

## Family Finding Transfer of Learning Pre-Work

You are about to take part in one or more Family Finding Transfer of Learning sessions that will assist you in continuing to hone the Family Finding knowledge and skills you gained during your Family Finding series training. Please thoroughly read and complete the pre-work that follows. Bring it with you to your session(s). **Completing/updating the work outside the session(s) is critical to allowing you to offer experiences and pose questions while allowing your facilitator time to hear everyone's experiences and address all questions.**

Remember that your efforts related to the session directly affects the lives of the children on your caseload.

To successfully navigate and complete the entire Family Finding model, you must complete the steps below. As you read the list below, consider where you are in the model. **In the area below, place a check in the box(es) next to the step(s) you and the family completed.** Please be candid/accurate in your assessment. Your facilitator requires a candid/accurate description of where you and your family are in the process to provide you assistance.

The case team and I:

- (Step 1: Discovery)** Discovered at least 40 connections/engaged the child, youth, caregiver and family in seeing the value of involving family/kin;
- (Step 2: Engagement)** Worked with the child/youth/caregiver/family to find 12 or more people that could be involved in the Network for Life; and, contacted and received a commitment from those 12+ people to take part in a Blended Perspectives Meeting (BPM);
- (Step 3: Planning)** Held a Blended Perspectives Meeting and received a commitment from those who will serve as part of the Network for Life to attend a decision-making meeting – preferably a Family Group Decision Making (FGDM) meeting;
- (Step 4: Decision Making)** Worked with agency FGDM coordinators to schedule and hold a FGDM meeting or another decision making meeting;
- (Step 5: Evaluation)** Determined, as a team, if the plans developed by the family and decisions made addressed the Key Evaluation Questions offered by Kevin Campbell; and
- (Step 6: Follow Up On Supports)** Ensured that the Network for Life fully supports the plans and decisions, understands their roles in the child's life and knows how to access both informal and formal supports as needs arise.

In order to get the most out of your session(s), you should have completed at least steps one and two of the Family Finding model – respectively Discovery and Engagement – for the original family on whom you chose to work during the Family Finding series. Remember, if you have not completed Discovery and Engagement you can now do so quickly, but prudently, using the means offered to you as part of your regular casework training, on-the-job experience and during the Family Finding series.

## Family Finding Support Session Pre-Work, (Cont'd)

Please bring to your session(s) all materials you obtained and any documents you and the family created during the Family Finding series training (including any Mobility Maps, Connectedness Maps, Connectograms, Flow Diagrams, etc.) If your agency held a FGDM meeting, please bring with you notes about the meeting. The information will help facilitate discussion and considerations for next steps in your Family Finding efforts.

If you are planning to use a new case – because you finished the Family Finding process on your original case, whenever possible, bring case records for the new case. If not running an online search (e.g. Accurint) before your session(s), ensure that you contact your registered online search engine user, inform him/her that you are attending a Family Finding Transfer of Learning session, that you will likely contact the him/her before, during or after your session(s) to run searches and might need a “Comprehensive Report.” Please seek and obtain familial consent to run searches.

- ❖ Based on looking at the Family Finding model steps on the previous page, with regard to where I am in the Family Finding model, what are the concepts that I'd like to know more about during my time in the support session(s) to help the family and me move forward?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- ❖ What are the strengths of the family that will help move them through the Family Finding process?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- ❖ What are some of the areas of concern I have regarding the family that will hinder forward movement through the Family Finding process?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- ❖ What other concepts regarding Family Finding do I want to learn more about during the workshop?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Family Finding: Demographics and Other Information (Part 1), (Cont'd)

Please complete the information below. After completing the form, please bring it with you to your Family Finding support session(s). **Part 1 may be collected at the end of your final session(s) for analytical purposes. Part 2 will not be collected, as it will contain confidential information for your use only.**

