



# Guidelines for Family Group Decision Making in Child Welfare

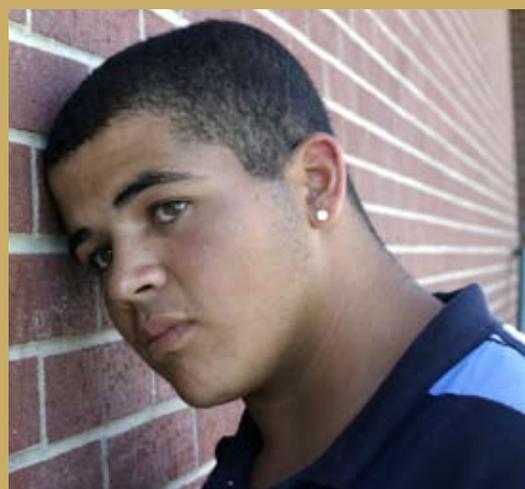
Developed by  
**American Humane Association and  
the FGDM Guidelines Committee**



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Family Group Decision Making





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### **About American Humane's National Center on Family Group Decision Making**

Since 1995, American Humane has been a leader in promoting the integration of FGDM philosophy and processes into systems that work with vulnerable children and families. The research increasingly demonstrates that FGDM is congruent with best social work practice: strengthening families; achieving child and family safety; and increasing permanency for children. FGDM encompasses various practice models that place families at the center of decision-making processes.

American Humane established its National Center on FGDM in 1999 as a vehicle for promoting and supporting work in this area. The mission of the National Center is to build community capacity to implement high-quality, effective FGDM processes that are philosophically congruent with the central values and beliefs of this approach. Together, we are working to create links, share resources, provide training and technical assistance, and broaden knowledge about this way of reorganizing systems to work differently with families.

**For additional information about our National Center or the practice of FGDM, please visit [www.americanhumane.org/fgdm](http://www.americanhumane.org/fgdm).**



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# Preamble

In collaboration with its partners, American Humane is promoting its understanding of family group decision making (FGDM)<sup>1</sup> through these guidelines, acknowledging the cultural traditions, ethical practices, agency initiatives, and research and evaluation evidence upon which they are based.

There is a risk in developing, promoting and disseminating guidelines such as these. The risk is that agencies become focused on form (how something is done) and lose sight of purpose (why it is done). Regular individual and group reflection about purpose will mitigate this risk and allow the guidelines to be interpreted in their proper context.

The practice of family group decision making is intended to address the inherent imbalances between child welfare agencies and the children, youths and families they serve. Without agencies' determined efforts to avoid such imbalances, racial and ethnic minority families and families that are poor or socially disadvantaged are at high risk of disproportionate agency responses to their situations. Disproportionate responses are those that may not have occurred had families been white or from more affluent backgrounds. Disproportionate decision making may be a major factor in the overrepresentation of such families as clients of agencies of social control and the principal cause of alienation of children from their families of origin. Such was the understanding reached in New Zealand more than 20 years ago,<sup>2</sup> which led to the establishment in law of the family group conference as the primary means of decision making in child welfare and youth justice.

The key to successful FGDM practice is engaging and calling together a family group — those people with kinship and other connections to children, youths and their parents. This includes those who may not be currently connected to children and youths — for example, paternal relatives who are often excluded, marginalized or unknown. FGDM processes position family groups to lead decision making and agencies agree to support family group plans that address agency concerns. This in turn gives rise to otherwise unobtainable opportunities for agencies to engage families as collaborators in creating safety in their collective communities. The practice is informed by traditional decision-making processes in many cultures that accent the importance of custom, communality, collectivity, consensus and taking time in arriving at sound and lasting resolutions to issues affecting family life.

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<sup>1</sup> American Humane Association. (2008, January). *Family group decision making in child welfare: Purpose, values and processes*. Englewood, CO: Author.

<sup>2</sup> New Zealand Department of Social Welfare. (1988, September). *Pua-te-ata-tu (Day break)*. Wellington, New Zealand: Author.



American Humane wants to promote best practices in all aspects of FGDM. Agencies can have confidence that what follows represents the current state of knowledge and reservoirs of wisdom relating to the practice of FGDM in a wide variety of communities. While FGDM processes are sometimes reshaped to fit local contexts and confines, we believe that all modifications and adaptations should be balanced against these guidelines to fully determine whether the local changes are in fact new innovations in keeping with the principles, or oppressive practices under the guise of family-driven and family-centered language.

Over time these formulations will be revised to match advances in knowledge and broadening experience.



# Introduction

## Family Group Decision Making

Family group decision making (FGDM) is a decision-making process to which members of the family group are invited and joined by members of their informal network, community groups and the child welfare agency that has become involved in the family's life. The family members define whom they claim as their family group. FGDM is based on traditional practices in many cultures and seeks to uphold individual and collective rights. It is advanced by government reforms and global social movements seeking to rebalance the power between families and public agencies by promoting open communication and democratic decision making. The term family group decision making was first coined by Drs. Gale Burford and Joan Pennell in the implementation of an FGDM project in Newfoundland and Labrador, Canada, as a way to describe a process that was similar to, but slightly different from, the family group conference as legislated in New Zealand.

FGDM affirms the culture of the family group, recognizes a family's spirituality, fully acknowledges the rights and abilities of the family group to make sound decisions for and with its young relatives and actively engages the community as a vital support for families. FGDM has the potential to energize hope, guide change and foster healing. Through FGDM, a broad support network is developed and strengthened, significantly benefiting children and their family groups. Government, local and tribal programs also benefit, learning from and relying on the family group and community as resources that strengthen and support families in ensuring that their children have a clear sense of identity, lasting relationships, healthy supports and limits, and opportunities for learning and contributing.

These guidelines address family group decision making as a critical practice within child welfare agencies and community-based agencies that work with public child welfare systems. In developing these guidelines, American Humane recognizes that standing alone, FGDM cannot result in better outcomes for children and families. Other parts of the child welfare system must change in ways that are consistent with the principles stated above. FGDM cannot simply be "added" to child welfare services — the principles, philosophy and practice approach must be integrated throughout the child welfare system to improve the safety, permanency and well-being outcomes for children and the well-being of families.



## Values Used to Formulate the Guidelines

In developing guidelines for family group decision making, American Humane elected to use the values outlined in its 2008 paper, *Family Group Decision Making in Child Welfare: Purpose, Values and Processes* (see [www.fgdm.org](http://www.fgdm.org)) against which to check its proposed practices. The following are values associated with FGDM:

- Children have a right to maintain their kinship and cultural connections throughout their lives.
- Children and their parents belong to a wider family system that both nurtures them and is responsible for them.
- The family group, rather than the agency, is the context for child welfare and child protection resolutions.
- All families are entitled to the respect of the state, and the state needs to make an extra effort to convey respect to those who are poor, socially excluded, marginalized or lacking power or access to resources and services.
- The state has a responsibility to recognize, support and build the family group's capacity to protect and care for its young relatives.
- Family groups know their own histories, and they use that information to construct thorough plans.
- Active family group participation and leadership is essential for good outcomes for children, but power imbalances between family groups and child protection agency personnel must first be addressed.
- The state has a responsibility to defend family groups from unnecessary intrusion and to promote their growth and strength.

In addition to these values underpinning FGDM, we also identify and embed throughout this document the core principles that we used to support our thinking in formulating these guidelines.



# Members of American Humane's FGDM Guidelines Committee

American Humane extended invitations to help form these guidelines to 20 family group decision making practitioners, system developers, academics, family members and advocates who have extensive experience in working with family groups as full partners in planning for their children. The FGDM guidelines committee met in person in April 2008, June 2008, and June 2009. In between the in-person meetings, committee members and their invited guests participated in numerous teleconferences, email exchanges and document revisions. The following guidelines reflect the best thinking of these committee members. The committee hopes that practitioners, supervisors, program managers, administrators, judicial leaders and other program implementers will use these guidelines to strengthen their work with families in planning for children, infusing these FGDM philosophies and principles into the many systems that serve families.

American Humane wishes to extend its most heartfelt appreciation to every committee member and the organizations for which they work, for their:

- commitment to the 2-year process in formulating these guidelines;
- openness to exploring new ideas and concepts, particularly those that may have challenged individual thinking and beliefs;
- time, energy and enthusiasm demonstrated by the many hours they gave to this process and to one another;
- freedom in sharing their wisdom and experiences; and
- willingness to respectfully debate and deliberate specific guidelines, with the premise that we would go back to identify and then follow the core principle that guides each item.

While it was neither a quick nor easy process, the conversations were stimulating, far-reaching, visionary and enriching. Friendships formed and collegial relationships flourished. Perspectives from numerous cultural groups and experiences from many countries were freely shared. While we strove diligently to reach consensus on every guideline contained within, there were a few areas in which the majority voice, based on the core principle, is reflected.

It is with a great sense of humility that American Humane puts forth these guidelines. We are dedicated to updating them on a regular basis, using a committee process, to ensure that what is written reflects the evolution of learning.



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# What Is FGDM?

FGDM processes are carefully managed and crafted to ensure fidelity to FGDM values and to ensure that those values drive practice. The following five items are critical to supporting exemplary practice in FGDM.<sup>3</sup>

1. An independent (i.e., non-case-carrying) coordinator is responsible for convening the family group meeting with agency personnel. When a critical decision about a child is required, dialogue occurs between the family group and the responsible child protection agency personnel. Providing an independent coordinator who is charged with creating an environment in which transparent, honest and respectful discussion occurs between agency personnel and family groups signifies an agency's commitment to empowering and nonoppressive practice.
2. The child protection agency personnel recognize the family group as their key decision-making partner, and time and resources are available to convene this group. Providing the time and resources to seek out family group members and prepare them for their role in the decision-making process signifies an agency's acceptance of the importance of family groups in formulating safety and care plans.
3. Family groups have the opportunity to meet on their own, without the statutory authorities and other non-family members present, to work through the information they have been given and formulate their responses and plans. Providing family groups with time to meet on their own enables them to apply their knowledge and expertise in a familiar setting and in ways that are consistent with their ethnic and cultural decision-making practices. Acknowledging the importance of this time and taking active steps to encourage family groups to plan in this way signifies an agency's acceptance of its own limitations, as well as its commitment to ensuring that the best possible decisions and plans are made.
4. When agency concerns are adequately addressed, preference is given to a family group's plan over any other possible plan. In accepting the family group's lead, an agency signifies its confidence in and commitment to working with and supporting family groups in caring for and protecting their children, and building their capacity to do so.
5. Referring agencies support family groups by providing the services and resources necessary to implement the agreed-on plans. In assisting family groups in implementing their plans, agencies uphold the family groups' responsibility for the care and protection of their children, and contribute by aligning agency and community resources to support the family groups' efforts.

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<sup>3</sup> Taken from American Humane Association. (2008, January). *Family group decision making in child welfare: Purpose, values and processes*. Englewood, CO: Author.



# Section I: The FGDM Coordinator

In FGDM processes, an individual known as the “coordinator” is responsible for preparing for and guiding the family meeting. In these Guidelines, the term *coordinator* refers to the individual who engages and prepares the participants for the family meeting and guides the meeting. These Guidelines are grounded in the recognition that preparation, organization and guiding the process are unique to each agency and family group, and that this work continues to evolve as coordinators work with families.

## **I.1. The Coordinator’s Role in Preparing for and Guiding the Family Meeting**

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In the United States and abroad, a few communities have two or three individuals with specific roles in the FGDM process: a coordinator, responsible for preparation and engagement; a facilitator, responsible for facilitating the family meeting; and a co-facilitator. While the impetus for this arrangement was to create neutrality during the meeting, one person — a coordinator — who conducts the preparation and facilitates the family meeting is the best practice in FGDM processes (see [guideline I.3. on fairness in FGDM processes](#)). With a coordinator fulfilling both functions, there is:

- Greater simplicity in the process;
- A purposefully limited number of professionals involved with the family;
- A more cost-effective process;
- No need for families to retell their stories, which may cause them greater shame, discomfort, trauma or harm;
- A greater likelihood that families have someone at the meeting who knows each person in the room and who is able to anticipate points of tension or conflict;
- A greater likelihood that families have a higher comfort level in speaking at the meeting than would be the case if someone unknown to them guided the meeting; and
- A more manageable structure for smaller or more rural communities that are likely to have fewer resources.

In addition, the function of “facilitation” is not elevated above or valued more than the core element of coordination and preparation.

Apart from offering continuity to the family group and service providers, coordination of the family meeting is an extension of the preparatory activities (see [Section III, Preparation](#)). The coordinator guides the process, but continues to place the family group in the center of the decision-making



process. Ultimately, given that child and family safety are critical during the entire FGDM process, a coordinator who has relationships with family members and understands the family group's dynamics will be better positioned to identify and address safety concerns, should they arise.

## **I.2 The Term Coordinator Rather Than Facilitator**

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The term *coordinator*, rather than *facilitator*, is more reflective of FGDM principles. The coordinator's purpose is to convene and guide a family-led process, to ensure that the agency representatives share all critical information with the family group that is essential to the decision-making process. The term *facilitator* implies that a professional will have a more elevated, active and central role in the family meeting, rather than someone who guides the process. A facilitated process can stilt conversation among family members and refocus it between the facilitator and the person speaking. A coordinator minimizes his or her own voice and presence in the meeting by bringing forward significant pieces of information as quickly as possible. This allows for a more rapid transition to private family time (see also guidelines IV.7.3. on information sharing and IV.7.4. on private family time).

## **I.3 Coordinator Independence**

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The coordinator does not have a role in case decision making for the specific family for which he or she is coordinating the family meeting. The coordinator acts in a fair manner. The family views the coordinator as independent and impartial. When possible, coordinators do not coordinate family meetings for families with whom they have had a prior personal or working relationship if their involvement would influence or compromise the outcome or decision. In rural or geographically isolated communities, given the complexity and closeness of relationships, coordinator independence may be more difficult to achieve.

Many communities are implementing a range of models that engage family groups in child welfare decision making, including rapid case-planning conferences and family team meetings that are organized quickly, sometimes within 24 to 48 hours of a family coming to the attention of the child welfare agency, and FGDM processes that require more time to conduct preparation. In those cases, it is possible that a potential coordinator of one process could serve the family in a similar capacity for another family meeting process. Coordinators also organize follow-up family meetings for families they have previously served.

## **I.4 Funding Agent of the Coordinator**

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It does not matter whether FGDM coordinators work for public child welfare, private child welfare, community-based agencies, nongovernmental organizations or other entities for them to uphold the best practices and implementation of FGDM. Communities need to consider their community climate, organizational structures, benefits and challenges to determine which entity is best positioned to employ the FGDM coordinator. The power dynamics in each context must be carefully assessed when choosing the most appropriate location for the coordinator. No one type of entity is considered superior in being the employment agent of the FGDM coordinator.



