Private Family Time)**.

### **Step 20: Plan Documentation**

(10 minutes)

Tell participants that you are now going to take a moment to talk about what the family's plan may look like, as well as parallels between the family created plan in the FGDM meeting and the child welfare agency's formal document (*i.e.*, the Family Service Plan (FSP)). Options for how the family may document their plan will likely be offered by the facilitator, however the family is not obligated to use the options presented. The family may choose to document their plan in other ways. Families often choose to document their plan by answering the following key questions, "Who?, What?, When?, Why?, and How? Display **PowerPoint Slide #33 (Plan Documentation)** and review. It is important to note that families should document who will be responsible for monitoring plan implementation and follow-up.

Now that participants have a sense of what a typical family plan may look like, they will consider how the family's plan parallels the Family Service Plan (FSP). Screen share **Handout #19 (Plan Parallels)** and review. Talking points include:

**Instructor Note:** If you are aware of the concept, tie in the idea of using S.M.A.R.T. (Specific, Measurable, Attainable, Realistic, and Time-Limited/Timely) goals and objectives, similar to the concepts participants learned in Charting the Course towards Permanency for Children in Pennsylvania.

- **FGDM Purpose/FSP Goal:** These areas should be the same. This is the desired end state, when the group has addressed all concerns. The family's purpose statement can be essentially copied and pasted into the FSP.
- **FGDM Concerns/FSP Objectives:** The FGDM Concerns are just that, they are concerns. The FSP Objectives state the desired outcome related to identified

safety threats, risk factors, and diminished/absent protective capacities. These identified safety threats, risk factors, and diminished/absent protective capacities are “Concerns.” As such, the FSP Objectives take the FGDM concerns a step further by rewording the concern – which tends to be written in negative terms – into a positive statement, which is the desired outcome related to that concern. For example:

- Concern: Johnny is scared of his dad because his dad’s first reaction is to hit him (Johnny) when he does something wrong
- Objective: Father will use positive parenting techniques when addressing negative or concerning behaviors of his children

Referring to **PowerPoint Slide #33 (Plan Documentation)**, point out that the concern is the header (“the Why?”) on the FGDM Family Plan. Underneath the Objective/Concern, on the FGDM Family Plan, is listed “Who will do what, how they will do it, and by when.” The answers to these questions comprise the Actions/Tasks written on a traditional FSP.

### **Step 21: FGDM Meeting Phase 4: Presentation of Family Plan and Acceptance** (5 minutes)

Display **PowerPoint Slide #34 (Phase 4: Presentation of Family Plan and Acceptance)**. Discuss phase four of the FGDM meeting, which is *Presentation of Family Plan and Acceptance*. This is when a family representative presents the plan in its entirety to the referral source. The referral source is given the opportunity to ask questions and seek clarification, but not to rewrite the plan for the family. If there appear to be unaddressed Bottom-Line Concerns, the family may be asked to return to *Private Family Time* to finish their plan. Once they address all the concerns and the referral source understands the family’s plan, the referral source agrees to the family plan in its entirety and confirms willingness to support the plan. This plan becomes the plan of record with the agency and with the court. Everyone who participated in the meeting receives a copy of the plan.

### **Step 22: The Four Stages of FGDM and Related Roles: The Meeting** (4 minutes)

Ask participants to again remember **Handout #14 (The Four Stages of FGDM and Related Roles)** and review *Stage 3: Family Group Decision Making Meeting* at a high level, making sure to emphasize the role of the referral source. Additionally, participants may not be familiar with the role of the support person. Explain that family members may (or may not) choose to identify someone, such as a close friend, who they may not consider to be family but wish to be present to support them during the FGDM meeting. For example, a youth may choose to have their best friend present during the meeting.

### **Step 23: FGDM Stage IV: Follow-up** (15 minutes)



While displaying **Poster #5 (The Four Stages of FGDM)**, tell them that once the meeting has concluded, the FGDM process moves on to *Stage 4: Follow-up*. Tell participants that, once a plan is put into action it is crucial that implementation be monitored. Ask participants to think of plans they developed in their own lives and how often the first plan went off without a hitch. The answer is likely very few times. Often we have to tweak plans after we have put them into action as situations inevitably arise for which we did not account and circumstances change. Ask participants how they believe implementation may be monitored and by whom.

- Some families identify a contact person for the referral source who will report on the family's progress.
- Some families hold regularly scheduled meetings to assess implementation, this meeting may or may not involve the referral source's presence.
- The referral source should always check in with the family to make sure that implementation goes as planned.

Regardless of whether a family is having success with implementing their plan or not, the Pennsylvania FGDM Leadership Team highly recommends follow-up meetings to ensure a family's success. These meetings should not occur any later than 60 days after the initial meeting or the team risks losing momentum. Anybody that was invited to the FGDM meeting can be invited to any follow-up meetings. Meetings can be requested by any participants including a family member or the child welfare professional. Moreover, they can occur whenever the family needs the meetings. These meetings can help the family and their resources monitor the plan and update the plan to increase its longevity, effectiveness, and success.

