



South Carolina Department of Social Services

Work Aid 1639.1: Removal Prevention Child and Family Team Meeting Process

Supplemental to DSS Policy 1639: Chapter 16 – Special Topics

A. Roles and Responsibilities of the Case Manager, Team Leader, and CFTM Facilitator Before the RP-CFTM for DSS Involved Children	This Removal Prevention Child and Family Team Meeting (RP-CFTM) process includes the following, but may be condensed due to abbreviated time frames: 1. The case manager shall: a. Inform the family of the meeting and provide them with DSS Brochure 559: Removal Prevention Child and Family Team Meeting; b. Explain the purpose and goal of the meeting to the family and encourage their participation; c. Secure a DSS attorney to be present at the meeting if the parent's attorney attends; i. The parent and/or legal guardian may invite their attorney to attend, and efforts will be made to accommodate the attorney's schedule and conduct the meeting within the required timeframe. ii. If the parent or legal guardian has a court appointed Guardian ad Litem (GAL), the GAL must be present for the RP-CFTM unless the GAL and parent's attorney agree the parent can participate in the meeting without the GAL being present. d. Engage the family to identify their natural supports; e. Encourage and assist the family in inviting their supports to participate in the meeting; f. Assess the family's need for transportation and childcare; g. Invite the child to attend and participate as age and developmentally appropriate; h. Partner with the child to prepare them to participate or develop strategies on how their voice will be shared if they are unable to attend including, but not limited to: i. Making arrangements to enable the child to participate in the meeting via audio or video conference; ii. Written communication including, but not limited to, resources provided by CFTM Operations Management; or iii. Recorded communication. 2. The case manager and team leader shall participate in a consultation with the CFTM facilitator to: a. Share the primary safety concern(s) and situation(s) that prompted the meeting; b. Discuss any safety concern(s) for the meeting and whether there are any restrictions in attendance among participants (e.g., restraining orders, protective orders, etc.); c. Determine the need for special accommodations (e.g., interpreter, wheelchair access, etc.) (Note: The case manager and/or team
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	<i>leader is responsible for securing any necessary accommodations.); and</i> d. Discuss meeting logistics (e.g., location, date, time, and the need for a separate meeting due to extenuating circumstances of the case. 3. The CFTM facilitator shall: a. Serve as a resource to the process which may include, but is not limited to, assisting the case manager with talking to the parents, child, or family members to explain the process and encourage participation, if necessary; b. Consult with the case manager and team leader to: i. Obtain essential information from DSS staff to facilitate the meeting (e.g., current safety concern(s) and need(s)); ii. Assist in articulating the primary safety concern(s) and impact on the child, family, and community; iii. Discuss the child's participation in the meeting; and iv. Inquire about the expressed safety concern(s) or reason for the child not attending the meeting, if applicable. c. Consider how best to structure the meeting environment for safety and productivity.
B. Roles and Responsibilities of the Case Manager, Team Leader, and CFTM Facilitator During the RP-CFTM for DSS Involved Children	1. The case manager shall: a. Provide a summary of the current family situation resulting in the need for the meeting; b. Describe the safety concern(s) and risk factor(s) that may be impacting safety and present relevant case information as it relates to the current situation; c. Articulate the primary safety concern(s) as it aligns with FAST assessment factors; d. Bring any existing documentation and information that describes safety interventions and be prepared to discuss what is or is not working to ensure child, family, and community safety; e. Identify child and family strengths and protective factors that may be used to address the safety concern(s); f. Be prepared to discuss DSS requirements and parameters concerning safety interventions; g. Remain open and receptive to the ideas and opinions of others; and h. Explore all kin and fictive kin resources for support, safety, and, if necessary, placement. 2. The team leader shall: a. Attend the meeting and support the case manager in the responsibilities outlined above; b. Communicate whether proposed safety interventions identified through the meeting can sufficiently protect the child, family, and/or community; and c. Approve the "live decision" made during the meeting to include consultation with higher level leadership staff, if necessary. 3. The CFTM facilitator shall: a. Meet briefly with the parents and child individually to determine how best to structure the meeting for safety and productivity;

	b. Facilitate the meeting using the six-stage structured process (Note: Refer to Section C for a detailed outline of the six-stage structured meeting process); c. Engage the child and family in the discussion of the problem and possible solutions; d. Promote and encourage family voice; e. Prioritize, promote, and encourage the child's voice in planning and decision-making, if present; f. Prioritize, promote, and encourage the child's voice to be heard in the meeting, if they are not present; g. Engage the family and their supports in safety planning and identification of risk factors that impact child, family, and community safety; h. Assist both DSS staff and external partner attendees in assessing and addressing any safety concern(s); i. Distinguish between abuse or neglect, parent-child conflict and behavioral concern(s); j. Create a safe environment for participants to express ideas; k. Manage conflict and emotions through check-ins and breaks; l. Guide the team toward consensus; and m. Explore and prioritize placement resources within the family (including fictive kin) should removal be recommended.
C. Six Stages of Removal Prevention Child and Family Team Meetings	The RP-CFTM process includes the following, but may be condensed due to abbreviated time frames: 1. Introduction: This stage sets the foundation for the process with a safe and welcoming environment. During this stage, there is: a. An introduction of participants and their roles and relationship to the child and family to include an emphasis on maintaining the privacy of the information shared; b. A clear statement of the purpose and goal of the meeting with an emphasis on immediate safety and risk issues and the desire to work together with the child and family to resolve the issues; c. A discussion of the range of potential outcomes; and d. An establishment of group agreements and expectations for the meeting. 2. Identify the Situation: The facilitator supports the team in gaining a clear understanding of the purpose and reason for the meeting. During this stage, the: a. Referring agency describes the precipitating events or circumstances that prompted the meeting and the child and family give their understanding of why they are present; b. Facilitator helps develop a shared understanding of the problem or situation; and c. Facilitator maintains focus on primary safety concerns and current circumstances versus comprehensive family background and history. 3. Assess the Situation: The team examines the nature and magnitude of the situation from the perspective of all participants. During this stage, the:

