

# PRACTICE NOTES

For North Carolina's Child Welfare Workers

From the NC Division of Social Services and the Family and Children's Resource Program

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*In summarizing recent research, we try to give you new ideas for refining your practice. However, this publication is not intended to replace child welfare training, regular supervision, or peer consultation—only to enhance them.*

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## CHILD AND FAMILY TEAM MEETINGS IN CHILD WELFARE

*Editor's Note:* In this issue of *Practice Notes* we use "child and family team meetings" and "family conferencing" interchangeably as generic terms referring to family-centered meetings. When we use the generic term "family conferencing" we are NOT referring to the family group conferencing model.

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One of the most influential concepts discussed in our field over the past decade is the notion that child welfare agencies cannot single-handedly achieve the safety and well-being of children. Child welfare agencies and others now widely acknowledge that, though professionals have a great deal to contribute, the true power to solve the problems faced by families lies with families themselves, and with the communities in which those families live.

Agencies, acting on this realization, are striving to make their work with families more collaborative, strengths-based, and family-centered. One of the clearest reflections of this can be found in the growing use of a practice known sometimes as **child and family team meetings** and sometimes as **family conferences**. These structured, facilitated meetings bring family members together so that, with the support of professionals and community resources, they can create a plan that ensures child safety and meets the family's needs.

A focus on family conferencing at this time is particularly relevant. Through its **Multiple Response System** (MRS) effort, North Carolina will soon ask all county departments of social services (DSS's) to make child and family team meetings a standard part of their practice with families.

Alamance, Bladen, Buncombe, Caldwell, Craven, Franklin, Guilford, Nash, Mecklenburg,

and Transylvania—the ten counties participating in the pilot of the Multiple Response System—have already made this transition. Because they empower families and bring people together for the benefit of children, child and family team meetings are one of the seven core strategies of this child welfare system reform effort.

To assist you and your agency as you prepare to engage in this strategy, this issue will provide an introduction to family conferences, explore some of the research on them, and present the perspectives of people who know firsthand the challenges and benefits of these family-centered meetings. ♦

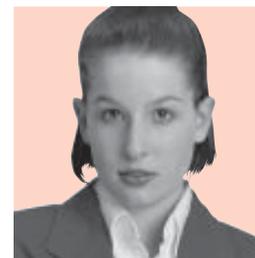


Photo Illustration

**Family-centered meetings are a key strategy in the effort to reform North Carolina's child welfare system.**

### CORE STRATEGIES OF THE MULTIPLE RESPONSE SYSTEM

1. Strengths-based, structured intake process
2. Choice of two approaches to reports of child abuse, neglect, or dependency
3. Coordination between law enforcement agencies and child protective services for the investigative assessment approach
4. Redesign of in-home family services
- 5. Child and family team meetings**
6. Shared parenting meetings
7. Collaboration between Work First and child welfare programs

## CHILD AND FAMILY TEAM MEETINGS IN NORTH CAROLINA

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In North Carolina and other parts of the world, an increasing number of child welfare agencies are using family conferences to help them achieve safety, well-being, and permanency for the children and families they serve. This article will explore why and how this approach to working with families emerged and inform you about the challenges and rewards experienced by those who are conducting these meetings in North Carolina today.

### DEFINITION AND HISTORY

Child and family team meetings are structured, facilitated meetings that bring family members together so that, with the support of professionals and community resources, they can create a plan that ensures child safety and meets the family's needs.

The first form of child and family team meeting to arise was New Zealand's family group conferencing model. The model was created as a response to a concern that Maori children were overrepresented in both the juvenile justice and child protection systems, and out of a desire to minimize unnecessary governmental intervention. Further, Maori people felt excluded from planning for their children, although their cultural tradition held that the nuclear family, clan, and tribe should be involved in decisions about children.

In 1989, a few years after the practice was introduced, New Zealand made family conferencing mandatory for all families with abused or neglected children (Florida, 1999a; Pennell, 1999).