Stress that FGDM meetings should not only be held when problematic family situations arise. FGDM meetings should also be held to celebrate successes to assist the family in seeing FGDM meetings in a positive and constructive light vs. reinforcing the "Uh-oh, they messed up again. Time for a meeting." sentiment.

Several options regarding follow-up meetings include:

- A formal follow-up FGDM meeting
- A less formal meeting with the family members who are willing and able to attend (This meeting may or may not include the coordinator and referral source. It is possible for the coordinator and referral source to assist in organizing the meeting however, they might not attend)
- As mentioned earlier, a regularly scheduled meeting with the family (This may or may not include the coordinator and referral source)

Whether or not the family chooses to have a follow-up meeting, the referral source must continue monitoring the family's progress.

# **207 Remote: Introduction to Family Group Decision Making: Part I**

## **Section V: Wrap-Up and Evaluation**

### **Estimated Length of Time:**

35 minutes

### **Learning Objectives:**

Participants will be able to:

- ✓ Gain an understanding of FGDM from the family's perspective.

### **Method of Presentation:**

Large Group Discussion

### **Materials Needed:**

- ✓ Laptop
- ✓ Screen
- ✓ Instructor-Prepared Word Document: WIIFM
- ✓ Instructor-Prepared Word Document: Parking Lot
- ✓ **DVD #2: Family Voices**
- ✓ **Handout #20: Best Practice FGDM Implementation (participants will not receive, display in screen share)**
- ✓ **Handout #21: Action Plan (participants will not receive, display in screen share)**
- ✓ **Handout #22: References (participants will not receive, display in screen share)**
- ✓ **Appendix #3: Additional Participant Resources**
- ✓ **PowerPoint Slide #35: Section V: Wrap-up and Evaluation (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slides #36-40: Best Practice FGDM Implementation (participants will not receive, display in screen share)**
- ✓ **PowerPoint Slide #41: Questions and Answers (participants will not receive, display in screen share)**

## Section V: Wrap-Up and Evaluation

### Step 1: Best Practice Implementation

(5 minutes)

Refer to **PowerPoint Slides #36-#38 (Best Practice FGDM Implementation)** and **Handout #20 (Best Practice FGDM Implementation)** and share with participants that these components are essential to the FGDM model. If these components are absent, the practice is not adhering to the FGDM model. FGDM statewide evaluation consistently indicates that these components are present in FGDM conferences across the state. The components and steps on **PowerPoint Slides #36-37 (Best Practice FGDM Implementation)** are non-negotiable and must be present.

Display **PowerPoint Slide #38 (Best Practice FGDM Implementation)** and explain that the diverse situations encountered require flexibility, and the suggestions on **PowerPoint #38** are some options that should be considered when applicable.

Explain that the process of implementing FGDM is complex and involves numerous steps. The agencies involved in implementing FGDM have to prepare their staff because FGDM requires individuals and entire systems to change their thinking and to change how they do business. This process and philosophy needs to be implemented carefully by all involved parties within these agencies.

### Step 2: Family Voices Video

(25 minutes)

Introduce the **DVD #2: Family Voices** by stating that the full 18-minute video, which they will view in its entirety, discusses Family Group Decision Making (FGDM) from the family's perspective. Participants should look for how the family perspective correlates with what they have learned about FGDM throughout the overview. Show the **DVD #2: Family Voices** using this link:  
<http://www.pacwrc.pitt.edu/Curriculum/207IntroToFGDMVideos.html>.

Facilitate a discussion about the *Family Voices* video and summarize the key areas of the video. Share how the families address the paradigm shift with the “oh you want to help me” and the “who died” comments. Also, discuss outcomes, the range of purposes, and the advice given by the family members. Ask participants if they have any thoughts on what the video offered that they did not receive from the content of the FGDM overview.

### Step 3: Questions and Answers, Resources, Action Plan and Evaluations

(5 minutes)

Summarize key learning points from the day and get participants' feedback on the content of the presentation. Show **PowerPoint Slide #39 (Questions and Answers)**.

Give participants the opportunity to ask questions. Answer questions, address and validate comments.

Review **Handout #21 (FGDM Resources)** that shows what resources are available nationally and for the state of Pennsylvania. Display **Appendix #3 (Additional Participant Resources)** and explain to participants that the following items can be accessed on the CWRC website: *Guidelines for Family Group Decision Making in Child Welfare* and *Pennsylvania Family Group Decision Making Toolkit: A Resource to Guide and Support Best Practice Implementation*. Inform participants that they may wish to consider attending *207: Family Finding. 207*, which is a 24-hour training on the Family Finding Model, which very closely parallels the FGDM process. The Family Finding Model is becoming widely recognized and used both nationally and throughout the Commonwealth. The Family Finding model offers concepts and approaches that participants may find enhance their work with the FGDM process. Screen share **Handout #21 (Action Plan)** and ask participants to identify a family they believe would benefit from the FGDM process.

Refer participants to **Handout #22 (References)** for additional resources and information. Thank participants for participating in the training. Ensure that all participants complete evaluations before they leave.

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