County: \_\_\_\_\_

County contact: (Name, email, and phone number)  
\_\_\_\_\_

Case name (First letter of last name and case number): \_\_\_\_\_

Number of Possible Connections:

Known Prior to Family Finding \_\_\_\_\_

Transfer of Learning Efforts: \_\_\_\_\_

Found Through Family Finding \_\_\_\_\_

Transfer of Learning Efforts: \_\_\_\_\_

Total Number of Individuals Who  
Attended a Blended Perspectives  
Meeting: \_\_\_\_\_

Total Number of Individuals Who  
Participated in the Decision-Making  
Meeting: \_\_\_\_\_

Total Number of Individuals Who  
Ultimately Became Members of the  
Network for Life: \_\_\_\_\_

### Child/Youth Information

Age of child/youth: \_\_\_\_\_

Gender: (Circle one) ..... **Male**      **Female**

Race/Ethnicity:

<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Hispanic, Latino or Spanish origin (may be of any race)

Child/youth is in placement: ..... **yes**      **no**

If applicable, number of years in placement, over the life of the child/youth  
(out-of-home care): \_\_\_\_\_

If applicable, number of different placement episodes: \_\_\_\_\_

## Family Finding: Demographics and Other Information (Part 1), (Cont'd)

### Parent Information

Biological/Adoptive Caregiver	<u>Before</u> the Family Finding Transfer of Learning	<u>As a Result of the</u> Family Finding Transfer of Learning
Mother is known to the agency:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Mother's parental rights are terminated:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Mother's whereabouts are known:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Mother is involved/engaging in services:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Mother's date of birth is known:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Father is known to the agency:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Father's parental rights are terminated:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Father's whereabouts are known:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Father is involved/engaging in services:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
Father's date of birth is known:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>

### Sibling Information

	<u>Before</u> the Family Finding Transfer of Learning	<u>As a Result of the</u> Family Finding Transfer of Learning
Sibling(s) is/are known to the agency:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>
If yes, list the first name, last initial on the line(s) in the appropriate box to the right of this area.	1. _____ 2. _____ 3. _____ 4. _____	1. _____ 2. _____ 3. _____ 4. _____
Child/youth lives with siblings:	<b>yes</b> <b>no</b>	<b>yes</b> <b>no</b>

If applicable, frequency of contact between siblings: (List the child's/youth's sibling (first name, last initial) and circle contact frequency for each sibling.)

- |          |              |               |                  |                |               |             |
|----------|--------------|---------------|------------------|----------------|---------------|-------------|
| 1. _____ | <b>daily</b> | <b>weekly</b> | <b>bi-weekly</b> | <b>monthly</b> | <b>yearly</b> | <b>none</b> |
| 2. _____ | <b>daily</b> | <b>weekly</b> | <b>bi-weekly</b> | <b>monthly</b> | <b>yearly</b> | <b>none</b> |
| 3. _____ | <b>daily</b> | <b>weekly</b> | <b>bi-weekly</b> | <b>monthly</b> | <b>yearly</b> | <b>none</b> |
| 4. _____ | <b>daily</b> | <b>weekly</b> | <b>bi-weekly</b> | <b>monthly</b> | <b>yearly</b> | <b>none</b> |

## Family Finding: Demographics and Other Information (Part 1), (Cont'd)

### Permanent Resources

	<u>Before the Family Finding Transfer of Learning</u>	<u>As a Result of the Family Finding Transfer of Learning</u>
Number of relatives known to the child/youth and the agency (not including parents):	_____	_____
Number of current lifelong connections the child/youth has:	_____	_____