New Zealand's inspiring approach to empowering families and communities to address social problems was quickly adopted—and adapted—internationally. Today, different forms of family conferencing are used in Australia, the United Kingdom, the United States, and Canada (Florida, 1999a).

As the use of child and family team meetings grew, so did the number of contexts in which they were used. For example, family group conferencing (FGC) has been used not only in child welfare, but to address concerns such as youth crime, school suspensions, juvenile delinquency, adult crime, reintegration of offenders into the community, and neighborhood conflicts (Pennell, 1999). Various models of child and family team meetings resulted when the original New Zealand model was applied in different legal, systemic, and cultural contexts. Some of the most well-known models in use today are family group conferencing, team decision-making, the family unity model, and family group decision-making.

See page 5 for an overview of some of the child and family team meeting models used in North Carolina.

### COMMONALITIES

Despite differences, most models of family conferencing share the same underlying solution-based, family-centered beliefs, beliefs North Carolina has been emphasizing in its child welfare system for a number of years. These include the following ideas:

- Everyone desires respect
- All families have strengths and can change
- Families are the experts on themselves
- Families, with support, can overcome the challenges they face
- To maximize family strength and



Photo Illustration

**Strengthening families is the ultimate goal of child and family team meetings. This leads to long-term solutions to family problems and safety for children.**

problem-solving capacity, meetings should include extended family and supportive non-family members

The strengths orientation of family conferencing is based on the belief that family strengths are what ultimately resolve issues of concern. The N.C. Division of Social Services' *Children's Services Manual* (1998) explains this philosophy: "Strengths are discovered through listening, noticing, and paying attention to people. They are enhanced when they are acknowledged and encouraged. People gain a sense of hope when they are heard. They are also more inclined to listen to others. Whereas advice can seem disrespectful, listening and suggesting options provide choices. Choices empower people."

Many experts and experienced practitioners are convinced that the professionals involved in child and family team meetings, especially conference facilitators, must hold and act on these strengths-based, family-centered beliefs if conferences are to be successful.

Family-centered beliefs are also expressed in the general structure shared by the different models of family conferencing, most of which contain the following steps:

- Prepare for the meeting

cont. p. 3

- Bring the family and its supporters together with professionals
- Ask the family what it wants to work on
- Explicitly inventory family strengths that relate to the present concern
- Explore family needs
- Select a goal
- Develop a plan

These common components of family conferencing are depicted in the figure at right, "Structural Overview of a Child and Family Team Meeting."

Some models also require that each meeting provide families time to be alone together, without the presence of the facilitator or other professionals, to develop a plan that protects and cares for their children and addresses their needs.

