

FAMILY GROUP DECISION MAKING

ANNUAL REPORT

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CHILDREN'S AID SOCIETY OF BRANT

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We were all able to communicate our feelings without being judged. We all came to a similar conclusion. I felt the needs of the children were finally heard as to what they want. (Family Member)¹

I. FGDM at Brant CAS

In October 2002, the Children's Aid Society of Brant made a commitment to undertake a new project called Family Group Conferencing (FGC). The project expanded from two days per week in 2002 to three days per week in 2003, and then to five days per week in late 2004. These extensions were indicative of both the success of FGC's in the agency and staff's commitment to the process.

In May 2005, the Coordinator position became a full-time position within the Children's Aid Society of Brant. The Coordinator's office is located off-site in order to protect the coordinator's independence from the child welfare mandate. In June of 2005, the name of the service was changed from Family Group Conference to Family Group Decision Making (FGDM).

The Brant Family Group Decision Making service is in compliance with the CFSA regulations and ADR directive from the Ministry of Children and Youth Services, effective November 30, 2006.

II. FGDM Activity

Highlights from 2008-09

We, as a family, were able to deal with underlying issues that may not have been dealt with if this meeting hadn't taken place. I believe we have set out a clear and good plan as a family to help. (Family Member)

¹ FGDM participant evaluation comment, used with permission.

There were 35 plans² for children were made in 16 FGDM Conferences. These plans included the following:

- 8 plans for children to remain in the care of their parents
- 7 plans for children to return to the care of their parents
- 9 plans for children to be in the care of their extended family
- 3 children were reconnected to their maternal family members through FGDM
- 15 plans to provide parental support/respite
- 12 plans to resolve family conflict
- 3 plans to prevent children from being placed in foster care
- 3 plans to discharge children from foster care

OVERVIEW OF FGDM ACTIVITY

Turned out better than I expected. I did not think an agreement could be reached. I was impressed with the maturity of everyone involved. (Family Member)

This past year, there were 55 intakes to Family Group Decision Making. This is a 25% increase in intakes from the previous fiscal year. Out of this group, 34 intakes proceeded to a referral, which is a 1% increase from the previous fiscal year.

There were 16 FGDM conferences held, resulting in 35 plans for children.

The issues that these families addressed during their FGDM included:

- Drug/alcohol addiction for 7 families
- Chronic neglect for 4 families
- Parent/adolescent conflict for 3 families
- Domestic violence for 1 family
- Transition plan for their child with crown ward status for 1 family

2008-09			
INTAKES	REFERRALS	CONFERENCES	PLANS FOR CHILDREN
55	34	16	35

² Please note that some of the plans are identified more than once in the “highlights”

The FGDM activity between April 1, 2005 and March 30, 2009 is contained in the table below:

2005-09			
INTAKES	REFERRALS	CONFERENCES	PLANS FOR CHILDREN
173	112	84	153

REFERRALS NOT PROCEEDING TO A FGDM

During this past fiscal year, 13/34 (38%) of the referrals did not proceed to a conference. This is lower than the 2004-2009 average of 44% not proceeding to a conference.

Referrals do not proceed to a conference for many reasons. During this fiscal year, the primary reasons were that the family did not see that there was a crisis or decision needing to be made or the family was not interested. It is very encouraging that only 1 referral did not proceed this year due to the family not being able to “live with” the CAS bottom lines. This indicates that families are well aware of the CAS bottom lines in the early stages of the FGDM process.

Since April 1, 2005, the top two reasons for a conference not proceeding are that the family does not see that there is a crisis/decision to be made or the family is not interested. These two reasons account for 56% of the referrals that do not proceed.

CFSA & FGDM

Referrals to FGDM continue to show a clear pattern of the majority being made in the pre-CFSA application period. This was a 12% decrease in referrals with an active CFSA application during this past fiscal year compared to the cumulative trend.

A table with detailing the status of an active CFSA application at the time of referral is below.

2008-09		
Total Referrals	Referrals with active CFSA	Referrals with no active CFSA
34	9 (26%)	25 (74%)

A table with the cumulative experience is below. The trend of a greater proportion of referrals without an active CFSA application than those with an active CFSA application continues to be evident.

2005-09		
Total Referrals	Referrals with active CFSA	Referrals with no active CFSA
112	43 (38%)	67 (62%)

A table detailing CFSA court involvement for FGDM's held and for those not held during this current fiscal year is below. There was a 10% increase in FGDM's held where there was an active CFSA application at the time of the conference, compared to the cumulative trend. There was a slight decrease in the referrals that did not proceed to conference where there was an active CFSA application.

This is an encouraging trend, since previous experience showed that a greater proportion of those referrals with an active CFSA application did not proceed to conference than those without an active CFSA application.

2008-09		
	FGDM's with CFSA	Referral with CFSA & no FGDM
	6 (37%)	5 (38%)

A cumulative table containing this information from April 1, 2005 to March 30, 2009 is below:

2005-09		
	FGDM's with CFSA	Referral with CFSA & no FGDM
	23 (27%)	21 (42%)

FGDM PLAN ACCEPTANCE

Over the past four years, all FGDM plans that family members presented to the CAS were accepted and implemented by the CAS. On a few rare occasions, a family presented two plans, with a way to decide between the two plans.

This acceptance rate is higher than the rates quoted in the literature and may be due, in part, to the Children's Aid Society of Brant's success in working collaboratively with families, widening the family circle through FGDM, the focus on preparing all participants for the FGDM, the well-established and supported kinship care and kinship services processes at Brant CAS, and the support of the local legal community.

