# Family Group Conference Baseline

<table>
<thead>
<tr>
<th>Family Group Conference Date</th>
<th>* / * / 20</th>
<th>County</th>
<th>Year</th>
<th>Conference ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Referral Date</td>
<td>* / * / 20</td>
<td></td>
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</tbody>
</table>

Number of people invited: [ ] Number of people attended: [ ]

**Primary referring agency:** Check only ONE

- [ ] CYS
- [ ] JPO
- [ ] Private provider
- [ ] Self-referral
- [ ] Family center
- [ ] Court
- [ ] MH/IDD/EI
- [ ] School professional
- [ ] Community partner

At the time of the conference, the case was open with which agencies?

- [ ] CYS
- [ ] JPO
- [ ] Both CYS and JPO
- [ ] No open case with CYS or JPO

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1. **Participants in conference:** Check ALL that apply

- [ ] Child/youth (focus of meeting)
- [ ] Sibling of the child
- [ ] Mother of the child
- [ ] Aunt, uncle, or cousins (mother’s family)
- [ ] Grandparent of the child (mother’s family)
- [ ] Father of the child
- [ ] Aunt, uncle, or cousins (father’s family)
- [ ] Grandparent of the child (father’s family)
- [ ] Stepfather of the child
- [ ] Stepmother of the child
- [ ] Mother’s significant other
- [ ] Father’s significant other
- [ ] Legal guardian of the child
- [ ] Friends, neighbors
- [ ] Godparent
- [ ] Foster family of the child(ren)

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2. **Primary purpose why family was referred for a conference at this time:** Check only ONE

- [ ] IL/aftercare/transitional conference
- [ ] Placement prevention
- [ ] Change in placement setting
- [ ] Prevent out-of-home placement disruption
- [ ] Plan and assist in reunification
- [ ] Identify supports for caregivers
- [ ] Lack of supervision
- [ ] Communication issues
- [ ] Child/family/parent conflict
- [ ] Child/youth’s behavioral issues
- [ ] Prevent further delinquent behavior
- [ ] Child’s medical/mental health/drug and alcohol issues
- [ ] Truancy
- [ ] Housing and environmental issues
- [ ] Develop plan to keep child in a safe and stable home
- [ ] Parent’s medical/mental health/drug and alcohol issues

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3. **What services and supports were included in the family plan?** Check ALL that apply

**Natural supports**

- [ ] Informal kinship care
- [ ] Family support
- [ ] Family housing support
- [ ] Family financial support
- [ ] Natural respite
- [ ] Faith-based support
- [ ] Recreational
- [ ] After-school

**Professional supports**

- [ ] Family finding
- [ ] Independent living/aftercare
- [ ] Family therapy

- [ ] Domestic violence
- [ ] Formal kinship care
- [ ] Literacy
- [ ] Transportation
- [ ] Foster care
- [ ] Group home
- [ ] Residential treatment facility
- [ ] Respite
- [ ] Placement services
- [ ] Financial assistance
- [ ] Housing assistance
- [ ] Education support

- [ ] Employment/pre-employment
- [ ] Substance abuse (parent)
- [ ] Substance abuse (child)
- [ ] Intellectual and developmental disabilities (parent)
- [ ] Intellectual and developmental disabilities (child)
- [ ] Mental health (parent)
- [ ] Mental health (child)
- [ ] Early childhood developmental services
- [ ] Juvenile probation
- [ ] Adult probation and parole
4. Which plan will be developed/revised as a result of this family group conference? Check ALL that apply

☐ Family service plan
☐ Child permanency plan
☐ Treatment plan
☐ Lifetime network plan
☐ Transition plan
☐ Probation/supervision plan
☐ A plan will not be developed/revised as a result of this conference

5. During the period of time while preparing for the conference, where was the child living MOST of the time? Check only ONE

☐ Independently (16 and older)
☐ School dormitory
☐ Job Corps
☐ Parent's home
☐ Informal kinship care
☐ Formal kinship care
☐ Foster care
☐ Group home
☐ Shelter
☐ 30-day residential program
☐ Residential treatment facility
☐ Drug and alcohol inpatient facility
☐ Inpatient psychiatric facility
☐ Youth correctional facility
☐ Adult correctional facility
☐ Supervised independent living program
☐ Homeless

5a. What is the child's planned living environment in the next 45 - 60 days after the conference? Check only ONE

☐ Independently (16 and older)
☐ School dormitory
☐ Job Corps
☐ Parent's home
☐ Informal kinship care
☐ Formal kinship care
☐ Foster care
☐ Group home
☐ Shelter
☐ 30-day residential program
☐ Residential treatment facility
☐ Drug and alcohol inpatient facility
☐ Inpatient psychiatric facility
☐ Youth correctional facility
☐ Adult correctional facility
☐ Supervised independent living program
☐ Homeless
☐ Placement pending

6. At the time of the conference, was the child in the custody of his/her parent(s) or kin?  ☐ Yes  ☐ No

7. At 45 - 60 days after the conference, is the plan for the child to be in the custody of his/her parent(s) or kin?  ☐ Yes  ☐ No

8. At what point in the service pathway is the family and/or youth? Check only ONE

☐ Family open for services and child in OUT-OF-HOME placement
☐ Assessment/investigation/intake
☐ Aftercare
☐ Family open for services and receiving IN-HOME services
☐ JPO supervision
☐ No agency involvement

9. Please indicate how many kinship supports were engaged in the FGDM process.

10. Child's demographic information

Race
☐ White/Caucasian
☐ Black/African American
☐ Multiracial
☐ Native American/Alaskan/Hawaiian
☐ Asian/Pacific Islander
☐ Other

Ethnicity (check only ONE)
☐ Hispanic
☐ Not Hispanic or Latino

Gender
☐ Male
☐ Female
Age (years)

MCI #

11. At the time of the conference, please select the child/youth's court/legal involvement: Check only ONE

☐ Alleged dependent
☐ Dependent
☐ Both (dependent and delinquent)
☐ Alleged delinquent
☐ Delinquent
☐ None

12. In the past 6 months, have there been substantiated/founded/indicated reports of child abuse/neglect for this child/youth?  ☐ Yes  ☐ No

12a. If yes, what is the most recent type of abuse report?  Check only ONE

☐ Physical abuse
☐ Serious physical neglect
☐ Serious mental injury
☐ Sexual abuse