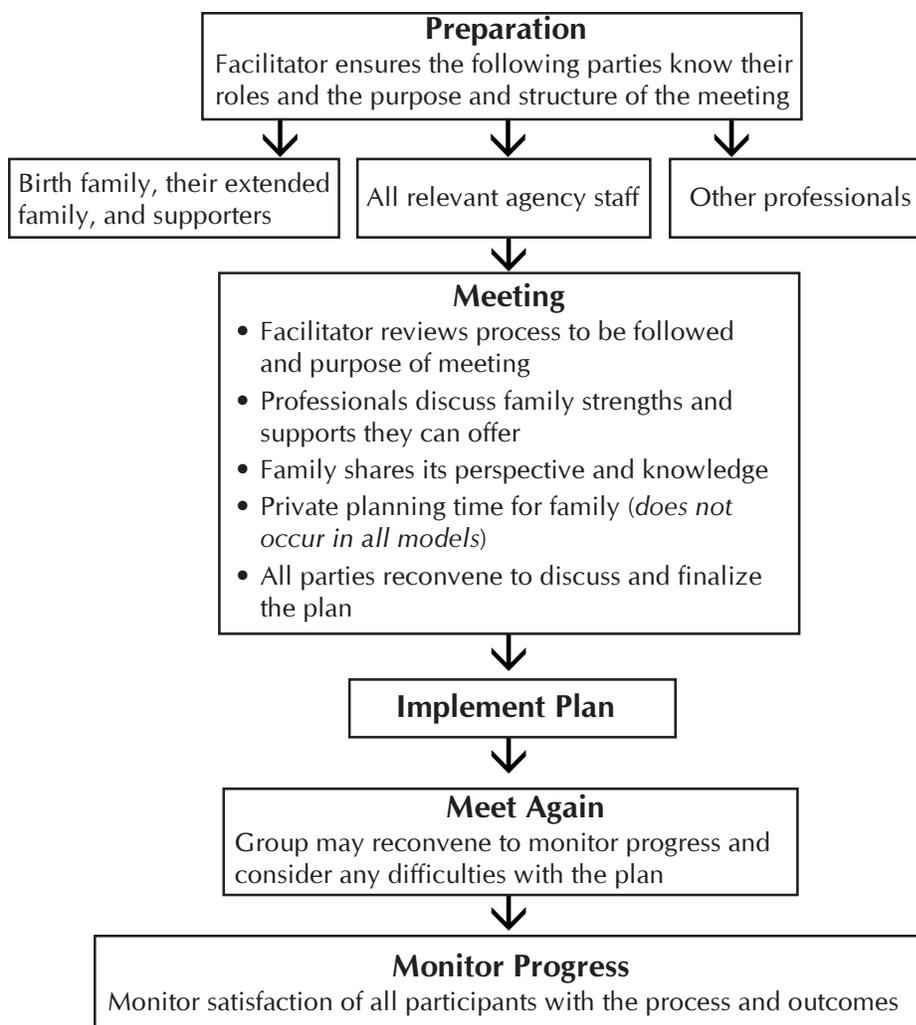
The beliefs underlying child and family team meetings are also reflected in the fact that families are strongly encouraged to have input into the selection of the individuals invited to the conference. In some models, it is stipulated that the family and its supporters must account for 50% of those participating in the conference; this ensures that the family does not feel outnumbered or intimidated at the meeting. Most models also suggest conducting meetings in a location that is comfortable, accessible, private, and feels safe for the family.

Other common elements of family conferencing models include a requirement that meetings be coordinated and facilitated by competent and trained individuals, and that the facilitator and others make the necessary advance preparations (Morton, 2002a).

## EFFECTIVENESS

As we have said, the child and family team meeting is a family-centered strategy to support and empower families and communities to fix the problems they

## Structural Overview of a Child and Family Team Meeting



face. But does this technique work? Does it improve child and family outcomes in the communities where it is used?

According to some researchers, it does. Pennell (1999) writes that limited studies of the family group conferencing model suggest it:

- Reduces child maltreatment
- Reduces domestic violence
- Decreases disproportionate numbers of children of color in care
- Promotes well-being of children and family members

The practice of family conferencing may also improve the performance of

child welfare agencies in other ways. According to DeMuro and Rideout (2002), authors of the family conferencing model used in the Family to Family initiative, their team decision-making process teaches agencies and practitioners how to:

- Improve the child welfare decision-making process
- Improve child safety outcomes
- Increase cooperation among families, foster families, providers of services, the community, and caseworkers
- Decrease the length of time children stay in foster care

cont. p. 4

## CHILD AND FAMILY TEAM MEETINGS from p. 3

- Improve child welfare's relationship with the broader community

Some observers are less confident in the effectiveness of family conferencing. Morton (2002b), for example, decries the fact that research done thus far has said little about the characteristics of the specific families participating in family conferences. Without this information, he argues, we cannot empirically say for whom this practice works.

Other research indicates that child and family team meetings can be challenging to implement. For example, a July 2000 report on an evaluation of Oregon's Family Decision Meetings found that involvement of parents in the process of deciding whom to invite to meetings was inconsistent; just slightly more than 50% of family members reported knowing they could invite others besides family members.

