

Knox County Community Team and Family Team

Philosophy, Process and Procedures For Serving Multi-Need Children and Youth & Families

June 27, 2018
Approved by OFCF July 3, 2018

TABLE OF CONTENTS

PHILOSOPHY

**Knox County Community Team Vision
Community Team Mission Statement
Purpose**

RATIONALE AND PROCESS

I. FAMILY TEAM CONCEPT

*When should a Family Team Form
Accessing Support*

II. COMMUNITY TEAM

*Formal Referral to Community Team
Community Team Meetings
Accountability*

Community Team Language

Community Team Administrative Coordinator

Community Team Success Coordinator

Quarterly Family Team Reviews

In-Home Services

Clinical Direction

Placement Needs

Transition to Adult Services

Closing Evaluation

Funding Streams

Training Opportunities

*Dispute Resolution Process: Family and Children First Council (FCFC) and
Community Team*

Informal Steps

Formal Steps

Appendices

Appendix A: Establishing Family Teams for Community Team Support

Appendix B: Knox County Family and Children First Council Forms

Knox County Family and Children First Council Community Team Guidelines for Comprehensive Coordinated Services

PHILOSOPHY

Knox County Community Team Vision

The Knox County Community Team vision is to provide comprehensive services to multi-need youth and their families who reside in Knox County.

Community Team Mission Statement

Community Team is committed to developing and facilitating comprehensive, coordinated, family centered, and creative solutions through multi-agency collaboration (Family Teams). Community Team is committed to empowering Knox County families with children facing multiple life stressors to remain together.

Purpose

Several county agencies may be providing services to the same family at the same time without knowledge of each others involvement. When those agencies coordinate resources with the family, comprehensive services can be provided to meet child and family needs, while reducing duplication and conflict of services. A multi-disciplinary team can better assure that the correct services for multiple need children are received in a timely manner. Services should be family centered, build on that family's strengths, encompass all members and aspects of family life, and empower the family to be self-sufficient. All assistance and services should be provided in the least restrictive environment possible to help reduce the need for any out of home placements. However, child safety must remain a primary focus.

Knox County Family and Children First Council has been charged with coordinating services for multi-need children age 0 through 21 and in turn, has passed along the development of the service coordination mechanism (SCM) to Community Team. This formal system consists of three multi-disciplinary groups:

1. Family Teams - Consist of family members and direct service providers
2. Community Team – Consists of clinical and supervisory staff
3. Family and Children First Council (FCFC) - Comprised of executive level staff

Working through these multi-disciplinary groups, Community Team understands the importance of the family, neighborhood, and community supports and organizations. All of these groups are interested in the health and well-being of children and families in Knox County and are encouraged to be part of this process.

RATIONALE AND PROCESS

I. FAMILY TEAM CONCEPT

A Family Team brings all of the current service providers together with the family to discuss, plan, develop and coordinate services that meet the needs of the family as well as the requirements of the various agencies involved. Each area where needs have been identified should be represented on the team by providers who are working with the family. Whenever possible, family members must be a part of the team. Services developed with the family are usually more accepted and more effective.

One member of the team will be designated as the service coordinator and approved by the family. All team members will have other roles and are responsible for their specific area of expertise. Teams should meet on a regular basis (once or twice per month) to discuss service delivery, progress, adjustments to the plan, and to deal with new needs. Teams should regularly consider possible crises/safety issues and develop secondary plans as needed.

Family Teams can be formed and use any of the Family Team/Community Team forms without ever needing to come to Community Team. The decision to move to the Community Team process may be based on the complexity of the family's needs and may be initiated by a worker, an existing team, an agency, or the family.

*There **must** be a Family Team started when there is imminent risk of a multi-need child being placed or a multi-need child is currently in placement to ensure that all assistance and services are provided in the least restrictive environment.*

When should a Family Team Form?

Early identification of multi-needs in children age 0 through 21 and referral to the Family Team process can be very helpful to children and families to: 1) divert the child from Juvenile Court; 2) reduce the risk of placement for the child; and 3) comprehensively coordinate effective and unique services to the family.