## **I.5. The Role of the Coordinator**

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The coordinator has variously been described as the “face of the FGDM process,” the “shepherd of the process,” the “keeper of the process, not the content,” and the “ambassador to the process for family, the community and the child welfare system.” The coordinator’s general responsibilities, beginning at referral, include engagement and preparation of the family meeting related to:

- **Information sharing** to promote transparency through open sharing of information held by child welfare and other service providers, and build communication channels between the referring worker, other agency representatives and the family group;
- **Relationship building** to build relationships with all participants (both family members and service providers), advocate for the primacy of the family group, continuously ask the family group how the process should work, search for what is important to the family group, listen to what the family group says and develop an understanding of how the family group operates;
- **Respect for culture** to integrate the family group’s culture into the process, embrace cultural safety for families, create a safe environment to engage in a discussion of culture, support traditions that have been successful for families, recognize that many families are multicultural and work with them to respectfully support the emergence of rich cultural diversity; and
- **Ensuring the integrity of the process** by raising challenges to decisions that exclude individuals or create limits on the decision-making process.

## **I.6. The Coordinator’s Relationship With Child Welfare Practice Improvements**

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Coordinators often serve as conduits back to the child welfare system and as advocates for improving practice and policy and achieving better outcomes for children and families. In the course of the FGDM process, coordinators may observe poor child welfare practices that conflict with the principles of FGDM. If they are employed by the public child welfare agency, they may experience internal conflict when they observe these practices, wanting to ensure that families are well-served, but they may be reluctant to complain about specific workers, practices or policies. Similarly, if coordinators work outside the public child welfare agency but have entangled funding sources, they may have an unwillingness to share their concerns. There is benefit in developing feedback loops for coordinators, referring workers, supervisors and others to discuss quality of practice issues (both at the worker and coordinator level) and systems issues that impact the FGDM process. The inclusive and reflective feedback process is necessary to strengthen FGDM practice, to build open communication and to de-escalate potential conflicts.

## **I.7. Coordinator Qualifications**

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FGDM coordinators have the knowledge, skills, abilities and personal attributes to guide a family-led process, resulting in the best plans for children and families. The following describes the qualifications of coordinators. Some of these qualifications are particularly relevant at the time of candidate selection. Other qualifications will continue to be developed and strengthened over the course of coordinators’ work with families and others in the FGDM process.

### **Education and/or Experience**

- Has post-secondary education or work or life experience that is relevant to the role and responsibilities of a coordinator



- Has no specific degree (neither post-secondary nor high school diploma)
- Has knowledge and experience that provides the ability to navigate the child welfare system — through work or experience with the system itself or other service systems that pose challenges for families (such as education, the courts, mental health or health care) — and that allows the coordinator to inform the family group about how the system functions
- Understands the culture and idiosyncrasies of the local referring agency
- Has experience with peace-making or with helping people with different points of view come to a common solution

### **Beliefs and Values**

- Agrees with and believes in FGDM philosophies and values, especially the belief in the rights and capacities of families, children and youths
- Has a clear understanding of what a family-led process — as opposed to a systems-driven process — looks like

### **Interpersonal Skills**

- Enjoys working with people
- Can readily engage with people
- Can build relationships with families and service providers
- Can build trust and rapport with families and service providers
- Can communicate honestly, clearly and concisely
- Can manage boundaries in relationships

### **Cultural Strengths**

- Is aware and open to learning about a family's culture
- Has the ability to understand a family's culture and support the family's culture in the family meeting
- Can identify and value the family group's culture and is sensitive to the impact of the dominant culture where the family group's culture does not coincide with this
- Is sensitive to issues of power, oppression, discrimination, colonization and marginalization
- Has the flexibility to work with families that function differently from his or her own

### **General Work Skills**

- Works with family groups to support and promote their solutions and perspectives
- Has organizational skills, including multitasking and the ability to prioritize, follow through and deal with logistical details
- Has skills in managing highly emotional or conflictual situations without becoming central to the process
- Can articulate his or her role and stay within that role



### **Personal Characteristics**

- Is sensitive to issues of power and oppression
- Genuinely cares about children and families
- Is committed to deepening learning and strengthening skills
- Has a strong sense of personal integrity
- Is intuitive
- Can recognize that he or she will not have the answers to all questions
- Is open to feedback and self-evaluation (also termed *reflexive practice*)
- Attends to self-care

## **I.8. Recruitment of Coordinators**

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Recruitment of coordinators takes place through multiple avenues, including:

- Active recruitment of family members who have participated in family meetings to be coordinators for other families
- Active recruitment of youths as valuable resources to coordinate and connect with their peers
- Outreach to the community to identify potential coordinators
- Outreach to tribal elders
- Outreach to grass roots organizing efforts that represent the community
- Work with agencies to identify referring workers in child welfare and juvenile justice who bring the requisite knowledge, skills, abilities and interest
- Involvement of social work students as coordinators as part of their field placement assignments
- Outreach to professionals who have retired from a variety of professions and who are seeking meaningful opportunities to engage with the community
- Community meetings that involve current coordinators, families, agencies and community representatives

## **I.9. Volunteers or Community Members as Coordinators**

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In some communities, volunteers or community members serve as coordinators. As examples, tribal elders may be engaged as coordinators, or community members may step forward as volunteer coordinators. Criteria for selecting volunteers for this position are based on the same coordinator qualifications previously identified (see guideline I.7. on coordinator qualifications). These coordinators — whether they are volunteers or paid community members — are also guided by the same principles and roles as described in these practice guidelines. Communities that use volunteers as coordinators provide initial FGDM training, supplemented by ongoing training and support that aids the coordinators in their work with systems and families. In this case, the sponsoring agency also builds an organizational structure to supervise, assist, co-coordinate, train, mentor and coach these volunteers or community members for the coordinator role. While this structure builds community capacity to



deliver FGDM, it is not implemented as a cost-savings mechanism, given this complex time-intensive, demanding and thorough approach. Communities can consider providing volunteers at minimum, a small stipend to support their involvement.

### **I.10. Selection of a Coordinator for a Family Group**

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Whenever possible, family groups are asked if they would like a coordinator from their cultural group or who speaks their language (assuming that the family as a group speaks the same language). In many communities, there are not multiple coordinators or the community is composed of many cultural and language groups, making it difficult to match the family's culture and language with a coordinator in each case. In these cases, arrangements can be made to have an interpreter present who can support in-depth communication. It also may be possible to identify someone from the community who shares the family's culture and language and who may emerge as a co-coordinator for the family meeting. These individuals from the family's cultural community are respected by the family and service providers and can best be brought into the process as co-coordinators when there are resources to support them in this role, including training for coordinators.

It is noted that family groups do not always want to be matched to someone of a similar cultural group. This may occur where the cultural group has only small representation in a particular community, and where family group members are anxious that confidentiality and privacy will not be maintained.

### **I.11. The Role of the Co-Coordinator at the Family Meeting**

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For some communities, using co-coordinators during the family meeting may promote increased transparency between agencies, family groups and others, and may equalize power differentials — real and perceived — by all family meeting participants. During the preparation process, the coordinator discusses with the family group the potential of having a co-coordinator at the family meeting, with the family group retaining the authority to decide about the presence of a co-coordinator. For example, if there is a high level of conflict or antagonism in the family group, or if the family meeting is anticipated to have a large number of participants, then a co-coordinator may be desired. Some family systems are located in remote areas, are members of complex tribal groups or are limited by transportation access. A co-coordinator who is culturally immersed or available to coordinate multiple phone connections with remote family members may be acceptable to the family and helpful to both the coordinator and the family during the meeting. In addition, communities may use co-coordinators as a training strategy for coordinators. When co-coordinators are used for family meetings, the coordinator and co-coordinator articulate their roles to the family group, to ensure transparency and a common understanding in the wider family circle.



# Section II. REFERRAL TO FGDM

## **II.1. FGDM as the Mainstream Practice in Child Welfare**

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Best policy and practice require that FGDM be organized for all families, and become the mainstream, standard way of working with family groups when their children come to the attention of the public child welfare agency, and when there is a significant planning issue or decision to make. To implement FGDM as a decision-making process for all children, child welfare agencies need to make some overarching changes to other public child welfare agency functions and philosophies, restructure the existing child welfare workforce and invest additional resources or realign existing ones. Because this takes time and will to organize, a number of communities have referral criteria that limit the number of families referred to FGDM. The referral approach that a community uses is matched with adequate resources to serve referred families, including a sufficient number of coordinators. There are no waiting lists for the children or families who would benefit from an FGDM process, as waiting lists minimize the urgency of the impending decisions on the life of a child.

## **II.2. Types of Referral Agents to FGDM**

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Most commonly, public or private child welfare agency social workers refer families to FGDM. Families may also self-refer to FGDM. Referrals also come from other systems, such as education and mental health, as well as community-based agencies, grass roots advocacy groups, places of worship, nongovernmental organizations and health care systems. In some communities, court personnel, judges and attorneys can also make referrals. In such situations, it is imperative that the family group understand that participation in the process remains a voluntary decision for each family member.

## **II.3. The Referral Process**

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Referral to FGDM is a process, not a one-time event or a piece of paper. The referral process involves the referring worker, the family group and the coordinator. The referring worker is typically the child welfare worker engaged with the family group. Any service provider assisting the family group may suggest that a family meeting may be useful, but the actual referral is made by the child welfare worker because of the mandate he or she holds and therefore the responsibility to accept the plan led by the family group.

The referring worker may first discuss the possibility of a referral with the coordinator if he or she is not certain if the situation or timing is right for the family. The referring worker and coordinator can then decide together if the worker will proceed with a referral. In other cases, the referring worker proceeds



immediately to talk with the primary family member(s) to introduce them to FGDM and the role of the coordinator. The referring worker makes a referral, following agency protocol, which initiates the coordinator's engagement of the family group. Depending on the child welfare worker's context, he or she may need to discuss a possible referral with a supervisor before initiating the referral.

The referral process is the first step in the preparation process for FGDM and overlaps preparation. The way in which the referral process takes place sets the tone for all subsequent work in that it ensures that the referring worker is on board and respective roles are clearly identified. Good referral practice is critical to positive outcomes from the family meeting.

#### **II.4. Criteria for Referral to FGDM**

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FGDM is most beneficial when the family group understands the child welfare agency's concerns or the crisis it is confronting, the family group is widened and the referring worker or agency gives preference to the family group's plan over any other plan as long as it addresses the agency's concerns. FGDM referrals in situations involving domestic violence and sexual abuse or when protective orders are in place require careful consideration and collaboration between the referring worker, coordinator, broader community and family group.

#### **II.5. Role of the Referring Worker During the Referral Process**

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The referring worker identifies family groups to participate in FGDM. The referring worker may initially talk with the coordinator about a family's potential interest in a family meeting. In other cases, the referring worker may first introduce the FGDM process to the family. The referring worker introduces the family to the coordinator whose sole responsibility is to coordinate and organize family meetings (see guideline I.5 on the role of the coordinator).

The referring worker describes to the parents or primary caregivers the purpose of FGDM, that the agency views the family group as a better decision-making agent than the agency, and that the agency needs and values the family group and welcomes it into the decision-making process. Because FGDM is not guided by law in most countries, the referring worker, and in some cases the coordinator, may need to work with the parents or primary caregivers to secure a release of information that can be used to contact other family and community members in the coordination process. FGDM is based on the principle that children have the right to their family group coming together to plan for them and therefore, those with connections and relationships to the children are entitled to participate. Agency policies and protocols are structured in a way that allows the implementation of this core FGDM principle.

While it is the coordinator's responsibility to most fully explain FGDM to all members of the family group, the referring worker also needs to be able to exhibit the practice values, describe the process and answer questions that the family group may ask. This includes the following points:

- FGDM is a way for family groups to lead decision making in partnership with the child welfare agency.
- FGDM is a collective, not an individual, decision-making process.
- FGDM involves a widening of the circle to include the broadest family group as defined by the family group.



- FGDM is a transparent process with all information necessary for planning for children's safety, permanency and well-being shared with the family group as the process moves forward.

The referring worker also verifies with the family group and the coordinator that the agency is not approaching FGDM with predetermined outcomes. When agency concerns are addressed, preference is given to a family group's plan over any other possible plan.

## **II.6. Type of Information Gathered During the Referral Process**

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How the referral is initiated may vary depending on context. In some instances, referrals can be initiated by a phone call to the coordinator; in other situations a referral form may be needed. Independent of how the referral is initiated, the following items are typically collected during the referral process:

- Date of referral
- Name and telephone number of the referring workers
- Names and positions of other child welfare staff or service providers involved with the family group
- Parents' names; race, ethnicity and religious background; and contact information
- Child information, including date of birth, race and ethnicity, and placement
- Sibling information, including age
- Referring workers' concerns linked to children's needs identified by the referring worker and other members of the child welfare team
- Preliminary goals for the family meeting
- Any domestic violence or sexual abuse concerns
- Name and contact information of child's attorney (if applicable)
- Identification of restraining orders between participants
- Family's preferred language (if known)
- Special needs, if known (e.g., TDD communication for calls)

If names, relationships and contact information for other members of the family group and other service providers with whom the family is working are known to the referring worker, these can be included. If there are any known concerns for family members' or others' personal safety, this is also shared.

## **II.7. Role of the Coordinator in the Referral Process**

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As an impartial convener, the role of the coordinator during the referral process is to reach agreement to move forward with planning the family meeting. The coordinator may introduce and further explain FGDM to the family, informs the family about the process, reaches agreement with the family about how best to proceed and protects the family group and children's privacy.



## II.8. Partnership Between the Referring Worker and the Coordinator During the Referral Process

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The coordinator does not review the family's file or court documents. The coordinator requires only enough information to understand the purpose of the family meeting and to be able to convey the information shared by the referring worker about what precipitated the referral. The more case-specific and historical information that the coordinator receives about the family, the more challenging it will be for the coordinator to remain fair, equitable and independent in his or her role as "ambassador of the FGDM process." The coordinator is not asked to review case files as it then becomes the coordinator who distills what information is conveyed to the family group (and thereby inherently assessing the information) rather than leaving this responsibility with the referring worker.

Once the referral has been initiated, the coordinator communicates with the referring worker before engaging the family group to gain information that will benefit the preparation process. This information may include:

- **Safety Considerations:** What is needed to promote the emotional and physical safety of the child, other members of the family group, the referring worker and others attending the family meeting? This information involves the identification of what will promote safety; it is not the safety plan developed by the referring worker.
- **Contact:** What brought the family into contact with the child welfare system.
- **Strengths/Protective Capacities:** The strengths and protective capacities of the family group as understood by the referring worker.
- **Concerns:** The specific concerns of the agency and the court with respect to the child's safety, permanency and well-being. The coordinator may help a worker determine whether the concerns are appropriate to a family meeting process, as extremely restrictive or unsubstantiated concerns represent the antithesis of FGDM principles and can result in a failed process.
- **Purpose:** The purpose of the family meeting, recognizing that the agency's purpose and the family's purpose may be different, and such differences will be negotiated by the coordinator with the agency and family group.
- **Time Frames or Deadlines:** Any deadlines, imposed by federal, provincial or state policies or laws that will impact the decision-making and planning process.
- **Circle Widening:** Any concerns that the referring worker has about widening the circle, including any potential volatility issues.
- **Special Needs:** Any special needs of children or family members.
- **System Involvement:** Other systems with which the family is involved.
- **Openness:** Whether the referring worker and his or her supervisor and other deciding service providers on the case are open to accepting the plan if all protective issues and agency concerns are addressed.
- **Availability:** Potential available dates for the family meeting.
- **Overview:** Review the family meeting process, for referring workers who are new to the practice.

In addition, in this conversation, if the referring worker suggests to the coordinator that certain information is off the record, the coordinator challenges this occurrence. First, this is counter to



core practice principles and compromises the coordinator's role as an impartial convener with the coordinator holding information that is not shared with the family group. Second, the worker is encouraged to reflect on why such information cannot be shared with the family group.

## **II.9. Locating Parents or Primary Caregivers to Discuss FGDM**

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The coordinator makes diligent efforts to locate parents or primary caregivers to discuss with them their interest in FGDM. If the coordinator needs more information on family members, the family is asked for it. If the coordinator needs more information on parents to locate them, then it is the responsibility of the referring worker or other service provider to search through case files, use internet technology or use other means to identify and locate them.

Given the maternally focused nature of the child welfare system, special emphasis on identifying, locating and engaging fathers and paternal kin is necessary. Through pursuing parents or primary caregivers in a diligent manner and working through any resistance that the child welfare agency may encounter in locating them, the coordinator is often able to engage them in a discussion of a family meeting. For this reason, efforts to find parents or primary caregivers are not ended prematurely nor are challenges in locating them interpreted as an indication that they are not interested or responsible.

When a diligent search and efforts to engage parents or primary caregivers do not succeed, the family meeting may go forward, depending on the desires of the family members who have been contacted and the policies and practices of the community. When family members wish to proceed, moving forward with a family meeting is consistent with the child's right to have the family plan for the child and the value of having the collective family group make decisions for and with young family members.

In many communities, in cases in which the parents or primary caregivers cannot be located, the coordinator meets with family members who have been located and asks them as a group about proceeding with a family meeting for the child given that the parents or primary caregivers will not likely participate. In these situations, the coordinator meets individually or in smaller groups with family members to reach a better understanding of the parents' perceived reluctance and how comfort and safety may be achieved for the parents as other family members are invited to participate in planning for the child. The meeting is scheduled when the collective family group decides to move forward with it.

In some communities, when parents are not present, it is the practice to proceed with the family meeting to plan for the child but not share information from the child protective service file with the family group. In other communities, the law prohibits the holding of a family meeting at the child protective services phase of the case. The coordinator is charged with understanding the legal and policy mandates on this issue. Best practice would suggest that, without the core information that brought the family to the attention of the public child welfare system, the family group is disadvantaged to make decisions that are in the best interests of the child. FGDM culminates in a family meeting, rather than an agency meeting that families are invited to attend.

## **II.10. Referral Timelines**

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Given that the preparation phase of the FGDM process is often comprehensive and can require an investment of time over many weeks, best practice suggests moving through the formal referral process between the child welfare agency's referring worker and the coordinator as quickly as possible. An



expedited process will result in a quicker transition to the preparation of family members and other service providers, and the family meeting.

## **II.11. Acceptance of Referral**

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A referral to FGDM is likely to be accepted when:

- The referring worker and family group work together to determine the clear purpose for the family meeting or a plan or decision that needs to be made;
- The referring worker or agency has stated that the family group's plan will be given preference over any other plan after the identified agency's concerns and protective issues are addressed;
- The process is organized without the referring worker or agency setting predetermined outcomes; and
- The referring worker is willing and able to honestly share critical information and the agency's and court's child safety expectations.

A family's acceptance to move forward can occur both in the referral and preparation phases of the process.

The coordinator prepares family members and service providers for the family meeting without taking on the role of the referring worker or other agent of the public child welfare agency. Through preparation, the coordinator works to include different perspectives at the meeting. During the preparation process, the coordinator continues his or her role as the guide of the FGDM process through conducting all of the activities described in this section.



## Section III. PREPARATION

### **III.1. The Coordinator's Preparation of Self**

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Before, during and after meeting with members of the family group, child welfare team or other service providers, the coordinator checks in with his or her own assumptions about these individuals and their participation in the process. Continuously throughout the process, the coordinator uses a reflective, introspective process to identify his or her own values and potential biases, working to be fair and equitable to all participants. Coordinators are also encouraged to team up with their colleagues to acknowledge and work around any difficulties in this area. The coordinator's role is rewarding, and emotionally and physically demanding. Coordinators are better able to assist families when they take care of themselves. Coordinators thrive in an agency and community that embodies the FGDM values and principles and supports individual growth and continuous quality improvement.

### **III.2. Definition of Family**

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Based on the principle of inclusion, the coordinator encourages, as far as possible, the widening of the individual members' definition of family. The extended family group defines and decides who is "family." The family group may include maternal and paternal relatives, stepchildren, half-siblings, friends, community supports, neighbors, religious leaders, tribal elders and other natural supporters who have a significant relationship with the child, parent or other family member. The family group's definition serves as a preliminary launching pad from which the circle is widened to include as broad of a family group as possible. Who the family group is becomes a negotiated process as the coordinator meets various members of the family. In keeping with this principle, it is the coordinator's responsibility to ask about both paternal and maternal family members.

### **III.3. Identifying Family Group Members to Invite**

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The spirit of FGDM is to widen the circle of caring. The underscoring principle is that children benefit from the thoughtful planning of their entire family group network and that parents or other primary caregivers cannot limit these connections or relationships.



Preparation involves working diligently to ensure that the process is available to everyone in the child's family. The coordinator begins by asking each family member who is part of the family group with the intention of reaching out to these members as potential participants for the family meeting. In the preparation efforts, the coordinator continually asks such questions as, "Who else is part of the family?" "Who attends family weddings, funerals, family reunions or other major events?" or "Who do you turn to when you need support or help?" The coordinator perseveres in identifying family, particularly fathers and paternal relatives who may be overlooked. The coordinator talks with the children about whom they view as their family. Tools such as developing a family tree, ecomap or sociogram may be useful in this conversation.

The emphasis is placed on ruling family "in" as opposed to ruling family "out." If family members or service providers recommend the exclusion of a certain individual from the family meeting, it is the coordinator's responsibility to ask numerous questions, unearthing the many reasons that support this request. The coordinator does not exclude family members, unless the family members demonstrate or provide information that a certain individual could be emotionally or physically harmful to other participants or the process. Ideally, the coordinator does not make this type of decision alone, but with a family consensus. When there is a decision to exclude members, the family group needs to reflect on how this will impact its decision making and it may be appropriate to consider another of the many meeting and decision processes that are available in communities.

The family group, in partnership with the coordinator, decides when the circle is wide enough to be ready for the family meeting. This is based on the notion of engagement and partnership, with these types of decisions being made jointly.

In many contexts, without legislation authorizing family meetings as the ways decisions are made, there is an expectation that parents or primary caregivers sign a consent or release of information form so that the coordinator can conduct the necessary preparation activities, including contacting others.

### **III.4. Finding Family**

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There are many processes coordinators can use, including a variety of methods, strategies and tools that rapidly help family group members and service providers identify and locate familial and other relationships. Investing in these methods to quickly find and understand relationships between children and the extended family system will result in a larger pool of family resources that can be tapped for the FGDM process. Identifying and then locating family are the initial steps to engaging them in the FGDM process.

Some strategies to find family may include:

- Asking the family for any information on their family constellation
- Reverse phone look-up
- Social networking sites
- Other internet-based technologies

Family members already contacted are informed if other family members are going to be approached, so as to ensure the integrity and transparency of the process.



Coordinators also must be aware that families may want to shield certain family members from “the public eye” if that member’s legal status in the country is insecure or if that family member has come into conflict with the law.

### **III.5. Involving Family Group Members in the FGDM Process**

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To support the development of a positive, trusting working relationship with family group members, the coordinator preferably begins the engagement process through face-to-face visits, whenever feasible, and secondarily, phone calls. This approach is more likely to result in effective and genuine communication between the coordinator and family group members, demonstrates a respect for the family members’ perspectives and helps the coordinator gain a deeper understanding of the family group. This type of relationship and information helps the coordinator position the family group as the leader of its FGDM process.

The face-to-face visit is generally followed by a phone call and then by a letter of invitation, confirming time and place, to participate in the FGDM process. In conversations and letters, the coordinator explains that the agency is inviting the wider family circle to come together, and that membership in the family group entitles them to an invitation. How invitations are extended and followed-up with family group members will be guided by the size of a family group, the dynamics between members of the family group and other factors.

When extending invitations to family group members to participate in the FGDM process, the coordinator explains the reason the agency received a referral and that the agency is convening a family meeting. The coordinator describes the event as a meeting of the family group and the child welfare system where the family group takes the lead in decision making and the child welfare system joins in the decision (family-led decision making). The family leads the process because it is the expert on its family system.

### **III.6. Preparing Family Group Members in the FGDM Process**

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The preparation of the family is grounded in the following principles:

- Family groups are entitled to information about what has happened to the child and the family because of their decision-making role.
- The process is transparent so the family group does not experience surprises from the child welfare system or other service providers at the family meeting.
- Family groups must be adequately prepared to engage fully in the process and to make decisions.
- The coordinator is a carrier, but not creator, of information.
- Every family group member hears the same information held by the child welfare agency during the preparation phase.

The following areas are addressed in preparing family group members. Cultural considerations come into play in a variety of different ways to honor the family including when, where and how preparation visits take place, and whether the information is provided to family members in written form or orally (see guideline III.24. for more on cultural considerations).



- Family members need to know why they are being invited to participate in the family meeting, which includes the reason for the meeting and the reasons the family has become involved with the child welfare system.
- Family members need to know what information service providers hold, and how these individuals articulate the family strengths and concerns related to the child (the coordinator provides the basic information about the case to the family group, as was discussed with the referring worker). The coordinator does not handle specific questions that family group members ask about their situation, but directs them back to the referring worker. If the coordinator suspects that the referring worker has not provided sufficient information to the family, then it is the coordinator's responsibility to reconnect with the referring worker to ensure that information is relayed in a timely way. Otherwise, if family members are not initially given enough information, they may not know what questions they need to ask of service providers. Ultimately, the burden to provide information falls on service providers.
- Family members need time to respond to information at an emotional level, process the information, talk amongst themselves and pose any questions they have to the referring worker and coordinator.
- Family members need to know what to expect of the process and are provided with an outline of further preparation steps, the family meeting and follow-up processes.
- Family members need to be able to consider their own role in the family meeting. This includes identifying how they will most effectively have a voice in the family meeting process.
- Family members need the opportunity to define who their family group includes so that the circle will be widened as completely as possible to include those with a relationship with the child or with other members of the family group.
- Family members may require information on how the child welfare system functions and on the formal resources potentially available, shared in a way that does not unintentionally force families to select those resources.
- Family members may need to be supported to express any safety concerns and to plan how to address these for the family meeting. This may include identifying a support person ([see guideline IV.1.3. on support persons](#)).
- Family members need to be encouraged to identify how they would like to see their family cultures reflected in the family meeting process. This includes a discussion about how the family group would like to mark the beginning, and potentially the end, of the family meeting in a way that is congruent with their norms. The coordinator may ask, "How do you usually start activities when your family comes together? Would you like to do this at this family meeting? Is there anything you need in order to do this?"
- Family members and service providers should be asked how other service systems requested by the family will remain intact to support the family (such as housing, food assistance and health care).
- Family members need to have a voice regarding the logistics of the family meeting, such as when and where it is held, transport options, child care and refreshments.

Preparation typically begins with the parents or primary caregivers and then extends to other members of the family. Through the engagement process, the coordinator encourages families to identify their strengths, protective capacities and concerns and to use these during their private family time at the



family meeting. This type of exploratory conversation during the preparation process recognizes and honors the family and elevates them beyond being defined by an incident or event.

### III.7. The Role of Children<sup>4</sup> in the FGDM Process

“Nothing about me without me” is one of the mottos of FGDM. The ideas that children are the center and main reason for the family meeting and that they have the right to personal expression are based on the United Nations Convention on the Rights of the Child. In family meetings, the preference is that children of all ages are physically present. Family meetings are about creating viable, workable and transparent plans for children, and therefore their role in the development and implementation of any plan is essential.

This practice may challenge some cultural traditions of children being silent, or being seen but not heard. From a fundamental human rights perspective, the children's right to be heard supersedes the parental or family group's decisions about limiting their involvement or presence. Issues of family and tribal culture and traditions require exploration, in recognition that these may impact how children are part of the process. The question is not whether children and young people are involved in FGDM processes, but rather how they are involved, in ways that respect them as individuals and the cultural groups from which they come.

### III.8. Preparing Children

The preparation of children is grounded on four principles:

- Children have the opportunity to work with their family members to plan for themselves.
- Children have information about the public agency's concerns that have resulted in their involvement in the child welfare system and understand the information provided by others and the decisions made (all delivered in a way consistent with the child's developmental stage).
- It is necessary to give voice to children's concerns, wants and needs.
- Children have voices that must be heard in the planning and decision-making process.

The preparation of children addresses not *whether* they will participate in family meetings but *how* they will participate.

Out of respect for the parents or primary caregivers and other adults in the family group, the coordinator is transparent about his or her role in preparing and talking to the children about the family meeting. Historically, child welfare systems have often shielded children from decision-making processes, citing a number of reasons, including protecting children from sensitive or adult information, believing the decision rests with adults and not wanting to give children a false expectation that their desires or preferred outcomes will be the final decision.

However, FGDM builds on the notion that children want to be part of decision-making processes that affect them and they need appropriate information. Children often draft false conclusions from the information they have themselves gathered, which may leave them quite vulnerable. Coordinators can make it clear that it is critical for adults to hear what the child feels is important and consider it in the decision-making process.

<sup>4</sup>In this document, *children* includes young people or teens.



It is the referring worker's responsibility to introduce the concept of the family meeting and the role of the coordinator to children. From that point forward, it becomes the coordinator who shares information about the FGDM process and the family meeting with the child to make decisions about the child's participation.