Not surprisingly, the same study found that often professionals were overrepresented at meetings. It also found that one third of family members interviewed were not at all satisfied with the plan or were only satisfied with some of it, which suggests a lack of meaningful family involvement (Florida, 1999a).

### NORTH CAROLINA

In North Carolina the use of child and family team meetings varies a great deal from county to county across the state. Because state policy requires the use of community assessment teams for families with children in foster care, every DSS has some experience with family conferencing-style meetings (NCDSS, 1998). Some agencies, however, have more extensive

experience. Buncombe County DSS, for example, has been actively engaged in child and family team meetings for nearly ten years.

Becky Kessel, a program administrator at Buncombe County DSS, explains that family conferencing got its start at her agency in the early 1990s as a facet of a grant from the Robert Wood Johnson Foundation. The "treatment teams" that were part of this effort meshed easily with the emphasis that Families for Kids put on community involvement when it came along in the mid-1990s. Likewise, Buncombe's treatment teams fit well with System of Care's emphasis on inter-agency collaboration and wraparound services when that initiative appeared in 1997. Family conferences in Buncombe are now called "child and family teams."

Experience led Kessel's agency to change not just the name of the teams, but the way they are used. "Early on the teams were more foster care-focused," she says. "Now child and family team meetings are also held on the front end, at the start of our relationship with families."

Kessel says that the agency hopes applying this strategy on the front end, as they are doing as part of the MRS effort, will help uncover solutions that

## CHILD AND FAMILY TEAM MEETINGS AND MRS

Under MRS, county DSS's use a form of family conferences known as child and family team meetings with families involved with child protective services. Agencies may use any commonly accepted family conferencing model or devise their own. Under MRS:

- Child and family team meetings occur **within seven days** of the time the decision is made to substantiate or reach a finding of "services required."
- The primary function of these meetings is to engage the family and other interested parties in joint decision-making and to provide the family with support.
- The meeting addresses the family's strengths and needs and how these affect the child's safety, permanence, and well-being; it also results in a plan that specifies what must occur to help the family safely parent the children.
- This is a meeting **with** the family. Therefore the family and the social worker jointly decide who will be invited to the meeting. Typically families invite their parents, the child (if appropriate), and other supportive people.
- Child and family teams are involved with the family throughout the life of the case, even if it is necessary to remove a child from the home due to safety issues.
- Most successful meetings require a trained, neutral facilitator to prepare for, facilitate, and follow up after the meeting.

will solve family problems and prevent children from entering out-of-home care.

### A KEY POINT

It is important to understand that family conferencing as it is practiced in North Carolina today is a flexible, versatile tool. This versatility is reflected in the fact that in many counties, who attends a family's meeting and who facilitates it varies from meeting to meeting, depending on the *cont. p. 6*