### Family Engagement

	<u>Before the Family Finding Transfer of Learning</u>	<u>As a Result of the Family Finding Transfer of Learning</u>
A decision making meeting was/will be held:	<b>yes      no</b>	<b>yes      no</b>
If "yes", which of the following:	<input type="checkbox"/> Family Group Decision Making  <input type="checkbox"/> Other (Please list and, if necessary, describe): _____ _____ _____	<input type="checkbox"/> Family Group Decision Making  <input type="checkbox"/> Other (Please list and, if necessary, describe): _____ _____ _____
If "yes," did/will the family participate in the decision making meeting?	<b>yes      no</b>	<b>yes      no</b>
If "no," is a Family Group Decision Making meeting scheduled?	<b>yes      no</b>	<b>yes      no</b>
If "yes," on what date?	_____	_____

### Permanency

	<u>Before the Family Finding Transfer of Learning</u>	<u>As a Result of the Family Finding Transfer of Learning</u>
<u>Primary</u> permanency goal for the child/youth:	_____	_____
<u>Concurrent</u> permanency goal for the child/youth:	_____	_____

## Family Finding: Demographics and Other Information (Part 1), (Cont'd)

### Discovery/Engagement Strategies:

Please place a check next to the strategy/ies below that you used and with whom you used them (*i.e.*, child/youth, caregiver(s), resource family, kin, education partners, *etc.*) Please offer the outcomes of the strategies you used as well as any other pertinent information. While Accurint and Data Mining are Discovery strategies, generally, they do not involve engagement and are not included in this section. Kevin Campbell promotes the use of all Discovery/Engagement tools at the disposal of a child welfare professional – Family Finding-specific or not. If you use other strategies not listed, please list and describe the strategy/ies in the space provided.

Discussions: \_\_\_\_\_  
\_\_\_\_\_

Connectedness Mapping: \_\_\_\_\_  
\_\_\_\_\_

Connectograms: \_\_\_\_\_  
\_\_\_\_\_

Ecomaps: \_\_\_\_\_  
\_\_\_\_\_

Genograms: \_\_\_\_\_  
\_\_\_\_\_

Flow Diagrams: \_\_\_\_\_  
\_\_\_\_\_

Historical Mobility Maps: \_\_\_\_\_  
\_\_\_\_\_

Other: (Please list/describe) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Family Finding: Demographics and Other Information (Part 2)

In conjunction with your *Data Mining* and other Discovery and Engagement efforts, please complete the following information to the best of your ability. While a child's/youth's use of the terms "mother" and "father" will vary, here the terms refer to either the biological or adoptive caregiver – an individual.

**If you still have your demographics sheets from the Family Finding series, feel free to substitute those sheets for the ones that follow. The sheets are yours and will be used only to help you ensure you considered as many resources as possible.**

Maternal Information:	Paternal Information:
<u>Mother:</u> Name: City, State: Phone: Date of Birth:	<u>Father:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Grandmother:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Grandmother:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Grandfather:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Grandfather:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Aunt:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Aunt:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Uncle:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Uncle:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Aunt:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Aunt:</u> Name: City, State: Phone: Date of Birth:
<u>Maternal Uncle:</u> Name: City, State: Phone: Date of Birth:	<u>Paternal Uncle:</u> Name: City, State: Phone: Date of Birth:

## Family Finding: Demographics and Other Information (Part 2), (Cont'd)

Maternal Cousin:

Name:  
City, State:  
Phone:  
Date of Birth:

Paternal Cousin:

Name:  
City, State:  
Phone:  
Date of Birth:

Maternal Cousin:

Name:  
City, State:  
Phone:  
Date of Birth:

Paternal Cousin:

Name:  
City, State:  
Phone:  
Date of Birth:

Neighbor:

Name:  
City, State:  
Phone:  
Date of Birth:

Neighbor:

Name:  
City, State:  
Phone:  
Date of Birth:

Friend:

Name:  
City, State:  
Phone:  
Date of Birth:

Friend:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Other:

Name:  
City, State:  
Phone:  
Date of Birth:

Current/Former Resource Caregiver:

Current/Former Resource Caregiver:

Current/Former Resource Caregiver:

Current/Former Resource Caregiver:

Current/Former Resource Caregiver:

Notes:

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