A Family Team should be considered when:

1. There are several problem areas for the family and it is difficult to coordinate comprehensive services among all the necessary agencies;
2. It is difficult to have timely and clear communication among the involved agencies or family members
3. The family self-refers and/or requests that all providers meet together
4. A child is at risk of placement or has been placed in an out of home care setting. This includes hospitalization, detention, foster care, and residential treatment. In this instance, the Common Intake Screening and the OHIO CANS (Child and Adolescent Need and Strengths) assessment need to be completed and a Family Team will be initiated within 10 days.

Accessing Support

All families in Knox County with multi-need children aged 0 through 21 may use the multi-disciplinary team approach to service coordination. At this time, Knox County does not offer High Fidelity Wraparound. Information about Family and Children First Council and Family Teams is available on the Ohio Family and Children First website.

When children are eligible for Early Intervention services as well as Community Team Service Coordination, the Early Intervention Service Coordinator will coordinate the appropriate services in assure compliance with the O.R.C. 5123.02. The Community Team Service Coordinator for the family team will provide support and assistance as appropriate for the family's IFSP/Early Intervention Plan.

To access Family Teams in Knox County:

- Families may self-refer by:
 - Talking with a service provider.
 - Calling the Success Coordinator who will contact them within five (5) days of their call to arrange a meeting to start the referral process
 - Contacting a Community Team representative
- Service providers may also initiate the Family Team process with a family.
- Any representative from Juvenile Court can begin the referral process on their own, they can contact their Community Team representative or the Success Coordinator to begin the referral process. Referrals from Juvenile Court or family members can benefit those families with children who are alleged to be unruly and should also be considered to help divert children from entering into the Juvenile Court system.

For current contact information for the Community Team Administrative Coordinator, Success Coordinator or Team representatives, please refer to the Knox County Family and Children First website:

<https://www.uwayknox.org/knox-county-family-and-children-first-council>

If a referral packet is needed, please contact the Success Coordinator and it will be sent within five (5) days of the request.

Through the referral process, it may be recommended that a formal Family Team be established and engage with Community Team for clinical and/or financial supports. An outline of how to establish a Family Team for this process is outlined in Appendix A.

The process described in Appendix A, as well as any Community Team forms, may be used in total or in part by any service provider to aide in delivering family services, regardless of whether the team engages with Community Team. In addition, a Family Team may participate in clinical discussion, known as "Triage", held at noon on the 1st Thursday of the month. This clinical discussion is offered to any Knox County service provider regardless of whether the family team engages with Community Team. If an urgent need arises, please contact the Community Team Administrative Coordinator.

For current contact information for the Community Team Administrative Coordinator, Success Coordinator or Team representatives, please refer to the Knox County Family and Children

First website:

<https://www.uwayknox.org/knox-county-family-and-children-first-council>

II. COMMUNITY TEAM

Formal Referral to Community Team

A formal referral and connection to Community Team should be considered when:

- Communication among the family and multiple providers becomes confusing;
- There are multiple goals that become overwhelming;
- Local resources are not meeting the family's needs;
- There is a need for clinical direction;
- The informal team is not moving forward with the service plan goals; and/or
- Non-traditional in-home services are needed.

Formal Engagement with Community Team

- Contact the Community Team Administrative Coordinator or the Community Team Success Coordinator to formally engage with Community Team.
- Assess Family Needs and Strengths using the OHIO CANS (Child and Adolescent Needs and Strengths) assessment. The OHIO CANS should be completed for the family and/or the identified individual who has a FCFC Service Coordination Plan. (If no one Family Team member is certified in using the OHIO CANS, contact the Community Team Success Coordinator.)
- Prepare initial paperwork for Community Team presentation. There should be a FCFC Service Coordination Plan written for the family and/or each member of the family needing services. Paperwork includes the Common Intake Screening Form, Consent for Release of Information, Confidentiality Form for Team Members, and Knox County FCFC Community Team Service Coordination Plan. All of these forms are available in fillable electronic form. See Appendix B.
- Present to Community Team

Community Team Key Responsibilities:

- Provide assistance to Family Teams, including clinical direction, individual team assistance, consensus building, pooled funding, and mediation and dispute resolution, when requested
- Receive quarterly reports on all Family Teams active with Community Team
- Receive OHIO CANS assessment on a quarterly basis, with the first being part of the initial paperwork and repeated every 90 days. (If no one Family Team member is certified in using the OHIO CANS, contact the Community Team Success Coordinator.)
- Review all imminent/emergent, out-of-home placements for diversion or appropriateness of goals, placement, length of stay, appropriate services to child and family/caregivers, after-care plans and long-range goals
- Follow-up closed cases with an evaluation of services
- Strive to offer training, annually, at a minimum, to FCFC agencies, Community Team agencies and other service providers
- Report regularly to FCFC regarding the following:
 - Specific case needs that are beyond current resources and pooled funding
 - Requests for funding for approved long-term out-of-home placements

- Disputes that cannot be resolved at the Community Team level
- Recommendations of allocation of resources and programming, addressing gaps that exist in the continuum of services
- Outcome of referral
- Upon request, service coordination data will be submitted to the State for purposes of evaluation

Community Team Members:

- Community Team Administrative Coordinator
- Community Team Success Coordinator
- Behavioral Healthcare Partners of Central Ohio, Inc. (MGC)
- Ohio Department of Youth Services
- Mental Health & Recovery Board of Licking and Knox Counties (ADAMH)
- Knox County Children Services
- Knox County Juvenile Court
- Knox County Head Start, Inc.
- Knox County Board of Developmental Disabilities (which also includes Help Me Grow Home Visiting and Early Intervention)
- The Alcohol and Drug Freedom Center of Knox County
- Mount Vernon City Schools
- Knox County Schools
- Knox County FCFC Coordinator

Community Team Meetings

Community Team meets every month as follows:

1. 1st Thursday – In-Home reviews and new cases
2. 3rd Thursday – Administrative Meeting & Placement Reviews
3. 4th Thursday – Optional Meeting (meets as necessary)

A team may be asked to participate in clinical discussion, known as “Triage”, held at noon on the 1st Thursday of the month. If an urgent need arises, please contact the Community Team Administrative Coordinator.

Accountability

During reviews, Community Team members hear input from family team representatives regarding the multi-needs of each case and the services provided to specific children and families. Community Team also uses these reviews to assess its ability to provide quality assistance and services to families while ensuring that children remain with their families or in the least restrictive environment. Any required revision of Community Team policies and procedures is discussed at the regular Administrative Meetings of Community Team. Upon request, service coordination data will be submitted to the State for purposes of evaluation.

Community Team Language

Community Team Administrative Coordinator

The Community Team Administrative Coordinator receives referrals and requests for team assistance, reviews referral packets for completeness, copies and distributes material to Community Team members, tracks teams and related data, attends Community Team meetings and tracks fiscal payments, maintains contact with Council Coordinator, sets quarterly review agendas, sends out closing evaluations, keeps other related data and responds to requests for data.

Community Team Success Coordinator

The Community Team Success Coordinator helps individual teams with clinical issues, assists with Family Team development, and helps Family Teams with mediation and consensus building. The Success Coordinator can be the initial service coordinator until the Family Team is functioning.

Quarterly Family Team Reviews

A case progress review of the goals and the Community Team Service Coordination Plan must be conducted on a quarterly basis. Cases are tracked by the custodian's surname. Reports to Community Team must include a summary of the family and their issues, the goals and steps, progress made, barriers encountered, needed Service Coordination Plan changes, and necessary resources to support the plan. A quarterly OHIO CANS assessment must be included.

In-Home Services

Community Team is committed to keeping families together whenever possible, as long as safety is maintained for all family members. Developing specific services to meet the family's needs are encouraged. Community Team realizes that maintaining children in the home may be as costly as placement, but may be more beneficial for all involved.

Clinical Direction

If a team is having difficulties setting goals, defining steps to reach those goals, experiencing communication difficulties, unable to arrive at consensus, or cannot move past barriers, the team should contact the Community Team Administrative Coordinator or Success Coordinator. A team may ask to participate in clinical discussion, known as "Triage", held at noon on the 1st Thursday of the month. If an urgent need arises, please contact the Community Team Administrative Coordinator.

Placement Needs

If a team feels that a child is a risk to himself or the community, and all in-home and in-county services have been exhausted, the team should consider a placement plan that includes: an explanation of why placement is needed; the goals and outcomes that placement will accomplish to reduce risk; how goals and outcomes will be accomplished; the costs involved with placement and how they will be paid; a description of child and family involvement; the impact and concerns for other children; services for the family during placement; after-care plans and long-range goals. The Success Coordinator **MUST** be included in placement

planning with the Family Team prior to the request for funding. All placements should be in the least restrictive environment possible. Kinship placements should always be considered.

Family involvement is mandatory. All families need to stay involved with the care of their children in whatever way a team can keep that connection, including financial responsibility and custody.

Parents/legal guardians who have active cases with the Community Team are required to participate, to the extent they can afford, in the financial support of the Family Team Plan developed by their individual Family Team. Community Team can provide funding assistance to multi-need children and their families with a demonstrated need for special services when families are willing to participate in the planning for positive outcomes.

Prior to coming to Community Team to request funds for placement, the Success Coordinator must review the Community Team Service Coordination Plan with the Family and Team, including the parents/legal guardians.

Transition to Adult Services

When a team is working with a family where children who are 16 years or older are receiving services from the child caring system, Community Team requests that the team contact and begin working with the adult system and the service providers who will be continuing services after the child becomes an adult. Transition planning will assure continuing services and may be helpful in getting different services in place early on as some adult services may have a waiting list. Also, some families and children may need a longer period of time to adjust to new service providers.

Closing Evaluation

At the close of a case, the Administrative Coordinator will send the family a service delivery evaluation after the close of the case. Information may be used to document outcomes of the process and/or make adjustments to the Community Team process.

Funding Streams

FCFC receives different funding streams each fiscal year. The guidelines that FCFC receives for each funding stream will be reviewed by the FCFC Coordinator and the Community Team Administrative Coordinator at the beginning of each fiscal year. After this review, all available funding streams and their guidelines will also be reviewed by FCFC and Community Team representatives to determine how these funding streams can be accessed by families as well as developing a budget for each fiscal year.

When Family Teams meet, they should discuss the needs of the family as identified on the Service Coordination Plan. This discussion should include input from all members of the team about what resources are available within each member's agency or within the community to cover any costs for the needed services. If resources are available within the community or each member's agency to address the family's need, then the team will decide what funding source to use for which need. When all resources are exhausted and a need still exists on the Service Coordination Plan, the Family Team will need to contact the Community Team Administrative Coordinator regarding funding options. Depending on the

fiscal year budget and accessibility, different funding resources may be available.

There may be additional administrative forms required to secure Community Team funding, e.g., forms for Provider Waivers for Services, and Payment.

Training Opportunities

Community Team will strive to offer training annually to FCFC agencies, Community Team agencies, families and other service providers. Each agency member can contact its Community Team representative or the Community Team Administrative Coordinator for training related to a specific issue or need. Informal training for individualized agencies and families regarding Family Teams and Community Team is always available.

Dispute Resolution Process: Family and Children First Council (FCFC) and Community Team

While FCFC's goal is to move from cooperation and coordination to collaboration and integration, Knox County recognizes the need to provide an arena for resolving issues that arise concerning the delivery of services for a child and family. FCFC's vision of changing the service delivery model is a process that will take time and commitment from all service agencies and each staff person. Even with operational guidelines and commitment to this process, issues will arise. These issues may be concerns of the family and child or of the providing agencies regarding the designated family service plan or provider responsibility for the service plan. Whether the disputes for service delivery are between family and provider, family and service plan, or provider to provider, Knox County's dispute resolution process will be driven by the following guidelines:

1. The process will be as user friendly as possible, providing the right to be heard and notice given to all parties.
2. The availability of a dispute resolution process will be explained to a family and child (when age appropriate). At the time of the initial entry into the multi-agency service coordination system, the family will be informed of the Dispute Resolution process both verbally and in writing.
3. The child and family will continue to receive necessary services while a dispute is being resolved. Services will not be denied a child or family that would place a child at risk.
4. This dispute resolution format will be used by all committees and groups under Council's supervision.

Informal Steps

When a concern arises, the Family Team Service Coordinator will ask Community Team to review the matter and give assistance to the team in resolving the concern before it becomes a dispute. Community Team may consult with or use FCFC, if necessary. The Family Team Service Coordinator is responsible for notifying all parties of the time and place of any meetings. If the Community Team cannot resolve the concern, the Formal Dispute Resolution Process will be used. The Family Team Service Coordinator will request a mediator and set up the necessary meeting.

Formal Steps

Knox County will employ a two-step formal dispute resolution process for those occasions when a family and team members cannot reach consensus on service delivery, having used the informal steps. The entire process from the date of the formal dispute to a final decision by the Juvenile Judge should take no more than thirty (30) days. Services to the child and family will continue during dispute resolution.

The traditional mediation process will be utilized for the first phase of the dispute resolution process. Trained neutral mediators from the local BAR Association and appropriately trained community volunteers will facilitate this phase of the process.

The second step will be a binding hearing before the Juvenile Court Judge. If Juvenile Court or Juvenile Probation is a party to the dispute, then the Knox County Juvenile Court Judge will recuse himself/herself and another judge will be requested. The Family Team Service Coordinator will provide all related documentation, including assessment and service plan information and background of the dispute and its resolution to the mediator, Community Team Administrative Coordinator, and FCFC (via the FCFC Coordinator) and (if necessary) the Juvenile Court Judge.

Non-Emergency Dispute: When a non-emergency dispute arises, situations where there is not imminent risk for the child, the Family Team Service Coordinator will request a mediator and be responsible for notifying all parties of the time and place of the mediation session. All interested parties will be allowed to submit relevant materials to the mediator/Juvenile Court Judge. In non-emergency disputes, the goal will be to have the mediation session within fourteen (14) days of the dispute. If the mediation fails, the case will be presented to the Juvenile Court within seven (7) days of the failed mediation.

Emergency Dispute: An emergency dispute situation is defined as one involving significant risk to the child or other persons who are to be addressed by the proposed comprehensive family service plan. In emergency dispute cases, the process is same except as non-emergency disputes, but the mediation session should occur within seven (7) days of the dispute. If the mediation fails, the case will be presented to the Juvenile Court within seven (7) days of the failed mediation session.

In cases that involve Help Me Grow/Early Intervention disputes, the process is contained in the following link:

<http://www.helpmegrow.ohio.gov/~media/HelpMeGrow/ASSETS/Files/HMG%20Resources/Brochures/Parents%20rights%20EI>.

Appendix A

Establishing Family Teams for Community Team Support

When should a Family Team Form?

Early identification of multi-needs in children age 0 through 21 and referral to the Family Team process can be very helpful to children and families to: 1) divert the child from Juvenile Court; 2) reduce the risk of placement for the child; and 3) comprehensively coordinate effective and unique services to the family.

A Family Team should be considered when:

1. There are several problem areas for the family and it is difficult to coordinate comprehensive services among all the necessary agencies;
2. It is difficult to have timely and clear communication among the involved agencies or family members;
3. The family self-refers and/or requests that all providers meet together;
4. A child is at risk of placement or has been placed in an out of home care setting. This includes hospitalization, detention, foster care, and residential treatment. In this instance, the Common Intake Screening and OHIO CANS (Child and Adolescent Needs and Strengths) assessment needs to be completed and a Family Team will be initiated within 10 days.

Accessing Support

All families in Knox County with multi-need children aged 0 through 21 may use the multi-disciplinary team approach to service coordination. At this time, Knox County does not offer High Fidelity Wraparound. Information about Family and Children First Council and Family Teams is available on the Ohio Family and Children First website.

When children are eligible for Early Intervention services as well as Community Team Service Coordination, the Early Intervention Service Coordinator will coordinate the appropriate services in assure compliance with the O.R.C. 5123.02. The Community Team Service Coordinator for the family team will provide support and assistance as appropriate for the family's IFSP/Early Intervention Plan.

To access Family Teams in Knox County:

- Families may self-refer by:
 - Talking with a service provider.
 - Calling the Success Coordinator who will contact them within five (5) days of their call to arrange a meeting to start the referral process
 - Contacting a Community Team representative
- Service providers may also initiate the Family Team process with a family.
- Any representative from Juvenile Court can begin the referral process on their own, they can contact their Community Team representative or the Success Coordinator to begin the referral process. Referrals from Juvenile Court or family members can

benefit those families with children who are alleged to be unruly and should also be considered to help divert children from entering into the Juvenile Court system
For current contact information for the Community Team Administrative Coordinator, Success Coordinator or Team representatives, please refer to the Knox County Family and Children First website:

<https://www.uwayknox.org/knox-county-family-and-children-first-council>

Common Intake Screening and CANS Assessment

For early identification of families with multiple problems, Knox County FCFC requires that the Common Intake Screening and OHIO CANS (Child and Adolescent Need and Strengths) assessment form be completed with all families who appear to have children age 0 through 21 with multiple needs. The Common Intake Screening portion should be completed for the family as a whole. The OHIO CANS should be completed for the family and/or the identified individual who has a FCFC Service Coordination Plan. All should be completed with the family by a professional and is designed to identify if the family:

1. Needs to be referred to other agencies
2. Is already using services from multiple agencies in the community
3. If a multi-disciplinary service coordination team might be helpful.

The Common Intake Screening and OHIO CANS assessment are intended to determine what the family sees as their strengths, what they would like help with, and which agencies they are working with in an attempt to gain a comprehensive understanding of the family's situation. Information to capture on this form could include if any of the following have been completed: medical and psychological reports, school records, social histories, genograms (three generation family diagram), social network maps, ecomaps, legal actions, family violence issues, timeframes and reasons for involvement with various disciplines. If it is felt that no Family Team is needed, then the agencies will continue coordinating comprehensive services on an informal basis. Completing this screening tool will help assure you have a complete picture of the family and give direction as to what areas may need a more in-depth assessment so appropriate services can be offered. This tool also addresses strengths and needs from the family's point of view.

Initiating the Family Team Process

Once a family member or service provider has identified that there is a need to form a Family Team the next step is to coordinate the Initial Family Team Meeting. Any individual can coordinate an initial Family Team meeting. The Success Coordinator or Community Team Coordinator can assist in the initial process upon request of a family member or a service provider.

At least one team member will meet with the family to explain the Family Team process including:

- The importance of family involvement
- The family's ability to call meetings
- The dispute resolution process
- Confidentiality – Releases of Information for all family members should be filled out and signed (see below)

- Deciding who should be invited to sit on the team; this can be other service providers as well as other family members or supportive people in the family's life. Any team member must be approved by the family
- Coordinate the first meeting date, time and location
- The family has the right to have a family advocate, mentor or support person of their choice at any Family Team meeting

One team member should notify all identified members of the team meeting; this can be done by phone, e-mail, or regular postal mail. The Community Team recommends adjusting the time and place of the meetings to accommodate the family.

Confidentiality / Consent for Release of Information

To ensure that Confidentiality is maintained for all family members a comprehensive Release of Information has been developed based on the lead and sample of Ohio Department Heads and approved by members of the Community Team and Knox County Family and Children First Council. All personal family and health care information shared during Family Team meetings or contained in the Family Team plan should be considered confidential and remain protected by the members of the Family Team. The Consent for Release of Information form and the Confidentiality Form for Family Team Members must be re-authorized every 180 days. Once these forms are completed, workers will be able to share information from each of the disciplines. Initials from the client(s) are captured in the box on top as well as all lines at the bottom of the release.