## SOME OF THE CHILD AND FAMILY TEAM MEETING MODELS USED IN NORTH CAROLINA

Approach and Its Goals	People Involved	When	Currently Used In
<p><b>Team Decision-making</b></p> <p>Involves the family and community, but the agency maintains responsibility for ultimate decision</p> <p>A diverse team makes decisions regarding placement (i.e., removal, moves, reunification, etc.)</p> <p>Purpose of the meetings is to make an immediate decision regarding the child’s placement; case planning, assessment, and review functions are secondary</p>	<ul style="list-style-type: none"> <li>• <b>Facilitator:</b> Trained agency facilitator not involved in the case</li> <li>• Family’s social worker convenes the group</li> <li>• Family may include anyone they wish</li> <li>• Community partners encouraged to attend</li> </ul>	<p>Meetings held at four critical points:</p> <ol style="list-style-type: none"> <li>1. Prior to placement in foster care</li> <li>2. Prior to any placement disruptions</li> <li>3. Prior to reunification</li> <li>4. Anytime there is a critical decision to be made about the child</li> </ol>	<ul style="list-style-type: none"> <li>• Family to Family counties</li> <li>• Follows philosophy from Annie E. Casey Foundation</li> </ul>
<p><b>Family Group Conferencing</b></p> <p>Primarily a clinical intervention where the family makes the ultimate decision regarding a plan to stabilize the current crisis, with support from helping professionals</p> <p>May be called by any helping professional involved with the family</p>	<ul style="list-style-type: none"> <li>• <b>Facilitator:</b> Must remain impartial and have no direct connection to the case</li> <li>• Involves the entire extended family</li> <li>• Family may include anyone they wish</li> <li>• Community partners encouraged to attend</li> </ul>	<ul style="list-style-type: none"> <li>• Whenever family problems lead to crisis: typically, a child is on the brink of out-of-home placement</li> </ul>	<ul style="list-style-type: none"> <li>• Select counties</li> <li>• Follows philosophies designed by NC State University</li> </ul>
<p><b>System of Care</b></p> <p>Seeks to organize the spectrum of mental health and other necessary services and supports into a coordinated network to meet the needs of children with mental health needs, and their families</p>	<ul style="list-style-type: none"> <li>• <b>Facilitator:</b> Must be trained and remain impartial, may work for any involved agency</li> <li>• Frontline service providers in mental health, social services, juvenile justice, schools</li> <li>• Informal supports such as recreational clubs, family friends, church supports, etc.</li> <li>• Entire family system included as full partners</li> </ul>	<ul style="list-style-type: none"> <li>• Each child enrolled in the At Risk Children’s Program (ARC) will have a System of Care Team that meets upon enrollment and when deemed necessary by the case manager</li> </ul>	<ul style="list-style-type: none"> <li>• Part of the “New Beginnings” partnership involving mental health, juvenile justice, and DSS</li> </ul>
<p><b>Community Assessment Team</b></p> <p>Brought to North Carolina by the Families for Kids initiative. Identifies barriers to permanence for children and ensures a safe, permanent home for each child is being actively pursued. Frequently uses family group conferencing model</p> <p>Team is involved with ongoing assessments and planning for as long as the child is in DSS custody or placement responsibility. Size and scope is broader than a PPAT</p>	<ul style="list-style-type: none"> <li>• See family group conferencing, above</li> </ul>	<ul style="list-style-type: none"> <li>• Often first meet prior to a child coming into agency custody, then periodically for as long as child is involved with child welfare</li> <li>• May serve as an MRS child and family team (see below)</li> </ul>	<ul style="list-style-type: none"> <li>• Children’s services policy (see Children’s Services Manual, Chap. IV: 1201 Child Placement Services)</li> </ul>

### **What About the Permanency Planning Action Team (PPAT)?**

*In general, PPAT meetings arranged and conducted to meet the minimum standards set forth in North Carolina policy are not family-centered enough to be considered child and family team meetings. For example, although state policy emphasizes the need for objectivity in these meetings, it does not require PPAT meeting coordinators to be objective, nor does it prescribe conditions that sufficiently empower the family and community as true partners in assessment and case planning. To fit the description of child and family teams outlined on pages 2 and 3, PPATs must go beyond the minimum criteria for PPATs to include neutral facilitators and other elements found in Community Assessment Teams. For more on the difference between the child and family team-compatible Community Assessment Team and the PPAT, consult North Carolina’s Children’s Services Manual < <http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CDs1201c9-06.htm> >.*

## CHILD AND FAMILY TEAM MEETINGS *continued from page 4*

situation and the needs of the family involved.

For example, early in an agency's involvement with a family, family conferencing may take the form of an MRS-style child and family team (see sidebar, p. 4) and perform the function of a

**Each meeting can and must be tailored to fit the family's present circumstances.**

community assessment team. At this stage, especially if there are no serious safety concerns, the family and other agencies present often have a significant amount of input into the development of the family's plan.