	a. Facilitator elicits the risk elements and safety issues so everyone present understands them; b. Team members explore child and family strengths and protective factors; c. Process clarifies safety versus complicating factors including whether the family dynamics are primarily driven by child maltreatment or parent-child conflict; d. Facilitator leads a discussion identifying safety requirements/parameters; and e. Facilitator leads a discussion identifying what needs to change yet encourages everyone to remain open to a variety of ways to address the concern(s). 4. Develop Ideas: The team brainstorms ideas to address concerns and generate solutions to provide safety and protection. By this point, the team knows what must change and is now exploring how change it. During this stage, the: a. Facilitator leads the group in developing suggestions on how to solve or address the situation; b. Family, extended family, and other members of the team are invited and encouraged to offer up their best thinking and ideas; and c. Team considers formal services as well as informal supports that might be leveraged as protective factors. 5. Reach Decisions: The team develops a plan that provides for safety and protection of the child in the least intrusive and restrictive manner and setting per Work Aid 3.6 Section B(2). During this stage, the: a. Team further examines each of the brainstormed ideas to determine if they are viable; b. Group evaluates all options and ideas beginning with the least restrictive and intrusive plan that can provide adequate safety and protection; c. Facilitator serves as the “agent of reality” in testing the ideas and possible solutions and assesses the group’s movement toward consensus; and d. County team leader has the decision-making authority on behalf of the agency for currently open DSS cases in the absence of consensus. 6. Recap and Close: The facilitator reviews the team’s decisions and confirms participants leave the meeting knowing who will do what and by when.
D. Roles and Responsibilities of the Case Manager, Team Leader, and CFTM Facilitator After the RP-CFTM for DSS Involved Children	1. The case manager shall: a. Follow-up on any concern(s) or risk(s) that arise during the meeting; b. Debrief the meeting with the CFTM facilitator to provide feedback on the process, Continuous Quality Improvement (CQI), and to enhance mutual learning and growth; c. Pursue action steps developed during the meeting; d. Follow-up with the family and others to verify services and interventions identified at the CFTM are implemented in accordance with the timeframes; and

	e. Monitor the plan and assess whether it mitigates the safety concern(s). 2. The CFTM facilitator shall: a. Document the results of the meeting including any decisions/recommendations on DSS Form 37650: Removal Prevention Child and Family Team Meeting Summary and the RP-CFTM information into Section III, Child and Family Teaming, of the Family Permanency Plan; b. Provide a copy of DSS Form 37650 to all participants within 24 hours of the meeting or prior to the scheduled court hearing, whichever occurs first; c. Conduct a debrief of the CFTM with the case manager and/or team leader for feedback on the process, CQI, and mutual learning and growth; and d. Input required data from the meeting into CAPSS and the tracking spreadsheet.
E. Roles and Responsibilities of the CFTM Facilitator, CFTM Team Leader, and County Staff Before the RP-CFTM for Non-DSS Involved Children	1. In situations where DSS has no current service line, the CFTM facilitator shall: a. Support the referring agency in taking the lead to contact the family; b. Obtain permission from the referring agency for DSS to contact the family to explain the meeting process, clarify the meeting is voluntary, and schedule a CFTM; c. Gather and provide contact information from the referring agency to family members and other CFTM participants; and d. Follow-up with CFTM participants to arrange a time and place for the meeting to occur. 2. Upon notification of a CFTM request, the CFTM team leader (or designee) shall: a. Contact the appropriate county staff; and b. Verify a DSS county representative is available to be present for the CFTM.
F. Roles and Responsibilities of the CFTM Facilitator and DSS County Representative During the RP-CFTM for Non-DSS Involved Children	1. The DSS CFTM facilitator shall: a. Advocate for a quality process that supports the engagement of parents, children, and critical family members together with the professionals in all aspects of planning, solution-finding, and decision-making; b. Engage team members in conversation on the following: i. Helping all team members recognize the dynamics that may result in an Emergency Protective Custody (EPC) placement and the potential outcomes if placement into EPC does occur; ii. Sharing the impacts of foster care entry and long-term effects for both the child and family; iii. Assisting team members in understanding available services, timeframes, and expectations of providers to include clarifying child and family progress made to date, when providers are currently involved; and iv. Utilizing kin and fictive kin as key informants for understanding family history to include, but not limited to, medical, educational, and mental health information, and who can provide concrete,

	tangible, support and serve as resources for safety planning and, when necessary, placement. 2. The DSS county representative shall serve as a knowledgeable resource on available services and supports.
G. Roles and Responsibilities of the CFTM Facilitator After the RP-CFTM for Non-DSS Involved Children	The DSS CFTM facilitator shall: 1. Document the decision(s) and next step(s) on DSS Form 37650: Removal Prevention Child and Family Team Meeting Summary; and 2. Provide a copy of the summary to all participants within 24 hours of the completion of the meeting or prior to the court hearing, whichever occurs first.