This is a tool created as a guide to follow when facilitating ND Child & Family Team Meetings. It is not expected that this document be completed before, during or after the meeting. Case managers do not have to follow any particular order and not all sections will be applicable to every in-home or foster care case. This outline has been divided into two parts (initial and ongoing), posted online and incorporated into policy manuals 607-05, 610-05, and 624-05.

### Initial Child & Family Team Meeting

<table>
<thead>
<tr>
<th>A.</th>
<th>Review confidentiality</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.</td>
<td>Introduce team members</td>
</tr>
<tr>
<td>C.</td>
<td>Explain the purpose of a CFTM</td>
</tr>
<tr>
<td></td>
<td>1. Federal foster care guidelines and case management policies</td>
</tr>
<tr>
<td></td>
<td>2. Administrative review required by a CFS Field Service Specialist every six months (foster care only).</td>
</tr>
<tr>
<td>D.</td>
<td>Summarize Case and Family Unit</td>
</tr>
<tr>
<td></td>
<td>1. Names of parents and children</td>
</tr>
<tr>
<td></td>
<td>2. Current placement of children</td>
</tr>
<tr>
<td></td>
<td>3. Names and relationships of support person/s</td>
</tr>
<tr>
<td></td>
<td>4. Date of agency involvement</td>
</tr>
<tr>
<td></td>
<td>5. ICWA eligibility</td>
</tr>
<tr>
<td>E.</td>
<td>Summarize event/s that led to agency involvement</td>
</tr>
<tr>
<td></td>
<td>1. Reason family is receiving case management from the agency</td>
</tr>
<tr>
<td></td>
<td>a. Present Danger Plan (Tool 2/SFN 455) and/or Safety Plan (Tool 4)</td>
</tr>
<tr>
<td></td>
<td>b. Was there a plan? For what purpose? How was it managed?</td>
</tr>
<tr>
<td></td>
<td>2. Details of the current Safety Plan (Tool 4)</td>
</tr>
<tr>
<td>F.</td>
<td>Summarize Protective Capacities Family Assessment (PCFA) (Tool 5)</td>
</tr>
<tr>
<td></td>
<td>1. Parent/caregiver enhanced capacities</td>
</tr>
<tr>
<td></td>
<td>2. Parent/caregiver diminished capacities</td>
</tr>
<tr>
<td></td>
<td>3. Parent/caregiver self-awareness of what must change</td>
</tr>
<tr>
<td></td>
<td>4. Areas of agreement with parents regarding what must change</td>
</tr>
<tr>
<td></td>
<td>5. Areas of disagreement with parents regarding what must change</td>
</tr>
<tr>
<td>G.</td>
<td>Visitation Plan (Document frequency and ensure quality)</td>
</tr>
<tr>
<td></td>
<td>1. Visitations between child(ren) and case manager</td>
</tr>
<tr>
<td></td>
<td>2. Visitations between child(ren) and parents</td>
</tr>
<tr>
<td></td>
<td>3. Visitations between parents and case manager</td>
</tr>
<tr>
<td></td>
<td>4. Visitations between siblings and significant family members</td>
</tr>
<tr>
<td>H.</td>
<td>Family Connections (Foster Care Only)</td>
</tr>
<tr>
<td></td>
<td>1. Are siblings placed together?</td>
</tr>
<tr>
<td></td>
<td>a. If not, reasonable efforts to place or explain why it is not possible/appropriate to place together.</td>
</tr>
<tr>
<td></td>
<td>2. Relative SEARCH via Federal Parent Locator &amp; SENECAC</td>
</tr>
<tr>
<td></td>
<td>a. Date of last relative search</td>
</tr>
<tr>
<td></td>
<td>b. Located relatives (yes or no)</td>
</tr>
<tr>
<td></td>
<td>c. Notice to relatives including to parents of siblings of the children</td>
</tr>
<tr>
<td></td>
<td>d. Discuss the need for another relative search</td>
</tr>
<tr>
<td></td>
<td>3. Assess the provider(s) compliance with reasonable and prudent parenting policy “normalcy”</td>
</tr>
</tbody>
</table>
I. **Children’s Needs** (Tool 5)
   1. Social Emotional
   2. Physical Health - Including well child check (Health Tracks) within 30 days and any dental, vision
   3. Mental/Behavioral Health
   4. Behavioral
   5. Educational – school of origin, notifications, transportation
   6. Spiritual/cultural
   7. Important Connections
   8. Respite needs
   9. In addition, for foster care
      a. Normalcy opportunities
      b. Level of care and/or EMP
      d. Youth Rights age 14+ youth -DN 402
      e. Annual Credit Report for ages 14+