### **III.8.1. Discussions With the Child**

The coordinator helps the child:

- Understand why a family meeting is being held;
- Understand the family meeting process, including what it may be like, the child's role and the time involved;
- Be prepared for who will attend; and
- Understand his or her role as one to create an environment in the family meeting where the child feels safe to express him- or herself.

The coordinator uses his or her judgment and skills to engage children in conversation. The following questions have been helpful in engaging children:

- What would the child need from family members to feel comfortable and safe to participate, independent of who was in attendance?
- How does the child want to participate in the family meeting?
- What does the child want to tell the family at the meeting?
- What does the child want to see happen at the meeting?
- What does the child want to get out of the meeting?
- What kind of plan would the child like to see?
- What does it mean to the child to have family members come together to make a plan?
- What does it mean to the child if people whom the child does not feel comfortable with are at the meeting?
- Is there a specific location where the child would like to hold the meeting?
- Who could support the child during the family meeting? (see guideline III.10 on the role of support people and guideline IV.1.3. on participating support persons).

The coordinator may see the child alone or may work alongside a family caregiver, foster parent, legal counselor or other service provider in sharing the information and preparing the child for the meeting. If one contact seems inadequate to prepare the child, the coordinator considers using the aforementioned supports or other involved service providers (e.g., counselors) to prepare the child more adequately for the family meeting. Coordinators can use a range of methods and aids to engage children, including drawings of their family, doll chairs to represent the family circle and videos that represent family meetings.

Given the power differentials that often exist between children and adults, some children's discomfort or lack of confidence in talking at the family meeting, and the notion that children should be seen and not heard, the coordinator works with the child during preparation to:



- Write down, videotape, draw or decide what the child wants to say;
- Review with the child his or her statement to the family group and service providers;
- Discuss who the child wants to share that information (Note: if the child prefers someone else to read the information, the coordinator checks with that person); and
- Determine when during the meeting this information will be shared.

### **III.8.2. Considerations in Determining How Children Participate**

While there may be some exceptions to children being present at the family meeting, best practice supports their physical presence during this decision-making forum. Conversations with children and their family groups will lead the coordinator, the child and adult family members to determine how the children will be involved in the family meeting.

Some of the considerations may include:

- Whether the child wants to participate;
- Behavioral, developmental or mental health needs of the child;
- The age of the child;
- The family groups' thoughts on the child's participation;
- The potential for the process to be helpful for the child, including the views of the child's therapist on the child's participation, if relevant;
- Which family members will be present at the family meeting;
- The child's support network at the family meeting and post-family meeting; and
- The child's designated support person.

It is a delicate, multilayered process to work with children and their family groups around their participation in family meetings. Not one question or consideration can be viewed in isolation. Rather, it is the coordinator's responsibility to balance all the information gathered and work with the child, young person and family group to determine how they will be participating, with best practice supporting their physical participation.

### **III.9. When Children Will Not Be Physically Present**

On the rare occasion and for a variety of reasons, after the coordinator has discussions with the child, family group and others, it may be decided that a child not be physically present at the family meeting. For example, the family group's culture may be such that sensitive issues are not discussed in front of children. When children are not going to be physically present, the coordinator has the responsibility to ensure that their perspectives are brought forward during the family meeting. To do this, the coordinator may:

- Talk with the family group about ways they can take account of the child in the family meeting;
- Consider with the child and family group ways for the child to be heard without his or her physical presence at the meeting, exploring in advance who may represent the child's voice; and



- Implement a tool for helping the child to express concerns, ideas and feelings, such as through a story book, child pamphlet, letter or collage that can be presented at the family meeting.

### **III.10. The Role of Support People**

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Any family member participating in a family meeting may choose a support person from the family group to enable him or her to participate maximally in the family meeting. The primary support people are individuals within the family system or the community rather than professional service providers. The coordinator presents this option to family members during preparation. A support person becomes particularly important for family members who have had difficulty making their voices heard in the family group, as well as members who may be more volatile. Support people for those who caused the harm are not responsible for defending the person's harmful actions or behaviors. The support person potentially has numerous roles at the family meeting. These may include:

- Accompanying the person he or she is supporting to the family meeting.
- Providing emotional support to the person he or she is supporting.
- Representing the voice and perspective of the person he or she is supporting, if asked by that person to do so.
- Sharing his or her own perspective as a member of the family group.
- Monitoring the emotional and physical safety needs of the person he or she is supporting during and after the family meeting, requesting breaks if necessary.
- Leaving the room with the person he or she is supporting if that person needs or desires to exit the family meeting.
- Encouraging those who have caused harm to accept responsibility and build accountability for their actions.
- Supporting behaviors that heal and promote positive, healthy relationships.

### **III.11. Preparing the Support Person**

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As an initial step in preparing the support person, the coordinator clarifies who the support person will support and the role of the support person in relation to the supported. Service providers are excluded from private family time and thus are unable to offer direct support at that time. Because relationships between service providers and service users are intended to be short-term, it is useful for vulnerable family members to identify supports within their circle, as it is assumed these are more likely to persist through time. As a key part of the preparation of the family group, the coordinator talks with the family about support people and the importance of identifying support people from the family's natural network. When a family member selects a service provider as a support person, the coordinator asks who in the family system the individual goes to for help. This discussion can help the family widen the circle of support people who will be available to them over time.

The coordinator works to prepare the support person for his or her role, and communicates that role to the person being supported. This may occur in a group format or individually. The person to be supported defines how he or she wants to be supported in the family meeting.



The coordinator prepares the support person by:

- Reaching agreement between the vulnerable participant and the support person about his or her role in the family meeting.
- Explaining the meeting purpose and process.
- Helping the support person understand the honor and responsibility attached to the role of a support person.
- Talking with the support person, if needed, about the kind of support he or she is offering (e.g., physical presence, voice, message bearer, safety guide) and ensuring that this type of support matches what the person in need of support wants.
- Talking to the support person and family member about developing a nonverbal communication plan during the family meeting as a means of support.

Support people have a dual role in which they provide support and express their own opinions as members of the family group. The coordinator helps the support person differentiate these roles and how to reasonably serve in both roles.

### **III.12. Preparing the Referring Worker and Other Members of the Child Welfare Team**

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Because FGDM practice is quite different from traditional child welfare practice, referring workers may find participating in family meetings challenging and time-consuming. In the family meeting, the role of the referring worker is to provide information about the public agency's concerns to the family group in a straightforward and honest way (see guideline IV.7.3 on the information-sharing phase). This role of information provider is often difficult, as the family group may have many questions about or challenges to the public agency's concerns. Therefore, it is essential that the coordinator also prepare the referring worker and other members of the child welfare team (i.e., the supervisor and foster care providers) for their roles, independent of their experience with and knowledge of FGDM.

When preparing the referring worker, the coordinator:

- **Supports the referring worker in identifying who from the child welfare team needs to attend the family meeting** to ensure all information is shared with the family group. The intent is to keep service provider representation to a minimum, while ensuring that the family group receives all the information it requires for informed decision making.
- **Discusses the FGDM process and values and the benefits of the process for the worker.** It may be helpful to talk about how the process relieves the pressure on workers of having to make all the decisions on their own. It may also be helpful for referring workers to imagine the opportunity for a family meeting for their own family, should their family become involved with a public child welfare agency or have a crisis.
- **Verifies information originally obtained in the referral process.** This includes the purpose of the family meeting, the agency's concerns that need to be addressed and whether they have remained consistent since the referral, the family's strengths, the worker's commitment to seeing the family through the process and the worker's and agency's willingness to consider the initial plan and support the agreed-on plan that results from the family meeting.



- **Explores what the agency would need to see to accept the plan.** This is a key part of the initial referral meeting between the referring worker and coordinator, and is reviewed again during the preparation process. It is the agency's responsibility to articulate all of the concerns related to the agency's involvement with the children that need to be addressed during the planning process.
- **Rejects the notion that agencies, through referring workers or other service providers, identify agency concerns as bottom lines,** in line with FGDM best practice. "Bottom line terminology" has a number of effects, including:
  - repositioning the agency as directing or controlling the solutions to meet the concerns;
  - disempowering the family's creativity and knowledge as to how they may address the concerns; and
  - encouraging workers and other service providers to dictate services that families will implement as part of the plan. All service providers are prepared to identify resources that are available to the family group, but it is important to ensure that options are offered to families and not subtly perceived to be mandates. The coordinator may coach the referring worker to anticipate the range of solutions and ideas that the family group will offer during this process.
- **Clarifies the referring worker's role in the family meeting and delineates the respective roles of the worker and the coordinator.** To achieve this, training videos, case consultation, viewing a family meeting, peer consultation or participating in role-playing can be helpful in preparing the referring worker for his or her role in the family meeting.
- **Prepares workers for what they may experience at the family meeting.** For example, the coordinator may help referring workers:
  - anticipate questions that may be directed to them;
  - anticipate anger that may be directed at workers by families and explore what it will be like for the worker to be in the "hot seat";
  - frame comments in clear and direct language, in ways that are understandable to the family and are strengths-based; and
  - provide suggestions as to how the worker can handle family members' questions, anger, frustration, disappointment and confusion.
- **Anticipates workers' needs by discussing safety issues and support needs** with the worker, such as the need for child care for family meetings occurring during nontraditional business hours. The family group directs any safety planning activities, in collaboration with the coordinator and referring worker.

### **III.13. Preparing Other Service Providers**

The family guides which service providers are invited and how they are invited to the family meeting. In some instances, once coordinators receive consent, they contact the service provider directly. In others, the family may speak with the provider first and the provider expects contact from the coordinator. As stated previously in these guidelines, it is important to consider the number of service providers invited to a family meeting and to limit service providers to those who have critical information needed by all participants for decision-making purposes. The coordinator may extend formal invitations to service providers to participate in the family meeting.



The preparation of service providers will differ, depending on the type of service provider (such as domestic violence counselor, addiction counselor, religious leader or providers in tribal nations and other ethnic communities). In all cases, however, preparation rests on the principle that everyone needs to have the same understanding of the core concerns that the family group will be asked to address at the family meeting so that the group does not start at cross-purposes. If service providers have varying opinions about the core concerns, it is imperative for the coordinator to organize a pre-meeting with them to reach agreement on this information and on what will be shared (see guideline III.14. on pre-meetings). Training that supports service providers' knowledge of and participation in the family meeting and that is based on the core principles of this work is essential (see Section VI.3. on training). In preparing service providers, the coordinator provides information regarding policies for payment for participation in family meetings. Communities make determinations as to whether or not service providers are reimbursed for their participation.

In preparing service providers, coordinators generally:

- Explain the FGDM process and the phases of the family meeting.
- Help service providers understand their critical role in the process, as factual and objective information providers and responders to questions that families direct to them.
- Clarify that they do not agree or disagree to the core plan developed at the meeting but are asked about their or their agency's ability to meet the family's needs identified in the plan (this may or may not be formal resources or services that are generally found in case plans developed in more traditional ways).
- Ask service providers to check in with themselves about their participation in the family meeting as it can be a different experience for those who traditionally serve in a helper role.
- Suggest that service providers consider such questions as, "What do I need to fully participate?"; "What resources are available?"; and "What information do I need to share?"

### **III.14. Pre-Meeting for the Child Welfare Team**

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In a number of situations, such as with families with more than one child to plan for, children and young people who have been living in the child welfare system for extended periods of time or families with complex needs, more service providers may need to be at the family meeting and the child welfare team may be larger than normal. In these cases, it may be useful to bring all members of the child welfare team together before the family meeting to determine the information that the family will need. However, if a meeting of the child welfare team is assembled, the coordinator needs to inform the family group and child welfare team of the purpose — to share information and clarify roles, not to serve as a forum to make decisions or have an open discussion about the family. The sole purpose is for the child welfare team to agree on the core information that will be shared during the family meeting.

### **III.15. Preparing Legal Professionals**

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The coordinator notifies the court and all attorneys about the family's decision to participate in a family meeting and explains, when necessary, the FGDM process. The children's attorney is an entitled member of the family meeting. All other attorneys are invited in the same way as other service providers, as noted in guideline III.13., with the family guiding which service providers are invited and how they are invited to the family meeting.



The coordinator prepares attorneys for the parent, agency or child in the same way as other service providers are prepared should they decide to attend the meeting. The coordinator explains the FGDM principles and process to all attorneys, as well as sharing the child welfare summary of information. This information helps the attorneys better advise their clients both before and after the meeting. In particular, with regard to parents' attorneys, it can help them ask their client a series of questions to determine if the family meeting was carried out in such a way that was consistent with FGDM principles.

If attorneys attend the family meeting, care needs to be taken so that the meeting does not become a meeting driven by legal professionals. Because FGDM is not a legal process, not adversarial in nature, and does not impact anyone's "legal standing", there is no role for lawyering in the family meeting. Attorneys can participate in the information-sharing phase and the plan finalization phase.

If attorneys agree with the plan, they may advocate for the plan with the court. Attorneys can also review the plans developed in the family meetings before any court proceedings. If an attorney and his or her client have concerns about a plan, these can be presented in court. However, it is the judge's decision to approve the resultant plan from a family meeting, including the extent to accommodate other concerns raised.

Information shared in the family meeting is classified as privileged, and therefore is not admissible in court or any other legal proceedings, unless mandated by authorized reporting laws.

### **III.16. Preparing Foster Care Providers**

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In most communities, foster care providers (both kin and non-kin) are seen as a critical part of the child welfare team. Kin foster care providers are prepared using the same guidelines for extended family members (see guideline III.6.). The coordinator prepares non-kin foster care providers for their participation in the family meeting, both individually and as a member of the child welfare team, negotiating the information they will share during the family meeting. The coordinator acknowledges foster care providers as important caregivers and supports for the child(ren) and shares that typically, family group members value the presence of foster care providers and appreciate the opportunity to ask them directly about the child's care. The type of information that foster care providers might share includes, but is not limited to, the child's health, school performance, integration into the home, sleep patterns, pre- and post-parental visit information, and any other information that would be helpful related to transitions or relationships with parents or other members of the family group.

The coordinator also explains that non-kin foster care providers are not included in private family time, as they are not members of the child's family group, but members of the child welfare team. The coordinator discusses with them the legal and power imbalances between families and the child welfare system and foster care providers' roles in U.S. communities as mandatory reporters of child abuse and neglect — both of which work against their participation in private family time. Kin foster care providers are included in private family time.

During the preparation process, the coordinator may ascertain that foster care providers have conflicting needs and views, given their dual relationships as service providers to the child and potential interested adopters, which may be counter to the direction of the family meeting. If this is the case, the coordinator articulates his or her concerns to foster care providers and helps them explore how they can participate in ways that respect the family group and as part of the broader child welfare team.