A subsequent meeting might be more closely patterned on the family group conferencing model, which involves more extensive preparation time. This enables the family and facilitator planning the meeting to invite a wider range of supportive individuals. (It should be noted, however, that regardless of where you are in the life of a case, if circumstances require it, these meetings can be pulled together in a very short time, making them very effective tools for addressing family crises.)

If things do not go well with the implementation of the plan and the children are in danger of being placed in foster care in the near future, a meeting might be held that more closely resembles the team decision-making model. At this point, although there is still strong encouragement for input from the family and other participants, DSS may take a more central role in the development of the plan.

If things deteriorate further and the children are placed out of the home, in future meetings DSS will

be even more directive because of the responsibilities placed upon it by statutes and the court.

In this example, we have associated these four successive meetings with different models of family conferencing. Yet in reality the agencies and family members involved would not experience these meetings as different models or approaches, but as incarnations of the same meeting, adapted to fit the changing needs of those involved.

Depending where you are in the life of a case, each meeting has a slightly different focus, yet it retains the same basic structure and purpose: producing a plan that will guarantee the safety of the children involved and either preserve or reunify the family in question. ♦

### TO LEARN MORE

Consult the following resources to learn more about this topic:

- Casey Foundation's Team Decision-making model <<http://www.aecf.org/initiatives/familytofamily/tools.htm>>
- Description of family group decision-making models <[http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CSs1201cYP-03.htm#P208\\_22728](http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CSs1201cYP-03.htm#P208_22728)>
- North Carolina State University's Family-Centered Meetings Project <<http://social.chass.ncsu.edu/jpennell/fcmp/>>
- Family group decision-making bibliography <<http://social.chass.ncsu.edu/jpennell/fgdm/bibliog.htm>>

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## TIPS FOR IMPLEMENTING SUCCESSFUL CHILD AND FAMILY TEAM MEETINGS

Some North Carolina county departments of social services would like to be more involved in child and family team meetings but have questions about how to begin and concerns about the possible costs—financial and otherwise—of doing so. In an effort to address some of these concerns, *Practice Notes* spoke with several people with experience in this area, including Billy Poindexter, a child and family team meeting facilitator in Catawba County and a trainer for N.C. State University's Family-Centered Meetings Project. We hope the following will answer some of your questions and convey the benefits of this important strategy for engaging families.

**1. Where shall we begin?** Begin by learning about the different models of family conferencing and about how this strategy is being used in North Carolina. To find out these things, consult the resources listed on page 6, ask your CPR, contact a county DSS currently using family conferencing, or consult N.C. State University's Family-Centered Meetings Project (919/513-3828; amy\_coppedge@ncsu.edu).

**2. What about cost?** To conduct effective child and family team meetings, agencies must have access to trained, neutral facilitators. When agencies hear this, they may ask: "Where will we find these facilitators in our community and where will we get the money to pay for them?"

While having contracted facilitators is ideal, many of the agencies practicing family conferencing in North Carolina have found meetings facilitated by professionals working for DSS or another participating agency can be quite successful.

The key, according to Poindexter, is training: "Your facilitator must be trained, he must be committed to the philosophy, and he must stick to the structure and his role in the meeting." In Buncombe County, if the neutrality of the facilitator is questioned during a meeting due to conflict of interest, another meeting participant will step up and facilitate; thanks to the training that is part of System of Care, many human services professionals in the community are trained to facilitate these meetings. In other counties, to avoid conflict of interest a supervisor from one unit will facilitate another unit's meetings.

**3. What about training?** Although developing an adequate pool of people trained to facilitate child and family team meetings may seem daunting at first, it all begins with one person. Once you have a trained facilitator, he or she can train and mentor others. Don't hesitate to recruit facilitators from outside your agency—good family conferences often include participants from mental health, juvenile justice, schools, etc. If

**Child and family team meetings can decrease professionals' workload, ease power imbalances, and boost the family's sense of control and commitment to solutions.**

you are starting from scratch and no one in your community has facilitation training, consult some of the resources listed under question one, above.

