What is Family Group Decision Making (FGDM)?

FGDM is a culturally sensitive decisionmaking process that brings together the family circle with CAS and other service providers to develop a plan that meets the need for safety and well being of the child.

What is the Purpose of FGDM?

To give the family, relatives and friends a voice in the decision-making process and to develop a plan to ensure the safety and well being of children who are at significant risk of or in need of protection.

Why use FGDM?

- When the plan is made by the wider family circle there are more strengths, wisdom, experience, knowledge and supports to access and utilize
- FGDM is an approach that encourages collaboration between CAS, the family circle and other service providers
- FGDM is a strengths-based approach that focuses on the capabilities and competencies of the family circle
- FGDM is a planning tool but can facilitate conflict resolution
- FGDM provides an opportunity for the family circle to propose their own plan in response to the worries being identified
- FGDM is now an ADR (Alternative Dispute Resolution) process through the CFSA
- Confidentiality is required and protected by law.

Who is in the Family Circle?

The family circle is made up of relatives, friends and <u>anyone</u> who feels like family and who the family decides is important.

What are the Principles of FGDM?

- Is family driven and family centred
- Family expertise is foremost
- Culture is honored and respected
- Is inclusiveness of both the paternal and maternal sides of a child's family, as long as safety can be ensured
- Family is the primary author of the plan – families are more likely to implement and follow through on plans they have created and that are meaningful to them
- Views children's participation as important so their voices are heard
- Coordinator is impartial, independent and has no role or stake in the case
- Coordinator safeguards the process
- Coordinator prepares everyone
- Coordinator develops safety plans and/or support plans as required
- Barriers to participation are removed whenever possible
- Family participation always outnumbers service providers neutralizing or reducing power imbalances
- Service providers share information in the first part of the day
- Service providers are not involved in private family time, even if requested
- CAS supports the family's plan if it meets bottom lines
- Family's plan is ongoing case plan

How does the FGDM day Work?

Part 1: Welcome & Information Giving

- Introductions and opening ceremony
- Guidelines for respectful discussion
- Support or safety plans are outlined
- Reports by CAS, service providers and others and questions/discussion
- Speaker if requested.

Part 2: Family Private Time

The family group takes whatever time it needs to meet <u>privately</u> to develop the family's plan for the child or children. This is the most important and longest part of the day, so be patient.

Part 3: Review of Plan

- The plan developed by the family group is presented to CAS
- The details of putting the plan into place are discussed and negotiated, if needed
- A time to meet again to review progress may be set
- Closing circle and evaluation

Following FGDM

• The coordinator types and sends everyone a copy of the plan as written by the family group within 10 days.

Role of the Service Provider

If invited as a current service provider:

- Provide a brief report focusing on strengths and concerns; no recommendations
- Use clear, concise non judgmental language
- Take no notes at meeting
- Avoid "overkill" but be honest and transparent about concerns
- Let family know what your agency could provide
- Service providers are NOT involved in family private time but welcome to participate in part 1 and 3 of the day
- Be aware of wanting to "help" family
- Believe in the family's ability to develop their own plan
- Help the family feel empowered by having confidence in them
- Let them know what you can't or can do regarding follow-up or next steps.

If invited as a speaker:

- Should not be involved with the family directly unless exceptional circumstance
- Provide a 15-20 minute overview of concern or issue (e.g., DV, mental health in general, addictions, specific diagnosis or behaviour)
- Provide service information (e.g., referral requirements, alternatives) if able or appropriate
- Answer questions to the best of ability
- State what you can or can't do on behalf of your agency (e.g., wait lists)
- Leave after presentation.

The Service Provider's Report

The service provider report should:

- Be shared with client before meeting
- Be 1-2 pages long, be clear and concise and avoid "overkill"
- State who you are to the family, how long you have been involved and in what capacity
- Highlight the strengths of the family
- Use language that is informal, simple, non-judgmental, accessible and easy for everyone to understand
- Be transparent with the family about your worries for the child and/or family, and clear with why you feel that way
- Provide factual examples whenever possible
- List or bring brochures about any services or resources that the family might find helpful to include in their plan
- Can identify needs but do not make recommendations as that is the family's job when developing their plan for the child
- Thank the family circle for inviting you to participate in their planning day; this respectfully acknowledges the family expertise and sets the stage for relationship building.

Everyone's input and participation is important!!

Thanks to the Toronto FGC Project and CAS of Thunder Bay for permission to use some of their material in this brochure.

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A Guide for Service Providers