J. **Assessing safety management**
   1. Impending danger/s
   2. Type of Safety Plan (Tool 4)
   3. Sufficiency of safety plan

K. **Safety determination analysis** (In-home vs. Out of home)
   1. Is the home suitable to reside?
   2. Is the home environment calm and consistent enough?
   3. Are the primary parents/caregivers willing and able to allow safety services in the home?
   4. Are there sufficient resources within the family or community to manage impending danger threats?

L. **Permanency Goal/Safety Plan** (In-home vs. out of home)

WRAP UP/CLOSURE

M. **Case Plan Agreement**
   1. Solicit from the team members whether or not they agree with the plan
   2. Ask team members to sign the PCPA Agreement (Tool 7) – no longer using the FRAME signature page

N. **Schedule next team meeting** *(within 90 days)*
   1. Date determined

NOTES:
Quarterly Child & Family Team Meeting
This meeting is held at least every 90 days to monitor and update the team on family progress and goal achievement.

A. Review confidentiality
B. Introduce team members
C. Update/Changes to Child Placement
D. Update/Changes to ICWA Eligibility status
E. Update Protective Capacities Progress Assessment - PCPA (Tool 7)
   1. Parent/caregiver progress assessment
      a. What was agreed would be worked on?
      b. What has been achieved?
      c. What is still needed?
   2. Child progress assessment
      a. What was agreed would be worked on?
      b. What has been achieved?
      c. What is still needed?
      d. Social Emotional
      e. Physical Health - Including well child check (Health Tracks) within 30 days and any dental, vision
      f. Mental/Behavioral Health
      g. Educational – school of origin, notifications, transportation
      h. Spiritual/cultural
      i. Important connections
      j. Respite needs
      k. In addition, for foster care
         ✓ Level of care and/or EMP
         ✓ Independent Living goals at age 14+. Chafee referral required at age 16.
         ✓ Youth Rights age 14+ youth -DN 402
         ✓ Annual Credit Report for ages 14+
         ✓ SFN 494 Transition Checklist (90 days prior to age 18)
         ✓ 18+ Continued Care Program
         ✓ SFN 1612 Foster Care verification form for all foster children upon discharge
   3. Assessing Implementation of the case plan
   4. Assessing safety management
      a. Impending danger/s
      b. Type of Safety Plan (Tool 4)
      c. Sufficiency of safety plan
   5. Safety determination analysis (In-home vs. Out of home)
      a. Is the home suitable to reside?
      b. Is the home environment calm and consistent enough?
      c. Are the primary parents/caregivers willing and able to allow safety services in the home?
      d. Are there sufficient resources within the family or community to manage impending danger threats?
   6. Discuss permanency goal/plan in process (Foster Care Only)
      a. Revisit the goal
      b. Goal remains appropriate
      c. Goal needs adjusting
         ✓ Add concurrent goal
         ✓ Change goal
F. Visitation Plan (Document frequency and ensure quality)
   1. Visitations between child(ren) and case manager
   2. Visitations between child(ren) and parents
   3. Visitations between parents and case manager
   4. Visitations between siblings and significant family members
   5. Any changes to the visitation plan needed?

G. Family Connections (Foster Care Only)
   1. Are siblings placed together?
      a. If not, reasonable efforts to place or explain why it is not possible/appropriate to place together.
   2. Relative SEARCH via Federal Parent Locator & SENECA
      a. Date of last relative search
      b. Located relatives (yes or no)
      c. Notice to relatives including to parents of siblings of the children
      d. Discuss the need for another relative search
   3. Assess the provider(s) compliance with reasonable and prudent parenting policy “normalcy”.

WRAP UP/ CLOSURE OF MEETING

H. Case Plan Agreement
   1. Solicit from the team members whether or not they agree with the plan
   2. Ask team members to sign the PCPA Agreement (Tool 7) – no longer using the FRAME signature page

I. Schedule next team meeting (within 90 days)
   1. Date determined

Notes: