



**Policy Attachment:**

<b>Subject:</b>	<b>CFTM Guidelines for Identifying a Permanent Family</b>
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**Additional Information:**

When a child/youth in custody and/or full guardianship, with a goal of adoption and/or PPLA, has no family capable or willing to commit to the level of permanence needed to allow the child/youth to reach their permanency goal, a Special Called Child and Family Team meeting shall be convened within thirty days to identify a permanent family who can meet the lifelong needs, support the best interest, and provide permanency through adoption or guardianship for the child/youth and at least every ninety days thereafter until a family is identified. This team should include all of the previous child and family team members and the following additional members, if they have not been subsequently included.

**A. Participants and Responsibilities:**

1. Team Chairperson

The Team Chairperson will be the Permanency Specialist and will have the following responsibilities:

- a) Assists FSW in completion of pre-placement summary to ensure child's needs/strengths are fully documented.
- b) Assists team in identifying and/or clarifying adoption specific issues that may affect permanency such as loss and grief, sibling placement, bonding, etc...
- c) Facilitates the Special Called CFTM to ensure the group maintains focus on the child/youth's strengths and needs.
- d) Remains objective about the information presented regarding the potential adoptive families.
- e) Secures and notifies team members of the meeting time and location.
- f) Ensure all AdoptUsKids (AUK) inquiries have been reviewed prior to the CFTM, and home studies from potential AUK families are available for the CFTM, when indicated.
- g) Ensures that each team member obtains pertinent but non-identifying information regarding potential families.
- h) Articulates the role of each team member and makes certain that each member is adequately represented in the discussion.
- i) Moves the team through the decision-making framework and guides the group toward consensus.
- j) Ensures that federal guidelines are taken into consideration such as ICWA, MEPA, IEPA, ASFA, and legal risk placement.
- k) Ascertain that pre-placement summary and resource home studies are properly secured and/or shredded after the CFTM.

2. Child/Youth (by proxy)

Children/youth shall have a voice regarding their desires for a permanent family; however, they shall not be made responsible for making adult decisions. Children/youth in need of a permanent placement shall be represented by proxy through any or all of the following methods that may be applicable to their case:

- a) The child/youth FSW

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- b) The child/youth permanency specialist
- c) Applicable sections of the child/children's life book
- d) The Guardian Ad Litem
- e) CASA
- f) Child's Resource Parent

\* Older youth might actively be engaged at some level in identifying a permanent family, such as reviewing family profiles/narratives.

3. Family Service Worker

The child/youth's FSW will have the following responsibilities:

- a) Ensures that each team member has a copy of the child's pre-placement summary completely describing the child's full life history (full disclosure) to include current strength/needs.
- b) Brings the child's life book and/or current pictures of the child.
- c) If the child/youth is served by a private contract agency, then the private agency staff and the DCS FSW will share responsibility for the aforementioned tasks.

4) Placement Support Division Worker

The Placement Support Worker (DCS and provider agency, if applicable) will have the following responsibility:

- ◆ Ensure that the Team Chairperson receives a copy of all applicable home studies from all available resources to include both DCS and provider homes and other pertinent information on all potential families and be prepared to provide feedback regarding each family's strengths as applicable to the needs of the child.

5) Child/Youth's Resource Parent (If Applicable)

The Resource Parent will have the following responsibility:

- ◆ Describe daily strengths/needs of the child as related to parenting to include school and/or therapeutic issues and assist the team in identifying issues which may affect permanency.

6) Health Unit Representative

The Health Unit Representative will have the following responsibility:

- ◆ Assist team in identifying and/or clarifying clinical and/or medical issues that may affect permanency and assist the team in identifying what services will be needed to support permanency.

7) Others:

It may be necessary to include other participants based on the needs and best interest of the child/youth. It would be appropriate to have input from supportive members of the child/youth's Child and Family Team. Additional, potential Child and Family Team members may include experienced adoptive parents and/or a resource parent advocate.

**B. Preparation for the Permanency CFTM:**

1. The primary goal of the Special Called CFTM is to identify the family whose strengths best match the child's needs. Therefore, the child/youth's pre-placement summary must be complete and available for review by the team.

2. A child/youth that will be in need of a Special Called CFTM should have had all other options for permanence thoroughly explored and exhausted including all family connections, prior attachments/significant relationships, and community options. When there appears to be no possibility of reaching permanence through adoption with a family familiar to the child, the case manager and the permanency specialist must review **at least** the following information prior to a request for the Special Called CFTM:
  - a.) the barriers to an adoptive placement with the current resource family.
  - b) the results of past attempts to place the child/youth with familiar family.
  - c) determine whether the conditions that prevented or disrupted the child/youth's placement with the familiar family are still present.
  - d) the current availability of potential adoptive resources identified through recruitment of a prior attachment/ significant relationship and adoption exchange searches.
3. Some children who need an adoptive placement resource identified may be placed at legal risk. The DCS legal department must be consulted as to the child/youth's current legal status.
4. The final decisions regarding placement of siblings for the purpose of adoption must be made during the Special Called CFTM and documented by the CFTM Summary form.

### **C. Decision Making**

1. The FSW will present the child to the Special Called CFTM by thoroughly discussing the child's strengths/needs and give detailed reasons why the child does not have a current permanent placement.
2. The Team Chairperson will present each family in a non-identifying manner through the facilitation process and document each family's strengths/needs as they relate to the child's strengths/needs as discussed by the team.
3. The Placement Support Worker (DCS and provider agency, if applicable) will ensure the family's perspective is presented by articulating how the family would meet the child's specific needs.
4. Other team members will provide any other thoughts/insights to the discussion regarding the child and/or the family.
5. The team will come to a consensus in determining, no more than the top 3 families that would best meet the child's needs.
6. The Special Called CFTM chairperson will document results of the meeting on the CFTM Summary form.

### **D. Reconvening the Team**

1. A home visit to chosen potential families will be completed by the FSW, Permanency Specialist and/or Team Leader to further discuss the family's willingness or desire to provide permanency through adoption or guardianship. Any changes in the family's current parenting strengths/needs will be discussed as well. The home visit must also include a brief discussion of the child's strengths and needs.
2. For families outside of Tennessee, other methods might be used to gain additional information about the family and share information about the child. Such methods might include, but are not limited to video recordings submitted by the family and "skype".

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3. A recorder must be identified who can observe the family's interactions with each other, their responses to questions, and any nonverbal cues noted.
4. After all home visits are made, the FSW and home visit attendees will reconvene the Special Called CFTM and discuss the interviews, observations and provide overall feedback of the home visits.
5. After all feedback has been given and any changes of the family or the child are documented, the team will make a final decision regarding which family would best meet the child's needs.
6. The Special Called CFTM will review the home visit information for the identified families. The team will determine the family most suitable to meeting the needs of the child. The family will be noted as the identified adoptive placement. An additional family(if one has been identified during the original Special Called CFTM) that is also capable of meeting the child's needs, may be chosen as a secondary placement option if the identified adoption/guardianship family declines placement of the child/youth in their home.

**E. Presentation**

1. The FSW, Permanency Specialist and/or Team Leader shall notify the families of the team decision.
2. The FSW, Permanency Specialist and/or Team Leader will present the child to the pre-adoptive family, ensuring full disclosure. Information presented should be non-identifying, and confidentiality applies. If known, the child's full disclosure should include:
  - a) Child's complete medical information (includes genetic links to diseases or disorders and prenatal care information)
  - b) Mental health information
  - c) Child development information
  - d) Psychological tests/evaluations
  - e) Education records
  - f) Social information concerning the child
  - g) Immediate birth family and other birth relative information back several generations
3. The family will review the child's life book and all documentation regarding the child.
4. The family will provide the FSW with completed homework assignments contained in the presentation packet.
5. After the family has notified the FSW, Permanency Specialist and/or Team Leader of their decision to proceed with adoption placement, a CFTM to include the newly identified family will reconvene to determine a transition plan. The transition plan must include current placement strengths/weaknesses, educational issues, and a presentation of the child to the family through pictures, letters, etc...
6. Once the child is ready to permanently be placed in the adoptive home, the protocol for making an adoptive placement should be followed.

**F. Documenting the Permanency CFTM**

**Work Aid: DOCUMENTING A PERMANENCY CFTM**

1. Using Form [CS-0747. Child and Family Team Meeting Summary](#), document the CFTM as follows:
  - a) Situation that prompted CFTM: This section will include issues regarding why an adoptive placement is being identified such as details if a disruption whether it was due to the child's behaviors and the current family's inability to parent the child's specific needs, etc. .

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- b) Strengths/Needs or Concerns: This section will be two fold. First, a copy of the child's pre-placement will be reviewed and the child's strengths/needs will be discussed so the team members understand what type of parenting and environment the child needs. Secondly, each family's strengths/concerns are discussed separately. For example, the strengths/concerns of the Doe family are thoroughly discussed as they relate to the child's strengths/needs prior to moving on to the next family and documented in this section.
- c) Meeting Summary: After discussing all of the families' strengths/concerns as they relate to the parenting and environment for the child, the team determines which families are not a match as a permanency option due to obvious safety and/or risk concerns. For example, the child can not be placed with younger children and this family has younger children in the home, etc...
- d) Decisions Made: After all of the families have been considered, the team will choose no more than 3 families in which to schedule home visits. A date to reconvene the team is scheduled to discuss any issues, concerns or answers gathered at the home visits. If the team has reconvened, the team documents the family that can best meet the all of the child's needs in this section as well.
- e) Transition Planning for the next three months: This actually needs to reflect on going transition plans but will be reviewed after every quarterly CFTM. Depending on the child's and family's needs, the adoptive visits may be more or less than three months. This timeframe is to be determined by the team and documented in this section along with the specific steps to be taken. For example, will the visits start as supervised or unsupervised, with or without the current family, who is transporting, if multiple siblings that are currently placed separately but moving to this placement together, etc..
- f) Action Steps: Any action steps pertaining to the decisions made by the team, who is responsible for each action step, and the timeframe for completion are to be documented here.