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| State_Seal3DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES (DCYF)**PARENTS INFORMATION SHEET****FOR SHARED PLANNING MEETINGS AND STAFFINGS** |
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| PARENT’S NAME | DATE |
| Shared Planning Meetings give you and DCYF the opportunity to share information, plan and make decisions to support the safety, permanency and well-being of your child(ren). Shared Planning Meetings are scheduled at regular intervals during the time our agency is working with your family. If your child has been placed out of your home, the Shared Planning Meetings may occur at 72 hours from the removal, within 30 days of removal, within 180 days of removal, within 9 to 11 months of removal and every 12 months thereafter. **You and/or your attorney may request a conference or shared planning meeting at any point in the dependency process**. The following staffings may be incorporated in the Shared Planning Meetings. Participants in Shared Planning Meetings may include: you, your children, other family members, friends, caregivers, Tribes, Members of the Local Indian Child Welfare Advisory Committee (LICWAC), community members, service providers, Court Appointed Special Advocates (CASA)/Guardian ad Litem (GAL), Attorneys, and others identified by you to attend. (Below is a list of staffings that can be combined into a Shared Planning Meeting). |
| 1. **Case Conference** (RCW 13.34.067) can be requested by you and/or your attorney during a Dependency proceeding. The purpose is to develop a written service agreement outlining services to be provided to you and addresses findings at the shelter care hearing.
2. **Child and Family Team**: A Child and Family Team are often developed for youth needing an intensive level of services (Behavior Rehabilitative Services (BRS). The team is individualized to the child and family, composed of natural and systems supports and is an on-going process. You, your child (youth) and your family have a voice in identifying who is a team member.
3. **Family Meeting (RCW 74.13)**: There are different types of family meetings, all of which are held to establish a plan that provides for the safety, permanency and well-being needs of the child by inviting family members and others identified by the family in the planning process.
4. **Child, Health and Education Tracking (RCW 74.14A.050):** meetings are held to identify, address and document the physical health, developmental emotional/behavioral, education and connections for a child, and identify services to support healthy development.
5. **Foster Care Assessment Program Key Person Staffing** Is held to organize and mobilize key persons in the child’s life to review the child’s needs and initiate necessary actions to address permanency, mental health, and physical health issues.
6. **Local Indian Child Welfare Advisory Committee (LICWAC) (CA policy 99-02 and 00-01 and RCW 74.13.080)** staffings are held for Native American children when the child’s tribe is not available for consultation and case plan development.
7. **Multiple Placement Staffings** are held to develop an intensive case plan to improve placement stability at the point the child experiences three or more placements.
8. **Multidisciplinary Staffing for Youth Exiting Care (Formerly No Wrong Door Staffing and Consolidated Services Initiative (CSI)** are held 6 months prior to a child exiting foster care due to “aging out” to participate in shared planning with Economic Services Administration’s Community Service Office (CSO) staff in order to meet the needs of a child aging out of foster care.
9. **Permanency or Prognostic Staffings** are designed to develop and assess permanent plans for the child. A Permanency or Prognostic Staffing can be held at any time during the course of a dependency case; but must be held prior to a Permanency Review Hearing.
10. **Tribal Staffings** are held anytime the Tribe requests a staffing to ensure Tribal participation in all aspects of case planning and to ensure the ICWA (Indian Child Welfare Act) is followed in identified cases.
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| PARENT SIGNATURE | DATE |
| PARENT SIGNATURE | DATE |
| CASE WORKERS SIGNATURE | TELEPHONE NUMBER | DATE |

Original to: CASE Worker - Copy to: Parent