### **III.17. Coordinator Information Sharing**

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While the coordinator works respectfully with the family in sharing information, the principles to follow are:

- All relevant information to the decision is shared so that participants make the most informed decision (and the coordinator works with all participants to determine the “relevance of information”).
- There are as few surprises as possible in the service provider information at the family meeting.
- Service providers are transparent in sharing information.

Withholding critical information that compromises the sustainability and effectiveness of the decision is not in keeping with FGDM principles. Regarding how and with whom information will be shared, the coordinator engages in discussions with family members about:

- Safety issues and sharing information about what has happened with other family members. Recognizing that safety is the ultimate determinant of how much information is shared and in what ways, the coordinator asks family members, “Do you have any concerns about this information being shared?”
- How information will be shared with family members before the meeting, providing parents or primary caregivers with the opportunity to share the information with family members first.
- Depending on the legal and practice environment of the agency, information on legal and ethical constraints on sharing information and the use of information-sharing agreements.

See guideline III.23. for more on information sharing and guideline IV.7.3. for more on information sharing during the family meeting.

### **III.18. Information Gathered Through the Preparation Process**

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During the preparation process, the coordinator often will learn information about the family group like dynamics, relationships or individual family members’ concerns (such as substance abuse of a grandfather). Unless there are new allegations of child abuse or neglect, which coordinators in most communities would likely be required to report, the information learned from family members in the preparation phase is privileged. Coordinators do not share it with any representative of the public child welfare agency or any other statutory system. Also, coordinators need to check with individual family members whether and which information they have shared can be in turn communicated to other family members. Coordinators use all of this information to attend to potential conflicts that might derail the FGDM process.

### **III.19. Mandated Reporter Identification**

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Mandatory reporting laws vary from the general “every person is a mandatory reporter” to the specific “only certain professionals are required to report suspected child maltreatment.” Based on each community’s mandatory reporting laws, the preparation process includes an explanation of mandatory reporting of child abuse and neglect and the identification of the coordinator as a mandatory reporter if this is the case. Later, at family meetings, it is important to identify who at the meeting is a mandatory reporter and to remind all participants of mandatory reporting obligations, if specific people have that role in a particular community.



### **III.20. Achieving “Buy-In”**

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Preparation provides the opportunity for all participants to reach agreement on the importance of the FGDM process in making decisions regarding a child. Through preparation, participants are able to make commitments to attend the family meeting and to support the collective work toward achieving the defined purpose.

### **III.21. Building a Climate of Physical and Emotional Safety**

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During the preparation process, the coordinator works to enable the family group to reasonably ensure the physical and emotional safety of all participants. The safety of all participants is considered before, during and after the family meeting.

The role of the coordinator is to create a space for decisions to be made about safety, not to make decisions about safety. In order to create a space for safety decisions to be made, the coordinator:

- Gathers and shares information regarding child safety issues, other potential safety concerns related to the FGDM process and any domestic violence issues (in which case, the coordinator considers a range of additional steps to achieve safety during the family meeting);
- Works to gain commitment from participants regarding safe and respectful behavior;
- Supports participants in developing a safety plan for the family meeting that takes into account where to hold the meeting, who can or cannot attend in person, seating arrangements and the identification and preparation of a support person for any victim and/or offender (see guideline III.10.);
- Confirms with the family that the safety plan is adequate;
- Supports the family group in considering, when necessary, alternative methods of information sharing by a person who is excluded (such as a letter, conference call or video conferencing); and
- Takes time to be aware of his or her own sense of or biases regarding safety.

### **III.22. Respecting Families’ Privacy**

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All information shared at a family meeting is considered privileged so that it cannot be used in any other manner outside of the family meeting. This will allow family group members to speak as candidly as possible, without any recrimination that could stunt necessary dialogue. However, given that not all communities have the legal authority to categorize these conversations as privileged, issues of confidentiality may arise.

Coordinators share with the family the measures taken to protect their privacy and confidentiality. Because parents and others often have concerns about other people finding out the information that brought them either into the child welfare system or to a family meeting, it is important that preparation include discussions of confidentiality. Some families incorporate a statement about maintaining confidentiality or privacy into their meeting guidelines, some communities have all participants sign a statement agreeing to maintain confidentiality or privacy prior to beginning a meeting and some families choose to simply speak to the issue as a meaningful concern and come to an agreement before they proceed. Through preparation, the family group and others can come to decisions about how to handle confidentiality or privacy concerns. It is the coordinator’s responsibility to facilitate an environment where these decisions can be made and shared.



### **III.23. Agreement to Participate and Information Sharing**

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During preparation, the coordinator obtains a verbal or written agreement, depending on the community's requirements, from each adult and child regarding his or her participation. While communities may have specific requirements regarding the need for written consent for information sharing by adult family members and children of a certain age, this type of agreement extends beyond the signing of a paper.

When individuals agree to participate in a family meeting, they understand that they are agreeing to the purpose and process of a family meeting. Parents and caregivers understand that the pertinent information related to the child abuse or neglect incident or other child welfare concerns will be shared with participants attending the family meeting.

If a family member is uncomfortable with service providers sharing certain information at the family meeting, a decision is made about this in consultation with the family member directly affected; other key family members; and the service providers, particularly the child welfare service provider, and is based on the relevance of that information in planning for the child.

See [guideline IV.7.3.](#) for more on information sharing during the family group meeting.

### **III.24. Cultural Considerations**

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The coordinator, in preparing the family, child, referring worker and others, proceeds from an acknowledgment of the role of race, ethnicity, economic class, spirituality and culture in families' lives. The coordinator demonstrates a genuine interest in the family's culture and an understanding of how the family's culture has been historically treated by the dominant culture. When the coordinator does not have an understanding of the family's culture, he or she works to learn about the family's culture, such as by finding individuals in the community who can serve as cultural guides.

The coordinator shows respect for the family group's culture by:

- Recognizing the family group as the expert on itself;
- Recognizing that each family group is unique;
- Using respectful language, both verbally and nonverbally;
- Not pretending to understand the family group's culture when he or she does not and instead, asking questions to develop an understanding of the family group's culture;
- Working with cultural leaders in a community (e.g., First Nations leaders);
- Developing an understanding of the family group's world view, cultural assumptions and values;
- Developing an understanding of and a respect for the family's decision making model; and
- Exploring these issues with family group members and others during the preparation process.

As examples, a family may use a consensus model (as in Native American cultures), in which a single family member by virtue of age or status (such as a designated matriarch) makes the decisions, or a model in which elders talk with everyone in the family and then make the decision (as in Cambodian culture). Other practical examples may include ensuring transportation to the family meeting, ordering extra food so that families can take the leftovers home and not making appointments on religious holidays or days of worship.



### III.25. Scheduling the Family Meeting

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The date and time of the meeting has an impact on who will attend, and as a result, there is power in how and by whom the date and time are set. The meeting is scheduled through a family-led process in which negotiation may be needed regarding when some people can or cannot attend. In the end, however, the date and time are set to accommodate the family's schedule (to permit the largest number of family members to attend), but also to be convenient for the key agency representatives.

There will inevitably be pressures to move forward with the meeting as soon as possible (see guideline III.31.). The schedules of the referring worker, service providers and the coordinator often present challenges. Setting the date and time of the meeting, however, is family-led and not driven by service providers.

Family meetings can be scheduled at any time, including during normal working hours, evenings and weekends. Coordinators need to ask the family to identify the times and dates that will result in the largest family group presence, and then discuss with the referring worker and service providers which of the dates and times will also work for them to participate.

Family meetings change the landscape and environment of child welfare agency operational structures, creating flexibility and willingness to meet with family groups at times that are most convenient to them, which may or may not be within the standard 8 a.m. to 5 p.m. business hours. In some communities, agencies and unions have worked effectively together to support workers' availability for family meetings at times set by families. When the agency has these policies and practices in place, the coordinator's ability to support a family-led process is enhanced. Working families' needs — for example, child care after hours — also must be taken into account to support this partnership-based practice.

### III.26. Setting the Location for the Family Meeting

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As with the date and time of the meeting, the location of the meeting is set by the family group and community. The guiding principle in setting the location is independence. A location is a space in which no one voice is elevated over another — neither the voice of the agency over the family nor the voice of some family members over other family members. The location needs to be emotionally and physically accessible to all participants.

The coordinator asks the family group where the meeting should be held. Considerations that may enter into the decision include:

- Where will everyone feel safe, physically and emotionally?
- Where will all members of the family have equal standing?
- Will a particular location give unfair advantage to one part of the family?
- Can the location physically accommodate everyone?

Other considerations related to the selection of a location are:

- Accessibility for participants' travel and transportation needs, and any other special needs (e.g., disabilities)



- Whether food is allowed
- Provision of child care, if needed
- Whether there is an additional room in the meeting space or place in the general vicinity that the coordinator and service providers can use during private family time (this needs to be secured and planned for before the family meeting begins)

Depending on these considerations, the best location may be a home or a community space that is not affiliated with either the agency or the family group — such as a library, community center, fire station, place of worship, school or other community space. While the child welfare agency may have space to convene family meetings, because of power differential issues between systems and families, using this space is carefully considered with the family group. It is the coordinator's responsibility to know the different resources in the community that can be used to hold family meetings, and to line up the space for each family meeting. The coordinator leverages the broader community's support for family meetings to ensure families have a choice of location for their meeting. The family group and coordinator will attend to such practical logistics as turning off building alarms, using ovens for reheating food, checking public building opening and closing times, and taking into account insurance considerations.

### **III.27. Supports for Family Participation in the Meeting**

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The coordinator discusses with family members the support they will need to attend the family meeting. The coordinator explores the family's needs for transportation; financial assistance, including gas money; bus tickets; child care; lodging; and a letter to family members' employers to obtain permission for the family members to be away from work in order to attend the meeting.

### **III.28. Meeting Arrangements**

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The coordinator learns from the family the cultural protocols that are followed for the meeting. As examples, the coordinator asks the family how to set up the room for the meeting and the seating arrangements for participants. The coordinator also learns if any materials should be made available to support the family group's participation in the meeting.

### **III.29. Moving Forward With the Family Meeting**

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Near the conclusion of the preparation process, the family and coordinator, within the context of broader child welfare and community practice, make a collective decision to move forward. No single individual makes this decision or controls the process. Through a collaborative planning process, the decision is *how* to move forward as opposed to *whether* to move forward. In some cases, an FGDM process will not occur, and the agency will offer another type of planning process or revert to traditional decision-making methods. In other cases, the collective decision may be that now is not the right time to move forward or that the family meeting should be postponed. This may occur when participants voice concern about their physical or emotional safety, or the agency has changed its concerns without the family having sufficient time to consider those changes. This latter situation is avoided as frequently as possible.



It is during the preparation phase when the family group makes an informed decision about moving forward with a family meeting. Referral timelines require a balancing of the broader family's sense of time and the legal expectations regarding a child's safety. A family group's and an agency's sense of time may not always be the same. When the family's sense of time and the agency's expedited time frames are in conflict, the worker and coordinator work together to negotiate timing with all participants. The referral time frame is first driven by the needs of the child and family, while balancing agency considerations. The core principles to be balanced are that children deserve decisions to be made in a timely way, the family group and others need to be adequately prepared and the circle is sufficiently widened.

In some cases, when the coordinator talks with parents, the parents may state that they are not interested in attending the family meeting. As an organizer, the coordinator works to explore reluctance and with the family group, looks for creative ways to move forward.

The decision to move forward in these cases is facilitated by the coordinator when the referring worker has diligently worked to identify and contact a wide circle of family members, including paternal relatives. In situations when the parents do not wish to participate in a family meeting, there will be a wider circle of family identified to plan for the child. Parents may or may not consent to the meeting going forward without them. The decision to move forward is based on the principle that children belong to their extended family and community network and deserve the opportunity to have these individuals plan for them and with them.

In addition, the decision to move forward with the meeting will depend on a variety of factors, including the community's legal mandates (which may require that the family meeting go forward on behalf of the child or prohibit the meeting from going forward without the parents' consent), agency policy and the status of the case (with family meetings more likely to go forward in cases when children have been in foster care for some period of time and the child being raised to adulthood by someone other than their parents is being considered).

### **III.30. Completion of the Preparation Process**

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The final phase of the preparation process is confirmation of the shared purpose for the family meeting. Since at the referral meeting, the coordinator informs the referring worker that any new information gathered that affects the originally stated purpose or concerns needs to be shared, it is less likely that there will need to be impromptu negotiations. If changes are not shared in a timely way, additional preparation may be likely as the coordinator renegotiates with the family group and the referring worker for a shared purpose for the meeting.

As a final step in the preparation process, the referring worker shares with the coordinator in writing or verbally the information they will present at the family meeting, to review that:

- The language is appropriate;
- All of the information has already been shared with family members and there will be no surprises on that day;
- The core concerns have not changed; and
- The information is presented concisely and respectfully.



### III.31. Time Between the Referral and Family Meeting

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The principle that guides determining the amount of time between referral and the family meeting is that sufficient time and resources be allocated to convene the broadest family group and position them to lead the decision making. Such factors as the size of the potential family group, including maternal and paternal extended family and members of the family's informal and community network; the traveling distance to meet face-to-face with family members; the family's cultural norms; and the time the family group needs to process the information, network with one another and prepare themselves for the meeting, will impact the amount of time between the referral and family meeting. Given these factors, coordinators require the flexibility (formally sanctioned by the child welfare agency) to lengthen or abbreviate the general time frames between the referral and family meeting based on the needs of the family group, while still adhering to core practice principles of FGDM.

In addition, when a decision related to child safety or placement is required at a point of crisis, agencies may implement **rapid** family meetings, typically within 24 to 72 hours. Given the limited preparation and expansion of the family group at these rapidly formed meetings, best practice suggests that another family meeting, reflecting FGDM values and principles contained in these guidelines, be held to have the broader family group assembled to make decisions and implement the plan. Rapid family meetings can be organized and facilitated in such a way to be one of the first steps in the preparation process toward a more robust family meeting.

Agency representatives can communicate a sense of urgency in the scheduling of family meetings, and coordinators may receive pressure to schedule the meetings more quickly. When preparation of the family group and finding family is shortchanged and compromised to meet agency time frames or priorities, the family meeting process will most likely be professional or agency-dominated. The resources, commitment and wisdom of the family group, which is typically an invisible and untapped partner to the child welfare system, will remain dormant or disadvantaged. Given that preparation is an essential component, it is important to communicate that even with sufficient time built into the process for preparation and finding family to occur, these family meetings happen at “warp speed” compared to the usual child welfare and court process. As one coordinator put it, “family group decision meetings is [sic] not about who has the keys to a car and can attend at a moment's notice.” The whole point of FGDM is to broaden inclusion, which requires time, attention and effort.