First Team Meeting

Agenda and Tasks for the first meeting should include, but are not limited to the following:

- Introduction of all team members present; if there are others who were invited, but not able to attend, this should also be shared with the team.
- Each member (other than family members) should complete and review an Individual Agency Intake form; all members should be given an opportunity to share their discipline's information.
- All members, including the family, must sign the Confidentiality Form for Family Team Members
- Assign team roles – there are 5; one person may serve more than one role depending on the size of the team:
 - *Family Member--Child and Parent/Legal Guardian*
 - Be open and honest with team members
 - Attend all family team meetings (if unable to attend, notify Service coordinator)
 - Help identify team members
 - Participate in case planning and review of services
 - Communicate to the family team any barriers for services
 - *Family Team Service Coordinator*
 - Serves as a liaison with the family and is the communications center for other team members and team business. The Service Coordinator should be designated and/or approved by the family. The Service Coordinator will also:
 - facilitate meetings *and* team communication

- summarize discussions and promote consensus building
- receive all information on changes, crises, etc.
- help team develop Family Team Plans and evaluate progress and/or barriers
- update the Family Team Plan and capture signatures from members
- make recommendations for changes in team membership
- help team decide when assistance from Community Team might be needed
- delegate other roles to team members when needed such as Administrative Role, Presenter Role and Team Member roles
- Community Team Success Coordinator may function as the initial Service Coordinator to assist in identifying (1) the Family Team members and (2) the Family Team Service Coordinator.
- *Family Team Administrative Coordinator*
 - is the gatekeeper for many of the forms and paperwork. This role is important because the forms provide valuable clinical guidance to the Family Team. Tracking the goals and progress of the family is vital to understanding what is working for the family and what barriers exist. Tasks of this role include:
 - schedule dates, times and location of meetings; provide notice to all members
 - assure a valid Release of Information for each family member is completed every 180 days
 - keep Family Team Notes, including team assignments, and distribute to all team members
 - make sure all members, including those who may enter into the team at a later date, receive a copy of Release of Information, current case plan and the intake screening and CANS assessment
 - ensure all new members sign the Confidentiality for Family Team Members form.
- *Presenter*
 - is the liaison between the Family Team and the Community Team. They provide valuable information and communication to Community Team members as well as the Family Team about the clinical needs, Family Team progress and utilization of funding. Tasks for this role include:
 - oversee interaction with Community Team acting as the liaison between Family Team and Community Team
 - present reviews to Community Team
 - complete an updated case plan
 - ensure releases are current and given to Community Team
 - complete the Community Team presentation form
- *Team Member*
 - can volunteer or be delegated tasks by any of those roles or other tasks as needed by the Family Team. Examples of these tasks may include:
 - provide a service to the family and gives feedback to the team on family's progress both verbally and/or in writing if requested.

- research needed information for team (placement options, treatment services, community resources etc.)
 - provide input into the Family Team Plan and related discussions with the Family Team
 - attend all family team meetings as requested
 - assist other roles as needed
 - any other task designated by the Family Team
- Review the Common Intact Screening and OHIO CANS assessment and provide a copy of this along with a copy of the Release of Information Sheets to all members.
- Discuss why the team was formed and develop tasks and goals for the next meeting. Having a full understanding of the family's past and present strengths and concerns, the team and family can then choose the areas to work on and begin developing a Family Team Plan that prioritizes and coordinates services.

Family Team Plans

If a family has multiple problems, the multi-agency Family Team Plan can help capture and prioritize needs, tasks and goals for the family. The Family Team Plan addresses the same areas as the Common Intake Screening and OHIO CANS assessment and should be used in conjunction with each other. All assistance and services should be provided in the least restrictive environment. The plan needs to be the consensus of all the team members, especially family members. There may be several problems or needs that will need to be prioritized according to safe and primary concerns. Most families can only work on two or three issues at any one time; if the family is particularly vulnerable they may only be able to handle one at a time. Sometimes it will be the primary, root need at the top of the list; other times accomplishing a lesser need may reduce stress and allow the family to move forward more easily.

The Family Team should also consider possible crisis situations and develop a crisis or secondary plan.

Ongoing Work, Documentation and Family Team Plan Evaluation

Many of the problems in multiple need families are long-term. Social service work requires good documentation with a clear picture of problem areas, goals to address these areas, rationale for decisions and services, as well as recognizing family strengths, supports and barriers. Documentation can show current efforts and can be helpful in the future to understand and plan services. Once goals and plans are developed the Family Team Plan needs to be reviewed at each family team meeting to assess barriers and/or progress. In addition, a family can request a review of the plan at any time by contacting the Service Coordinator or the Success Coordinator. If there are barriers, determine what changes to the plan would eliminate those barriers. If there is progress, celebrate the goals completed. Only add other goals as needed.