**4. What about time?** Agencies sometimes wonder, "Will the time required to prepare for and hold these meetings overburden my agency and hinder its ability to serve families?"

Concern about time is always valid when considering implementing a new intervention or procedure, admits one administrator we consulted. "Yet family conferencing makes the whole case planning process more efficient. It is well worth the investment."

Having facilitated over 200 meetings, Billy Poindexter admits that using this strategy does take time: he estimates that for every action team meeting (as they are called in Catawba County) he spends 5 to 6 hours of preparation time prior to the meeting, 2 hours per meeting, and 2 hours of follow-up time. Yet this expenditure more than makes up for itself, he points out, if the meeting is successful and there is no need to place the child in foster care or go to court. In addition, these meetings allow workers who attend to have required contact with collaterals, children, etc. "Family meetings," Poindexter says, "reduce tensions, foster cooperation, and reduce the overall time families are involved with us. Given all these benefits, we've really not found the time needed to hold family meetings to be a sacrifice."

**5. What about family engagement?** The biggest challenge faced by many agencies using family conferences is ensuring adequate family involvement, which can be defined as active family participation in the planning and implementation of meetings. The danger, says Poindexter, is an under-involved family, which can lead to a deficient plan that overlooks hidden family and community resources.

Families tend to face two hurdles in this area. The first is the fact that for many of the families involved with child welfare, social isolation is already an issue, so they are sometimes hard-pressed to identify supportive friends or community members to invite to meetings.

The N.C. Division of Social Services suggests that family conferencing itself might be a solution to this problem. Its *Children's Services Manual* (1998) notes that the process followed in these meetings tends to counter the families' isolation, and that by respecting and involving families, it encourages them to form important links with their communities.

Another hurdle may be a family's preconceptions *cont. p. 8*

## TIPS FOR SUCCESSFUL CHILD AND FAMILY TEAM MEETINGS from page 7

about DSS, based either on prior experience or DSS's reputation. Poindexter explains that a family that's been involved with DSS for years may expect to be told, "This is what the plan is, and this is what you must do. Now do it." Given this expectation, the family is not likely to be very invested in either creating the plan or carrying it out.

"A neutral facilitator and a good meeting," Poindexter says, "can really make a difference in the family's level of investment."

**6. Will the family meeting produce a realistic, acceptable plan?** This is a common concern for those beginning child and family team meetings. Some worry that if "family alone time" is used, the family's plan will not adequately address child safety and the other challenges facing the family. First, it is important to recognize that because of its mandates, DSS maintains veto power over any plan. Yet agencies in North Carolina and other states that have experience with family group conferencing models have found that a majority of family-developed plans can be approved by the agency (NCDSS, 1998).

**7. Special considerations.** Although child and family team meetings are productive for virtually all families, in some cases agencies will find they must deviate from the meeting model



**"Family meetings reduce tensions, foster cooperation, and reduce the overall time families are involved with us."**

**—Billy Poindexter, Catawba Co. DSS**

they choose in order to avoid traumatizing or re-traumatizing family members and to ensure the safety of all participants. For example, if domestic violence is a serious concern for a family, agencies sometimes have the offending partner send a spokesperson or attend the meeting via speaker phone. If it seems possible that the battered partner will decide during the meeting to leave home, agencies sometimes make sure a police officer is available to accompany her to get her things.

The same holds true when it comes to child sexual abuse—in most cases, the perpetrator should not be present at meetings concurrently with the victim children. This can be accomplished by having children meet with the group and then depart prior to the offender's arrival, or if necessary by excluding the offender altogether. ♦

### IN THIS ISSUE: CHILD AND FAMILY TEAM MEETINGS IN CHILD WELFARE

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