# Section IV. FAMILY MEETINGS

## IV.1. Participants

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### IV.1.1. Participation of the Family Group

Family group participants are guided by each family group's definition of itself (see guideline III.2. for further clarification of family group membership).

Family meeting participants include as many family members who wish to attend. Neither the coordinator nor other service providers curtail the number of family participants. Family participation involves the actual attendance of family members at the family meeting, either in person or through alternate means, described in the following paragraphs. One of the guiding principles is that coordinators, through preparation and during the family meeting, work to position the voices of family members as prominent and leading. Some family members, such as elders, may have elevated roles within their family group and need to be heard in the meeting.

Issues of poverty or geographic distance are not a barrier to key family member participation. Coordinators respectfully broach such conversations with the family group to offer assistance as needed. This type of assistance requires the coordinating FGDM agency to have flexible funds to support family member attendance.

In some cases, family members who wish to participate cannot attend the meeting in person. Their attendance at the meeting can be facilitated through technology such as telephone and video conferencing like ITV.net and Skype™. The coordinator discusses with family members how they wish to use technology to make their participation possible and prepares these family members for the benefits and challenges associated with participating via technological means.

One or more family members may wish to have their voices heard through writing a letter or email. The coordinator clarifies with the family member the purpose for the letter and asks the letter writer how he or she would like the letter to be shared and during which phase of the family meeting. If the coordinator has a role in sharing a letter or email, and upon its receipt believes it may cause harm, then the coordinator talks with the writer to discuss potential modifications and adjustments. Service providers, excluding the referring worker or main agent of the child welfare agency, can also send statements of information. The coordinator reads these to the group during the information-sharing phase of the family meeting.



At the family meeting, family members may express new concerns about certain family members' participation because of safety issues or animosity. In these cases, the coordinator explores these concerns with the family and supports them in reaching a decision about the participation of such members in the family meeting. The coordinator may delay the start of the family meeting and hold private caucuses with the family members to reach a decision. When the family group makes the decision that one or more family members will not participate in person in the family meeting, the coordinator gathers the excluded individuals' input and asks the remaining family members to construct a process to share this information.

#### **IV.1.2. Participation of Children in Family Meetings**

It is the coordinator's responsibility to check in with the child, his or her support person who is part of the child's natural support system, and members of the family group to decide if a plan that promotes the child's safe participation in the family meeting is needed. If so, the coordinator supports the child and family group in developing such a plan. This may include developing signals between the child, the child's support person and the coordinator that identify when the child feels uncomfortable. In addition, the coordinator clearly announces at the beginning of the family meeting that the child's voice is to be heard, as are the voices of other family members. And so, the coordinator uses active strategies that have been agreed on with the child to fully engage the child to the degree that the child has defined his or her desire to be engaged in the meeting.

At the family meeting, there is a deliberate place in the agenda to hear from the child. For greatest impact, this typically occurs at the conclusion of the information-sharing phase. However, since children determine how and when they want to be involved in the family meeting, the timing may vary. This is worked out in the preparation phase (see guideline III.8.).

Children may react to the conversations at the family meeting. A child, for example, may begin to cry or a teenager may walk out of the room. The child's support person or person within his or her natural support system takes action, according to the agreed-on plans constructed with the child. The support person and coordinator need to strike a delicate balance between interfering in an important, yet uncomfortable expression of emotion and following through on agreed-on safety plans. A child who cries does not necessarily require an intervention; he or she may need to cry and others may need to bear witness to this and be uncomfortable. It is normal and natural for children to express emotions of pain, confusion, frustration or hurt. FGDM encourages these expressions; decreases the barriers that formal systems, service providers and other members of the child welfare team have instituted to protect children from such expression; and reinforces the importance of children attending meetings that are about themselves.

This may be a delicate dance for coordinators and participants. If it appears that a more intrusive intervention needs to occur, participants or support people may ask the coordinator for a break, leave the meeting to be with the child. Each action will be tailored to the specific circumstances and follow the plans developed. The coordinator defers to the support person and the family group to determine a course of action. By deferring to the support person and the family group, the coordinator shows faith in the family and the process.

When children are not present in the meeting, which happens infrequently, it is the coordinator's responsibility to work with the child, family and service providers to ensure that the perspective, wisdom and ideas of the child are brought forth during the family meeting.



### **IV.1.3. Participation of Support Persons**

The participation of prepared support people for both adults and children may be essential in the family meeting. As stated earlier, this role may not be formalized, but will emerge from conversations with the child's natural support network (see guidelines III.10. and III.11. for discussion of selecting and preparing the support person). Before the family meeting, the role of the support person is agreed-on between the coordinator, support person and person being supported (child or adult).

During the introductions portion of the family meeting, the support person introduces him- or herself and his or her special role, which may be followed by the coordinator further explaining the purpose of this role.

If the person who asked for support needs to leave the room during the family meeting, the support person may accompany him or her. The coordinator may elect to take a break at that time to caucus with the support person and the supported person, in consultation with the FGDM circle.

If for whatever reason, the prepared support person does not attend the family meeting, the coordinator needs to work with the person who requested support to quickly assess next steps. The principles — that vulnerable individuals will be protected and empowered within the family group — are taken into account in the coordinator's response. Asking the family group how it wishes to proceed during the family meeting, given the unexpected circumstance, is always the first course of action.

### **IV.1.4. Participation of Service Providers and Community Partners**

The role of service providers and community partners is to provide information in a brief, clear and concise manner during the meeting and not in private conversations with family members or other service providers before or after the meeting or during meeting breaks. It is the coordinator's responsibility to reiterate the role of service providers and community partners at the beginning of the family meeting and to ensure that their contributions provide clarity to the assembled family group. If key service providers other than the referring social worker are unable to attend, they can provide written information for consideration.

## **IV.2. Balancing the Presence of Family Group Members and Service Providers**

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While there are exceptions, the principle is that there are typically more family members than service providers in the room at a family meeting. FGDM represents a different way of meeting than what has traditionally occurred in child welfare systems for decades. Instead of a meeting of service providers to which family is invited, this is a meeting of the family group to which service providers are invited. The family group does the questioning and is seeking information.

The respective presence of family group members and service providers is based on establishing a balance of power that is not strictly related to numbers. Whenever possible, the coordinator maximizes the participation of natural family supports as opposed to professional service providers. This signals to the family group and service providers that child welfare agencies are intentionally shifting decision-making authority and responsibility to the family group.



### **IV.3. The Role of the Coordinator**

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In general, the coordinator's role in the meeting is to:

- Minimize his or her presence to allow the family group's norms and ways of interaction to emerge;
- Protect the process;
- Ensure that the process at all times belongs to the family group;
- Create space for dialogue in which the family feels free to ask questions and the service providers feel free to respond to questions in a nondefensive manner;
- Respond to meeting changes, such as new, unidentified information being disclosed;
- Manage any crisis situations that may develop;
- Manage time so that the family has ample private family time;
- Support the participants in deciding next steps; and
- Facilitate the last phase of the family meeting where the plan is finalized and consensus is reached.

The coordinator is not invested in a particular outcome or in the interests of any particular participant.

### **IV.4. The Role of Special Information Providers**

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Special information providers are individuals who do not know the family and are not privy to information concerning their situation but who are able to provide helpful information that can assist the family group in its planning. The core principle is that families need to have all pertinent information to use in decision making. These individuals typically speak for only 10 to 15 minutes during the first phase of the family meeting. The family group decides whether such special information providers are required, and if so, what topic will be addressed. For example, a special information provider may be a mental health professional with specific knowledge and expertise in a certain disorder (e.g., paranoia), who comes to the family meeting to explain to the family group the signs, signals and treatment for individuals with such an issue.

### **IV.5. The Role of Lawyers for Children**

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Lawyers for children attend (see guideline III.15. on preparing legal professionals) with their role at the family meeting being to:

- Make sure the children's voices are present;
- Respond to the plan from the perspective of the children's best interests; and
- State any concerns that they have, and whether these concerns are their individual concerns or concerns of the court.

### **IV.6. Language Selection for the Meeting**

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Whenever possible, the meeting is held in the family group's chosen language(s). The coordinator discusses with the family the language(s) they use to communicate and any challenges family members may have with communication (e.g., hearing challenges, developmental disabilities or mental health issues).



When family members speak different languages or when there are no coordinators who speak the family's language, interpreters or translators may be used. Managing different languages is done in consultation with the family group. Some family groups decide to manage the language differences themselves and others want a formal interpreter. If a family manages it themselves, the coordinator will need to ensure that they are not “elevating” or “privileging” one voice over another.

Interpreters convert one spoken language into another or, in the case of sign-language interpreters, spoken communication to sign language and vice versa. Translators convert written materials from one language into another. Interpreters and translators from the community are preferred. When family members need interpreters or translators, the coordinator prepares these professionals so they fill the role of providing direct information, without taking over the process.

## **IV.7. The Actual Family Meeting**

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### **IV.7.1. Welcome**

The coordinator arrives at the family meeting venue sufficiently before participants arrive to have the space fully prepared and organized, in the way that was agreed on with the family during preparation. How participants are welcomed to the meeting sets the tone for the entire meeting. The family also determines who will welcome participants and how participants will be welcomed, which may be influenced by issues of family culture. Coordinators strive to create a physical environment that is reflective of a family meeting and not an agency meeting.

### **IV.7.2. The Introduction Phase**

During the opening phase of the family meeting, the coordinator creates a space for the process to occur and the following information to be shared, reiterating the previously agreed-on or communicated information from the preparation process. All components of the introduction phase affirm the principle that this is the family's meeting.

1. **Opening.** The family group determines how the meeting will be opened. In some instances, the family group may choose to open the family meeting with a ceremony, prayers, blessings of children or other way that fits with the family's culture and tradition. Family members are asked during the preparation phase if and how they would like to welcome those who attend. Family groups may also want to integrate cultural ceremonies, practices and traditions into the family meeting at various points in time.
2. **Introductions.** The family group decides how everyone will be introduced, including whether name tags or some other form of identification will be used. Given the unfamiliarity between service providers and members of the family group, and the size of the group, some form of identification can facilitate dialogue during the family meeting. Children and young people for whom the family meeting is convened can also be involved in making name plates and introducing members of their family during this phase. Introductions include how each person is connected to the child or youth and the family. If family members, including children, are not physically present, family members may elect to bring photographs or family mementos of those individuals to represent their presence at the family meeting. Introductions begin with the coordinator, family members and family members' support people and then with the service providers in attendance. Family members may also wish to “include” family members



who have passed away, but whose influence on the family group continues, through, for example reserving a seat for such a person, displaying a photo of the person or placing the person's name tag in the center of the circle.

3. **Purpose.** The coordinator must clearly articulate the purpose of the family meeting as agreed on during the preparation phase. When family members, their support people and information providers have a mutual understanding of the purpose, the family meeting is likely to flow more smoothly. The purpose is developed during the preparation phase in partnership with the family group and the child welfare agency representatives.
4. **Logistics.** If the family meeting occurs in a location that is unfamiliar to the attendees, the coordinator should identify the location of bathrooms, telephones and child care. If necessary, the coordinator reviews etiquette for remote phone users and interpreters.
5. **Reviewing the family meeting process.** Although the coordinator has shared information with the family group and service providers about the family meeting process during the preparation phase (see guideline II.7.), the coordinator re-outlines for all participants how the family meeting will proceed or operate. Although this information was shared in the preparation phase, coordinators may distribute a written description of the process or write it on a flip chart posted in the room to help guide the meeting.
6. **Reclarification of roles.** The coordinator explains his or her role to guide a productive family-led process, and describes the roles of the referring worker and other service providers.
7. **Mandated reporting laws.** The coordinator may discuss the mandatory child abuse and neglect reporting laws that exist in the state or province in which the family meeting is occurring, so if a new abuse or neglect allegation is identified, the family group has full information about what may occur, dictated by law. New allegations may result in someone having to report it or the group figuring out how to address it.
8. **Guidelines for discussion.** As the coordinator discussed during the preparation process, at this point in the family meeting, family group members may elect to brainstorm a list of guidelines for respectful discussion. Family groups may ask for these to be posted in the room. In keeping with the family-led principle, family groups (and not service providers) determine if this is something that would facilitate their conversation and if so, what gets listed.

#### **IV.7.3. The Information-Sharing Phase<sup>5</sup>**

The purpose of the information-sharing phase of the family meeting is for service providers to give the family group all of the agency-held information that the family group needs in order to assume leadership in developing their solution to the issues presented, keeping in mind the purpose of the meeting. The family group consults with the service providers to make sure that the family group has all the information they need before going into their private family time. While the flow of information is predominately from the service providers to the family, family groups often ask for clarification and/or question the information presented to them. The information-sharing phase is comprehensive yet

<sup>5</sup> While members of the FGDM Guidelines group were able to reach consensus on almost every guideline, after lengthy conversation, this was not the case in this area. The group agreed to the core purpose of information sharing, but not the structure. Ultimately, as with every guideline, readers are encouraged to critically reflect on the core principle that underscores the practice.



concise, to allow for as quick a transition to private family time as possible, the next phase of the family meeting.

From a historical context, FGDM grew out of the community, with people most disadvantaged and marginalized by professional constructs and systems defining how decision making might work better for them. Its roots are tied to antiracist and antioppressive practice, guiding the simplicity of the decision-making process.

For service providers, the guiding principles for information sharing are clarity, family-friendly language, openness, transparency, give and take, truth wrapped in compassion, nonjudgment and a balanced view of relevant information. Strengths-based language permeates the service providers' presentation of information to the family group.

In the U.S., this phase of the family meeting is practiced differently in different areas of the country. This has generated some spirited debates and is helping the FGDM community clarify the purpose of this phase of the meeting.

For the majority of countries in the world and in many places in the U.S., this phase is solely for service providers to share their relevant information with the family group before private family time. In other U.S. communities, during this phase, the coordinator leads a facilitated dialogue in which family members are encouraged to share their hopes, dreams, strengths, possibilities, challenges or other information with each other and the service providers and for the service providers to share their perceptions of the family group. For other communities, the information-sharing phase contained a facilitated dialogue when the practice first began in their community and later, after reflection, these communities stopped having the facilitated dialogue and moved to the service providers sharing their information with the group prior to private family time.

The way that this information-sharing phase is structured affects some other FGDM principles, including the coordinator role, the amount of child welfare information shared with family members during the preparation phase of the meeting, the relationship between the family group and coordinator, the length of time that this phase takes and the community's understanding about the coordinator being equitable and fair.

Ultimately, FGDM gives families the information that service providers hold, and they are trusted to use their wisdom, cultural practices and expertise to manage the process in ways that fit for them.

#### **IV.7.3.1. Recording Information**

The information that service providers gives to the family group is presented orally and/or in a written report. The coordinator does not record on a flip chart the information shared by service providers, unless requested to do so by the family group. Flip charts introduce hierarchy and an element of power and influence into the meeting, elevate the role of the coordinator, separate people from one another and stunt the natural flow of conversation. If service providers find using flip charts helpful to them in their information sharing, they can bring a flip chart piece of paper with the information already written on it to the family meeting.



#### **IV.7.3.2. Coordinator Responsibility**

During the information-sharing phase, it is the coordinator's responsibility to ensure that all of the relevant and critical information that the referring worker and other service providers possess is shared with the family group. Coordinators, under the principle of fairness and independence, are never the conduit for sharing the agency's information at the family meeting. The coordinator also does not share any information that he or she gathered during the preparation process.

Through the preparation process with the referring worker and other service providers, the coordinator will have prior knowledge and agreements about what these individuals will report at the family meeting. Not to be underestimated, however, is the difficulty that some referring workers and other service providers may have in sharing the agency's concerns for child safety, permanency and well-being in clear and understandable language. If the coordinator realizes that critical information has not been shared, he or she guides the process through questions to the service providers to ensure that information reaches the decision-making table. It is the coordinator's responsibility to ensure that the referring worker has provided full information on the agency's concerns, the legal issues and time frames. The coordinator has also prepared the referring worker on the type of questions the family group may pose him or her.

It is also the coordinator's responsibility to ensure this phase is not shortchanged. Even though family members have a clear understanding of the reasons for the family meeting before they arrive, the information-sharing phase is always held, as it is important to give the entire family group the opportunity to hear and ask questions about the information collectively.

#### **IV.7.3.3. Information Shared by the Referring Worker**

The coordinator asks the referring worker to share all of the relevant information with the family group that will be essential for the family's deliberations. This includes the agency's concerns, the legal issues and the time frames that must be met for the agency to agree to any plan. Because the coordinator has discussed the reason for the family meeting during preparation, (see guideline III.6.) the family group is not surprised by the information shared by the referring worker. Receiving information ahead of time gives families the opportunity to think about some solutions before attending the family meeting. It is reasonable, however, to expect that the referring worker will further detail and update, at the family meeting, the core information previously shared.

Referring workers and other agency representatives do not predetermine the plan before the family meeting, and must agree to engage with the family group in a manner that is respectful, collaborative and open to the family's expertise and ideas to protect their children. Referring workers may have recommendations for the family to consider in private family time or beliefs about specific items for inclusion in the plan. However, they refrain from sharing such opinions with the family group. It may be helpful for the referring worker to provide his or her core concerns and any legal issues in writing for the family's use in private family time.

#### **IV.7.3.4. Information Sharing on Resources**

Family meetings are not a vehicle to offload the community and public agencies' responsibilities to provide formal services to meet family needs. While providing services is a core principle, it is likely that families will leverage their resources to fulfill components of the plan that is created.



In family meetings, there are two types of resources that will be shared throughout the process: community or agency resources and informal services and supports of the family system. Family groups need to know what formal resources are available to them, but when and how this is shared is determined by the family group. Families may be interested in learning about the resources before private family time or after they have made some preliminary decisions for their children. Family members are most likely to share their resource possibilities with one another during private family time, and then incorporate them into the plan presented during the decision phase (see guideline IV.7.5.). While the timing of sharing resource information may seem insignificant, reflection is needed to determine whether resources shared too early in the family meeting process unduly influence family members' creation of the plan. Alternatively, if resources aren't shared, some could argue that families do not have sufficient information on which to base their plan.

Independent of when resource information is shared with the family, the coordinator asks the family during preparation about its interest in learning more about any specific community resources. It is then the coordinator's responsibility to gather written information or knowledgeable individuals who can share this information at the family meeting.

#### **IV.7.4. The Private Family Time Phase**

Private family time is central to FGDM. As stated in *Family Group Decision Making in Child Welfare: Purpose, Values and Processes* (2008, p.2), private family time or time for a family to be alone is a core element:

*Family groups have the opportunity to meet on their own, without the statutory authorities and other non-family members present, to work through the information they have been given and to formulate their responses and plans.*

Providing family groups with unlimited time to meet on their own enables them to apply their knowledge and expertise in a familiar setting and in ways that are consistent with their ethnic and cultural decision-making practices. Acknowledging the importance of this time and taking active steps to encourage family groups to plan in this way signifies an agency's acceptance of its own limitations, as well as its commitment to ensuring that the best possible decisions and plans are made. Private family time is about the family group coming together to lead the child welfare agency in decision making. Families can use the information provided and choose what is right for them.

##### **IV.7.4.1. Reintroduction of Private Family Time**

During the family meeting, the coordinator reintroduces the family meeting process to the family group, confirms who the family agrees will participate in private family time and reaches consensus on the participation of individuals who may fall outside of the "family network." Information shared in private family time belongs to the family group, and thus is considered privileged and not admissible into any legal proceedings, should anything be divulged by a participant.

##### **IV.7.4.2. Participation in Private Family Time**

Private family time is reserved for "family" members, based on the family group's definition of who is part of its family constellation and circle of support. All family members attending the family meeting participate in private family time. Because family meetings often have many family



members from both the maternal and paternal sides of the family in attendance, sometimes family members will not know one another. In addition, this diversity of participants may also lead to differences in decision-making norms about who is family.

The coordinator, for example, may ask about the roles of faith representatives or elders in the family's circle of support. Another illustration is a nonprofessional support person who participates in private family time if the family considers this person to be "family" and the individual understands his or her role not as representing a position but as supporting the family in making decisions (see guideline III.10. on support persons). No one with a professional relationship with the family is allowed in private time.

Certain participants in the family meeting are not included in private family time even when the family would like to include them. Foster care providers, unless they are kin, for example, do not participate in private family time because they are part of the agency's child welfare team.

#### **IV.7.4.3. Family Concerns About Going Into Private Family Time**

During the preparation process or during the family meeting, in some cases, the family group may state that it does not wish to have private family time or may ask the coordinator or referring worker to stay with the family. The coordinator explores any concerns and fears about private family time with the family group. Family members' reluctance may be attributable (but not limited) to the following possibilities:

- They may worry that there is not sufficient time to make a plan.
- They may fear that they are unable to make decisions for themselves, having been convinced that only the child welfare system can make decisions for their child(ren).
- They may not believe or trust that the child welfare system will allow them to generate solutions or make decisions for their children.
- They may have concerns about difficult information that has been shared which makes it challenging for the family to go into private family time.
- They may feel overwhelmed or exhausted by the information shared, the process, the family history or emotional reflections.
- They may perceive something or someone as dangerous.
- They feel concerned about leaving the more structured meeting to go into a less structured situation in which they may not feel comfortable.

In most instances, these issues can be addressed and the family supported to go into private family time. If a family member expresses a safety concern, then the coordinator explores whether more information is needed and the role of the support person. It is the role of the coordinator to represent to the family group his or her own perception of their skills, abilities and power. The coordinator, for example, can talk with the family about its right to run private family time in any way it sees fit and can support the family in deciding who in the family group can start the process.

The family has full information about private family time — what it is and how it operates. If on the off chance, the family group makes an informed decision about not using this part of the process, their decision is respected.



#### **IV.7.4.4. Preparing Families for Private Family Time**

Before family members are left to develop an initial plan during private family time, the coordinator ensures that they have all of the child welfare agency's concerns and information and have all of their questions answered. The coordinator may share other family groups' experiences with private family time. The coordinator covers the following with the family:

- Families have as much time as they need to deliberate privately.
- Information providers (such as the referring worker or service providers) are available to families to clarify any information they have provided.
- The agency's concerns, which the plan must address, are reaffirmed (preferably left in writing for the family group to address in the creation of the plan).
- Families will be asked to report their initial plan to the larger group after private family time.
- When they have reached agreement, they call the coordinator and service providers back.
- The plan addresses who is going to do what, when and where.

#### **IV.7.4.5. Transition to Private Family Time**

The coordinator asks the family group if they have the information they need to transition to private family time.

#### **IV.7.4.6. The Family's Planning Process While in Private Family Time**

The family group decides the process that it wishes to use in planning for the child during private time. The coordinator may offer the family options to use or not use as the family sees fit. The coordinator may provide the family group with a generic framework for the plan. System or agency developed templates for plans are often prescriptive and bureaucratic and therefore used infrequently so that family creativity and informal resources are not limited in the planning. Coordinators can offer the family group paper or flip charts and writing utensils to support the family's work together.

#### **IV.7.4.7. Roles of the Coordinator and Referring Worker in Relation to Private Family Time**

The coordinator, referring worker and other service providers do not participate in private family time. The coordinator's role is to protect the integrity of the private family time process. If the family pauses during private family time, the coordinator is available to answer any questions about the family meeting process while the referring worker and other service providers are available to clarify any information previously provided or answer any questions the family may have. The coordinator, referring worker and other service providers are physically accessible and closely available to the family group. They may sit in another room of the meeting space, be outside or leave the meeting space altogether, staying nearby and accessible by phone. Independent of their location, the family needs to perceive its space as private. Based on the principle of respect for the family group, this is not a time for the service providers who are not part of private family time to discuss the family — as a group or as individual members — or to discuss what occurred in the family meeting thus far.



#### **IV.7.5. The Plan Finalization Phase**

After the family deliberates in private, it presents its initial plan to the coordinator, referring worker, support people, resource providers and other service providers. All participants have an opportunity to discuss the plan and develop the plan in more detail, but in a way that does not change the family's decision. It is the coordinator's responsibility to help this group reach consensus and to ensure that in the negotiation process of finalizing the plan, that the family group's basic decision is upheld. Together, all participants determine the viability of the plan in achieving the purpose of the family meeting. Families lead the decision making but the plan must be one to which the family and the child welfare agency agree. Service providers, beyond the referring worker and child welfare agency, agree to the provision of services, but are not involved in agreeing to the plan. The coordinator supports the family and the child welfare agency representatives in reaching consensus about the plan through a flexible negotiation process.

##### **IV.7.5.1. Returning to Private Family Time**

When there is no agreement on the plan, or when the referring worker has identified major issues that the plan still needs to address, the coordinator asks the family group if it wishes to return to private family time to have further deliberations. It is the family's decision whether to do so.

##### **IV.7.5.2. The Plan**

Plans from family meetings intermingle family's knowledge, expertise and informal resources with formal resources of the community. Given this, it is expected that resultant plans are unique to the individual family group and its needs, beliefs and natural resources. Typically, families blend their natural supports and informal resources with formal services into the plans. For example, American Indian/Alaskan Native families may include traditional methods of healing, including singing, cleansing and healing circles. If plans appear similar to traditional case plans, then it is the coordinator's responsibility to ensure that the negotiation process in the plan finalization phase of the family meeting has not corrupted the family group's original plan (see guideline IV.7.5.). The plan details who is going to do what, where and when.

The core principle is that the plan is a collaborative plan between the family system and the child welfare system that both have agreed will address the issues and both will collaborate to implement.

##### **IV.7.5.3. Confirming Agreement Reached**

It is the coordinator's responsibility to ask the referring worker or whoever has the authority to accept the plan to state very directly whether he or she agrees with the plan. This decreases the likelihood of agency representatives saying later that they never agreed to the plan developed at the family meeting.

##### **IV.7.5.4. Failure to Reach Agreement on the Plan**

When the family and child welfare agency cannot agree on the plan, the coordinator asks the family how it would like to proceed, offering a few options such as reconvening at a later date, bringing additional people or needed information to the family meeting, conducting further preparation, agreeing to disagree or using another process such as mediation. If the family is involved with the



court, the referring worker is obliged to present to the court the plan to which the agency did not agree. From this information, the court will make the final decision. If the case is not involved in court, then the agency institutes a process to involve others with decision-making authority on the case to reach consensus and resolution.

#### **IV.7.5.5. The Family Meeting Plans Become the Workable Case Plan**

Because the final plan is created in collaboration, both the family group and child welfare agency representatives will have a greater stake or investment in it. The plan generated at the family meeting becomes the workable, agreed-on case plan. This collaborative plan supersedes any other previously determined or authorized case plan, and becomes a binding agreement between the family group and child welfare agency. If the family group is involved with the courts, this is the plan that is presented to the court. It is unacceptable for child welfare agency representatives to create and implement an alternate plan or have multiple plans for one family. The plan developed at the family meeting is not to be discarded or replaced by another plan, unless the family group and child welfare agency have collaboratively determined changes.

#### **IV.7.5.6. Information Sharing With Family Meeting Participants About What Happens After the Family Meeting**

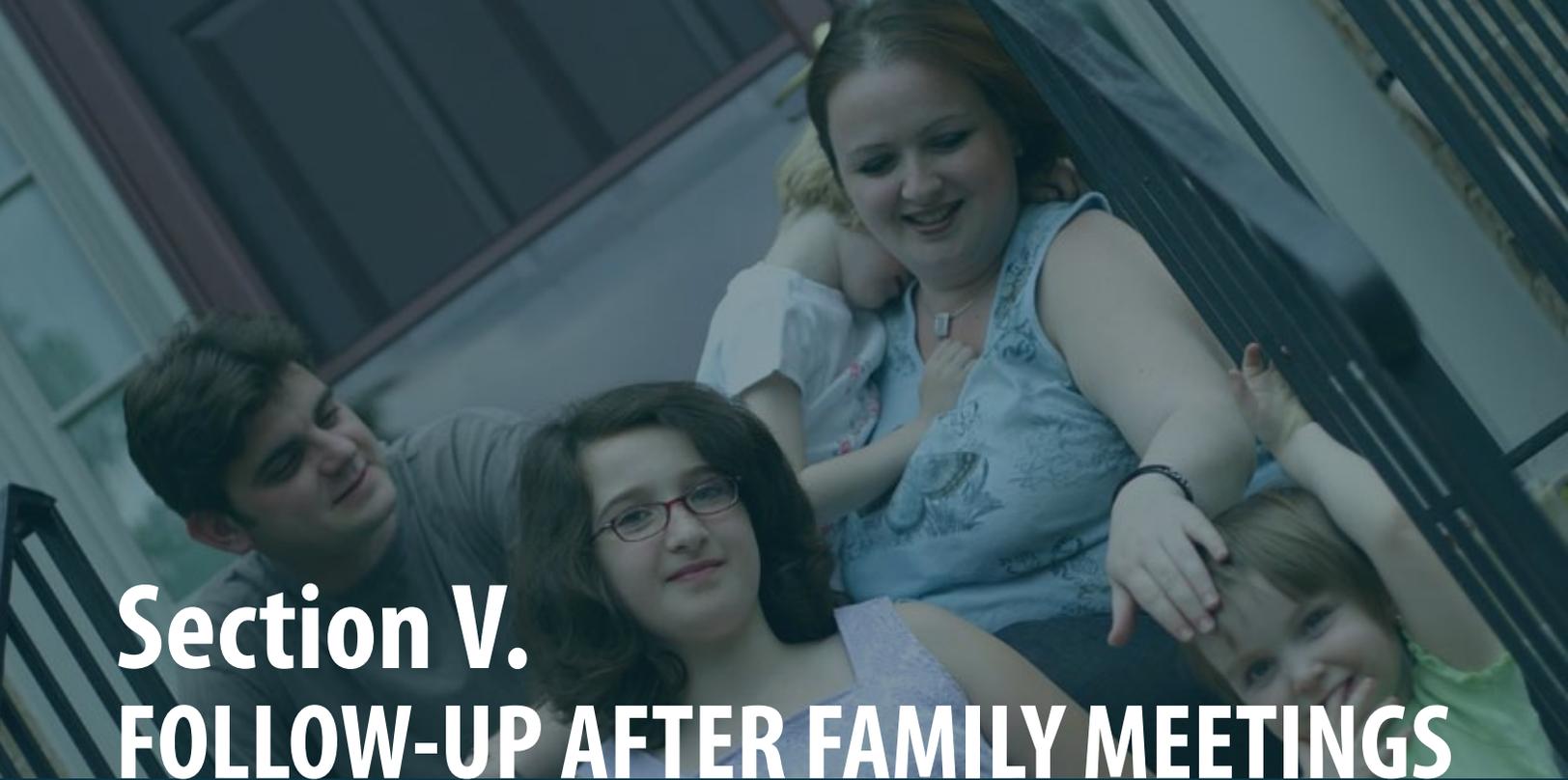
Before the family meeting concludes, it is the responsibility of the child welfare agency representatives and the coordinator to educate the family group about what happens after the family meeting. This includes educating all parties and sharing information about such things as:

- The post-meeting roles of the referring and ongoing workers;
- The post-meeting role of the coordinator;
- Distribution of the plan and court appearances, if necessary;
- The responsibilities and actions of all parties if the agreed-on plan or components of the plan become unworkable; and
- The scheduling of any additional family meetings (see [guideline V.7.](#)).