If the established goal has not been attained in a reasonable length of time, the team should review the goal and determine what barriers are preventing progress. The team should then develop a plan to remove the barriers, or if the barrier is not removable, consider changing the goal. Often when goals are not met, it is because it is the wrong goal for the family or its members. Sometimes family members cannot verbalize their wishes or goals, but their

behavior may provide clarification. Other times it may be the goal they want, but may not be attainable – ever or in a timely fashion.

Things for Family Team to consider

It is encouraged that family members be participating members of the Family Team and approve of the team lead. Hopefully services are being provided “*with*” the family, and not “*to*” the family. However, there are times and situations when family members may not participate on the team, but the team needs to continue to meet (i.e., if there are safety issues or a major crisis). Teams may add or delete members as services and family needs change. Teams must be cognizant of the number of providers on each team and how this impacts the family and service delivery. Be sure to include all service providers the family is working with in some manner. If the Family Team is rather large, a team decision could be that a core group of providers and the family meet as a team and other providers are communicating with the Service Coordinator and family members either via email, letter, phone or other communication.

Families with multiple problems and/or in crisis often isolate each problem or issue separately. They may discuss their unruly teen’s behavior with juvenile probation, but mention nothing of another family members’ depression or the domestic violence that occurred in the family last week. None of the disciplines alone can adequately understand or provide services, if the family situation is not fully understood. Communication becomes a key issue, both at meetings and between meetings. All members need to be kept informed as much as possible. The Service Coordinator should be used as the point of contact for all information and will see that it is shared among the members.

In discussing concerns and developing goals and service coordination plans, all members need to be heard and a consensus as to how to proceed needs to be reached by the team.

Key Responsibilities for Family Teams

Family Team Members will:

- Understand their right to have a family advocate (e.g., through Parent Advocacy Connections), mentor or support person of their choice at any Family Team meeting
- come prepared for the meetings, allowing adequate time
- understand that your part in the multi-disciplinary team is very important so attendance is key; if you can’t attend, give your information to another member
- help the team understand a comprehensive summary of the family’s situation, past and present, from your agency’s point of reference
- share your discipline’s requirements and limits as they pertain to the family
- develop an understanding of the requirements and limits other disciplines’ as they pertain to the family
- practice open communication and consensus building
- continually evaluate family case goals and plans and share concerns and considerations
- communicate all changes in the case as soon as possible to the Service Coordinator and/or all team members

- request assistance from Community Team as needed

Family Teams will:

- review and understand the comprehensive context of the family's situation (some of this information might need to be shared without the family present)
- communicate openly, sharing problems and concerns with all members
- consider services from a multi-agency perspective and develop services that best meet the needs of the family and all agencies involved
- develop a comprehensive coordinated Family Team plan using life domains
- develop safety and crisis plans
- develop a long-range goal
- help maintain coordinated, comprehensive services
- ensure that all assistance and services are provided in the least restrictive environment
- keep team meeting notes and assignments
- provide continuous evaluation and amend the comprehensive service plan as needed
- assign and track services and follow-up on assignments
 - choose a different service coordinator whenever necessary
 - for any child 16 or older, consider independent living skills and use the adult services transition team when needed
- review the case quarterly with Community Team, if applicable
- adjust team membership and meetings (day, time, location), as needed to accommodate the family
- request help/approval from Community Team *if*:
 - team is having difficulty developing or maintaining a comprehensive plan
 - available resources or finances are not adequate to meet family needs for in-home services
 - out-of-home placement of a child is imminent or has already happened
 - there is a dispute between family and provider or between providers

Appendix B

Knox County Family and Children First Council Forms

- Common Intake Screening Form
- Consent for Release of Information
- Confidentiality Form for Family Team Members
- Community Team Service Coordination Plan

These forms are available in an electronic format. Please contact the Community Team Administrative Coordinator or the Community Team Success Coordinator for these forms. For current contact information for the Community Team Administrative Coordinator, Success Coordinator or Team representatives, please refer to Knox County Family and Children First website:

<https://www.uwayknox.org/knox-county-family-and-children-first-council>