

Date: Click or tap to enter a date. **Attendees:** Click or tap here to enter text.

What is the primary reason for consultation today?

What brings you to the consult? What do you want consultation around? (e.g., having a difficult time during family contact, challenges with the steps in the routine, review for recommendation on level change, difficult family dynamic that needs solution building)

Information about the family and the main concerns that impact family contact.

Who are the people involved? What does the facilitator need to pay attention to during family contact that is connected to the initial concerns? What are the special considerations, if any (e.g., domestic violence, sexual abuse, parent who is incarcerated)?

Family Contact Plan:

Are there any immediate safety concerns the facilitator needs to be aware of that impact family contact? (e.g., domestic violence concerns between the parents that prevent them from being alone together)

What is the focus of family contact? What is supporting the child or youth's long-term well-being? (e.g., co-parenting in a way that supports child or youth attachment to both parents)

Basic information about the plan (e.g., goals, barriers, family contact phase, frequency, location, current supervision level, agency referral information)

Impact of Trauma:

What does the family contact facilitator need to be aware of about the parent's trauma history that impacts their parenting? How does it impact successful family contact? (e.g., historical trauma, intergenerational trauma, ambiguous loss, Adverse Childhood Experiences, child/youth maltreatment trauma)

Before Family Contact Event:

How are the check-ins with the parent on planning for family contact going? What are parent's insights and strengths? What are the challenges? What are the system barriers?

During Family Contact -

Fidelity to Routine:

What is working well during family contact? What can be improved upon? Are each of the steps being followed, including greetings, circle time, resiliency activity, meal/snack, cleanup, goodbye? (See diagram on page 2)

Child or Youth View and Hopes:

What is the child or youth point of view? What are they hoping for? What are the child or youth behaviors or characteristics? (e.g., crying when parent picks them up, child/youth on the phone excessively, strong attachment to parent during contact, child/youth developmental needs, social/emotional considerations, child or youth resilience)

Suggestions for Healing-Focused and Culturally Centered Action Steps:

What specific and concrete observations demonstrate the need for support and coaching? (e.g., family dynamic issues that need to be explored more for successful contact, objective safety concerns, opportunities for skill building). What barriers are there to implementing these action steps? (e.g., agency-level barriers, need for approval from caseworker, clarifying information).

Supports and Services Needed Outside Family Contact:

What parent focus areas might be influencing family services and supports that are not in the purview of family contact? What complicating factors are present that must be addressed outside of family contact? (e.g., mental health services, substance use treatment, child/youth mental health services)

Cultural and Intersectionality Considerations:

What cultural worldviews and family identities influence parenting? (e.g., ICWA status, family traditions, family and community values, gender identity, racial/ethnic identity, sexual orientation, results of identity wheel)

Relationship Dynamics Impacting Family Contact:

What significant relationships influence family contact? How do these relationships promote or hinder meaningful, healthy, culturally centered family contact? (e.g., the degree to which the foster care provider partners with the parent/s; the relationships between family members; contention between parents, if any)

Strengths/Protective Factors:

What protective factors influence parenting including parental resilience, social connections, concrete supports in times of need, knowledge of parenting & child development, children's social & emotional competence?

What strengths are present? (e.g., the presence of each of the protective factors, how strengths connect to and support these protective factors, the coping skills and strategies helpers have implemented or used over time)

Parent View and Hopes:

What is the parent's point of view? What are they hoping for? What are the parent's behaviors or characteristics? (e.g., parent on the phone excessively, parent's developmental needs, parent's point in their own substance use recovery, degree of attachment to the child or youth, social/emotional considerations, their point of view on family dynamics, parent resilience)

After Family Contact Event:







How are the check-ins with the parent going after the family contact event? How have the areas of celebration and growth been approached and what was the parent's response? What challenges, if any, are there to holding post-family contact check-ins? What are the system barriers?

Other Considerations to Support Family Contact:

What needs require additional exploration or clarification to better support family contact? Who holds this information?

Next Steps:

Has the reason for the case consultation been addressed? What is the resolution? Who will do what by when to implement the decisions made in the consultation? What are the specific actions to be taken before, during, or after family contact events? How often and to what degree?

-  Greetings that are warm and positive
-  Family circle time to catch up on recent experiences and revisit family time goals
-  Resiliency activity that supports the family goals and the developmental needs
-  Meal or snack (when appropriate)
-  Family clean-up time to work together on tidying up and caring for items in the room
-  Warm supportive goodbye between parent and child that includes when they will see each other next