The principle is that the child welfare agency cannot assume that family groups know what is to happen and therefore it is the responsibility of the child welfare agency to make the next steps clear, understandable and transparent. From a systems perspective, the purpose of sharing this type of information is also to create a cultural expectation about family being enfranchised and empowered with information, lifting any notions of secrecy or exclusion.

#### **IV.7.5.7. Closing the Meeting**

At the close of the meeting, the coordinator reiterates the agreed-on next steps after the family meeting. The coordinator asks the family if there is a special way that it would like to conclude the family meeting, which he or she initially discussed with the family group during the preparation process. Families may wish to close the meeting, for example, with a ceremony, prayer or blessing. The coordinator thanks the family group for coming together and for giving the process a chance. The coordinator appreciates the participation of the service providers and representatives of the child welfare agency. The coordinator may also use the closing of the meeting to collect feedback from members of the family group that can be used for continuous quality improvement efforts.



# Section V. FOLLOW-UP AFTER FAMILY MEETINGS

The core principle that guides all follow-up activities is that they need to involve a collaborative partnership between the family group and child welfare agency. Follow-up activities are unique to each family group, and are guided first by the family groups' needs, and second by the needs of the child welfare system. Institutionalized follow-up processes, driven by child welfare mandates, are not consistent with FGDM being a family-led process. Nonetheless, when more decisions need to be made or additional plans need to be created for whatever reason, the format for decision making is family meetings.

## **V.1. Writing up the Plan**

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It is the coordinator's responsibility to ensure the family meeting plan gets created and finalized through any required formal processes in the child welfare agency. Plans are written in the family's words and language. The core principle is that the wording in the plan reflects the agreement of the family group and child welfare agency.

## **V.2. Distributing the Plan**

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The coordinator distributes the plan to every participant who attended the family meeting, ensuring that every individual who has a role in the implementation of the plan receives the agreement that details responsibilities. Family group members who attended the family meeting can further distribute the plan as they deem necessary to continue to assist and support the family.

## **V.3. The Role of the Coordinator After the Family Meeting**

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The coordinator's role is finished after he or she has distributed the formal copy of the plan, unless the group determines that it wants to come together again for another family meeting. The coordinator also completes any administrative duties related to the family meeting.



#### **V.4. The Role of the Ongoing Worker**

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As the role of the coordinator in shepherding the FGDM process concludes, it is the role of the ongoing worker to continue the partnership with the family group to implement the plan. It is the ongoing worker's responsibility to leverage resources and sustain the partnership with the family group, moving beyond the traditional relationship that workers maintain with parents or primary caregivers. The ongoing worker transparently and clearly communicates to the family group the child welfare agency's thinking and actions. It is also the ongoing worker's responsibility to continually ask the family if the plan is working the way the family wanted and expected it to work, and to facilitate adaptations and changes. The agency continues to provide services until they are no longer statutorily required to and the family agrees to case closure.

#### **V.5. Resourcing the Plan**

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According to *Family Group Decision Making in Child Welfare: Purpose, Values and Processes* (2008, p.2), "referring agencies support family groups to implement agreed plans by the provision of such services and resources necessary to do so. In assisting family groups implement their plans, an agency upholds family group responsibility for the care and protection of its children, but contributes by aligning its systems and resources to support their effort."

In other words, if the family group's plan meets statutory requirements, it is the child welfare agencies' obligation to resource this plan, in collaboration with other system providers. In communities implementing FGDM, there is great opportunity to embark on system transformation where families' needs drive services organized, offered and delivered. In no way do child welfare agencies use FGDM as a mechanism or rationale for not providing services and supports to family groups.

#### **V.6. Monitoring Plan Progress and Accountability**

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The core principle is that monitoring the plan is a partnership between the family group and the child welfare agency to ensure progress and accountability. The family group and the child welfare agency representatives are held accountable for implementing the agreed-on plan. The spirit of monitoring is that it is important to check in with, rather than check up on, all individuals involved in the implementation of the plan. The monitoring process allows the family group to check in with the system and the system to check in with the family. To guide this, ask all parties before the conclusion of the family meeting: "How will you know that this plan is being followed?" This will give the family the opportunity to take ownership of achieving the plan's outcomes, complemented by the agency's support and the court's ordering of services.

When agreements break down — either at the system or family level — it is not the coordinator's responsibility to advocate for either party. At this point, the family group is offered another family meeting. It is the ongoing social worker's responsibility to offer the family different options for its consideration about how to proceed. How the family wishes to proceed will be based on the reason for the agreements not working, which could include the services or supports not being available or the services or supports not working or addressing the core needs.



## **V.7. Scheduling Follow-Up Family Meetings**

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In keeping with the principle that FGDM is a family-led process, the principle behind follow-up family meetings is that decisions about the needs for additional family meetings are guided by the family group. Guiding questions can be, “Is another family meeting needed or can another way be organized to accomplish what is needed to move forward between the family group and child welfare agency?” Or, “When would you like to reconvene this family group to discuss progress, and what format works best for the family group?”

Additional family meetings or other mechanisms provide the family and agency representatives with an opportunity to change plans to ensure their relevancy, currency and achievability. When the family group is still involved with the child welfare system, additional family meetings could provide the forum for decision making, particularly because system providers still have information that is critical to the family’s plan. All plans devised within a child welfare system context need to be dynamic and viable, even when conditions change, services don’t meet the needs or the supports are not garnered. In FGDM, the family group can be classified as the statutory board so that every time a decision needs to change, it is the agency’s responsibility to bring them back together to make that decision in collaboration with agency representatives in order to ensure ongoing viability.

## **V.8. Evaluating Family Meeting Processes**

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At the conclusion of family meetings, either at the meeting or weeks or months after the meeting, participants (family members and service providers) are asked to evaluate their experiences. This provides valuable information that coordinators can use to refine their practice and provides agencies with opportunities to develop critical reflection and supervision structures to support this system change of decision making.

## **V.9. Complaint Procedure**

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All parties, including the family group and agency representatives, are educated during the FGDM process, with an emphasis at the family meeting, about their roles and responsibilities after the meeting. If agency representatives do not fulfill their commitments or trample on the FGDM process, there is a procedure for family groups to file an official complaint.



# Section VI. ADMINISTRATIVE SUPPORT

## **VI.1. Community Readiness**

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Because the implementation of FGDM requires collaboration, partnership, investment and involvement of multiple stakeholders in formal and informal systems that serve families, communities are encouraged to conduct an assessment to determine their readiness to implement this systems-transformational approach. Child welfare system partners include but are not limited to juvenile and family courts; substance abuse, mental health and domestic violence agencies; the education system; legal community representatives; the faith-based community; voluntary child- and family-serving organizations; community-based organizations; and advocacy groups. In addition to having information about systems' readiness, the assessment pays particular attention to the readiness at multiple levels within the statutory child welfare agency. The support for FGDM of administrators, managers, supervisors and workers across multiple systems is essential to building the approach, consistent with these guidelines, and sustaining FGDM, as it fundamentally challenges practices, policies and inner workings that have been embedded in systems for decades. Lastly, leaders — with a broader team — establish and articulate a vision for FGDM that permeates all facets and aspects of work with children and families.

## **VI.2. Leadership Support and “Buy-In”**

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Because leaders set the tone and expectations for their organizations and their leadership can influence other systems, it is imperative for them to promote FGDM as a core approach. To this end, leaders:

- Support initial and ongoing training for the entire organization to support systems change and the development and infusion of this approach.
- Model the principles and values of FGDM, through transparency and honesty in decision making and information sharing.
- Establish a checks and balances system, consisting of participants from multiple systems and at multiple levels meeting regularly to review implementation and provide feedback.
- Create standard mechanisms to ensure family member representatives are engaged in the continuous learning process and other system reform efforts related to FGDM.



- Support continuous and reflective learning and growth opportunities of those engaged in the implementation on FGDM.
- Revisit organizational policies and procedures to ensure their alignment with FGDM.
- Have a deep grasp of FGDM that enables them to advocate, create accountability structures, review policies and mandates for congruence with FGDM principles, and support FGDM implementation.
- Support evaluative efforts that create data to support the continuous improvement process.

### **VI.3. Training, Education, and Staff Development**

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#### **VI.3.1. Initial Classroom Training**

Initial classroom training is structured to provide training participants with the opportunity to build awareness, knowledge, skills and abilities. Since FGDM is about changing systems to honor families in decision making, initial classroom training needs to be provided to representatives of the child welfare, legal/court and community systems. While the extent or depth of training should tie to an individual's or system's role with FGDM, it is insufficient for implementers to focus on training only coordinators. As these guidelines suggest, while coordinators have a critical role in this process, if other system agents do not understand or support FGDM, then the intent of FGDM cannot be realized.

Each implementing community will need to determine the appropriate length of initial classroom training, typically three to four days for coordinators, their supervisors, referring workers and their supervisors, and others with an interest and significant role in the implementation of the process. FGDM seminars that build awareness and knowledge are delivered in a community to a variety of audiences, including but not limited to community advocates; court staff and legal professionals, including guardians ad litem; parent and agency attorneys; professionals from mental health, education, domestic violence, juvenile justice and substance abuse agencies; community-based organizations; and foster care and kinship providers. These individuals may also benefit from participating in the more in-depth initial classroom training.

The general topics of initial FGDM classroom training include:

- History
- Principles, values and philosophies
- Understanding FGDM in the context of other family engagement strategies being implemented
- Process, with an emphasis on preparation and follow-up
- Roles and responsibilities of the family group, coordinator, referring worker and various partner agencies
- Supervision and continuous quality improvement
- Research and evaluation

Training curricula are competency-based and guided by learning objectives that help participants reach specific levels of learning, including (and in order of increasing complexity) awareness, knowledge, application to the job and skill mastery.



### **VI.3.2. Coaching and Mentoring**

While initial training establishes the foundation for FGDM implementation and ongoing classroom training supports continual learning, coaching is another critical component in supporting the development of exemplary practice. Coaches with FGDM experience and knowledge serve in the role of supporting the development of newer coordinators through co-coordinating family meetings and serving as guides and mentors when challenges and issues arise. Supervisors encourage staff development and learning by partnering new coordinators with experienced FGDM coordinators. Referring workers who have participated in FGDM can also be paired with new workers as mentors.

### **VI.3.3. Ongoing Classroom Training**

After initial classroom training, coaching and implementation, communities invest in ongoing training opportunities to support continuous quality improvement, learning and growth. For example, communities may decide to offer specialized training related to FGDM and domestic violence, substance abuse, mental health and engaging children and young people.

### **VI.3.4. Ongoing Learning and Peer Networks**

Communities implementing FGDM organize self-reflection activities for all employees to support professional development. Self-reflection activities could be carried out in the form of supervision; group supervision; peer network development; individual reflection and analysis of family meetings; data analysis, including reviewing family meeting surveys; and inquiring and listening to the experiences of family meeting participants. Peer networks are organized for organizational leaders, administrators, supervisors, coordinators, workers and others. These networks provide formal and informal opportunities for personal stories and experiences to be shared and for mutual learning to take place.

## **VI.4. Supervision**

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As with any child welfare practice approach, quality supervision is essential. To effectively supervise FGDM and those who are referred to FGDM, supervisors participate in the initial and ongoing training efforts.

Supervisors are essential to the implementation of this approach, modeling FGDM practice and philosophies, providing ongoing coaching and mentoring to their supervisees and supporting individual and group reflection for their supervisees. In addition, supervisors are FGDM advocates, speaking to policymakers, legislators, system partners, agency representatives and others to gain crucial and ongoing support for this decision-making process. They also help people understand the outcomes of this work, providing context for outcomes and defining “success.” Supervisors and leaders explore their motivations for supporting FGDM implementation to ensure that they reflect FGDM principles and values.



## **VI.5. Supportive Organizational Policies and Functions**

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### **VI.5.1. Workload**

A commonly asked question for agencies implementing FGDM is *what is an appropriate workload for FGDM coordinators?* To answer such a question, a workload study, based on the implementation of FGDM based on these guidelines, can be conducted to account for local structures and issues. In particular, the preparation and follow-up phases of the FGDM process are not shortchanged in an effort to serve more families, as this compromises the principles of this approach.

### **VI.5.2. Flexible Hours and Compensatory Time**

Because FGDM is a family-led process, implementing agencies create human resource policies and structures that support FGDM occurring at times that are convenient to family groups. This may mean holding FGDM processes during nontraditional business hours and weekends. This requires policies that support flexible hours and compensatory time for any service provider who is part of the process (e.g., coordinators, referring workers, supervisors and others). Implementing agencies may also need to work with their unions to restructure agreements and contracts to serve families during these nontraditional hours and days.