That everyone in the family were able to come together united and happy. We were able to come to a conclusion with no bickering or fighting. (Family Member)

FGDM PREPARATION

Family “left egos” and personal issues aside to focus on the children. People did not stray from the focus. People developed realistic goals. (CAS Participant)

Comprehensive preparation and reducing Coordinator facilitation during the FGDM are key principles of FGDM, as practiced in the province of Ontario. For 2008-09, data concerning preparation is contained in the chart below.

It is worth noting that the average preparation time for referrals that did not proceed to a conference increased compared to previous years.

2008-09		2008-09	
Participants Prepared	Participants attending FGDM	Average prepared per FGDM	Average attended per FGDM
331	257 (77%)	22	17

2005-2009	
Average Number prepared per FGDM	Average Number Attend per FGDM
28	23 (82%)

Preparation	2005-06*	2006-07	2007-08	2008-09
Total number prepared/FGDM	37/FGDM	30/FGDM	23/FGDM	22/FGDM
Adults		457	271	219
Children of FGDM		50	30	32
CAS participants		71	46	54
Community Service providers		10	20	22
Observers		11	7	4
Speakers		5	1	0
Average preparation time for FGDM held		46.4 hr	41.5 hr	36 hr
Average Preparation time for Referral, but no FGDM held		6.5 hr	7 hr	8.5 hr

FGDM PARTICIPATION

Coming together as a family and having information to help the situation and try and come up with ways to resolve the problem. Making people stronger to feel that there is hope to come out of the situation. (Family participant)

One of the strengths of FGDM is inclusion of fathers and male relatives. During 2008-09, 35% of the participants were men, with 30% of the participants connected to the paternal family and 53% who were connected to the maternal family.

The average number of participants prepared for each FGDM was smaller this year than in previous years. The average number of participants per conference was also smaller than previous years. This will bear watching in future years, since a key principle of FGDM is inviting the extended family and widening the circle to increase safety and wisdom.

CAS participants include the manager, worker (both FSW and CSW), and foster parents. Foster parents regularly attended the FGDM's and helped to support the child in their care both prior to and after the FGDM. Family members regularly thanked the foster parent for caring for their child.

Once again this year, community service providers attended FGDM's, as appropriate, and were supportive of the FGDM process. All of Brant's FGDM's were held on Saturdays or Sundays.

Observers also regularly attended FGDM's during this past year. Most observers attended as part of their training to be a Coordinator for FGDM. Family members gave permission before an observer attended. The presence of observers did not seem to alter the overall FGDM process, based on personal observation and the evaluations completed by participants.

Conferences averaged 4.5 hours in duration during this year. This is slightly lower than the 5 hour conferences during the previous fiscal year. This may be due to smaller numbers of participants in a conference and the Coordinator's efforts to shorten the information sharing portion of the conference.

Participation	2005-06	2006-07	2007-08	2008-09
Average Participation	33/FGDM	21.3/FGDM	21/FGDM	17/FGDM
Adults		261	219	154
Children of FGDM		46	27	31
Children in attendance		36	28	14
CAS participants		58	43	44
Community Service providers		9	14	10
Observers		11	7	4
Speakers		5	0	0
Average FGDM length		6.25 hr	5 hr	4.5

*We all agreed on a decision and our statements were made clear.
(Family member)*

II. SAFETY, PERMANENCY AND WELL-BEING: PLAN OUTCOMES

*The family made a decision regarding the long term care of the child, and this was told to the child. Keeps extended family and friends involved in the long term permanency for children in care.
(CAS Participant)*

The conference is really helpful because instead of just taking it to court and let a judge make the decision which is what happened in my case. The family gets to help figure out a solution to help the situation. (Family Member)

All FGDM plans during this past fiscal year addressed the safety of children and were accepted by the CAS as providing sufficient safety for the children involved.

Permanency can be understood as continuity and permanency of relationships, rather than of a place. With this in mind, the FGDM plans this year were oriented toward permanency for the children involved. Further details are contained in the tables below.

The table below summarizes the FGDM Plans resulting in permanency options for children. These Plans show a clear preference for children remaining in their kin system, if they are unable to remain or return to the care of their parents. Since 2005, 84% of the FGDM plans keep children in their kin system.

Permanency	2003	2004	2005-06	2006-07	2007-08	2008-09	TOTAL
FGDM Plans (total)			30	35	26	35	126
Remain in care of parent(s)			8 plans	8 plans	6 plans	8 plans	30 plans
Return to care of parent(s)			1 plan	3 plans	2 plans	7 plans	13 plans
Placement of children with kin	4 plans	13 plans	15 plans	17 plans	5 plans	9 plans	63 plans
Kin support for non-kin placement			4 plans	7 plans	3 plans	8 plans	22 plans

The boys now have a permanent residence and the opportunity to now have more of a chance to see their parents and other family members. (Family Member)

IV. Evaluation of FGDM

How family members can put their feelings aside just so we can discuss what we are here for which is the children. To see how the children feel about this situation. This conference was an eye-opener as to how family member deals with things. (Family Member)

Everyone was given the chance to voice their opinion and express their concerns. (Family Member)

Through their year long process the family has been able to develop, test, and refine a plan that works and the process allowed it to evolve from wish to a new reality for them. (CAS Participant)

Everybody had an open mind. We can stay very close as a family and a friend relationship. (Family Member)

The completion rate of the evaluation forms was very high. Out of 208 participants, there were 173 evaluations completed. This is an 83% completion rate. This high completion rate may be due, in part, to asking participants to complete the evaluation at the end of the FGDM conference and before they leave.

Participants provided the following feedback during the 2008-09 fiscal year.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
The purpose of the meeting was clear	61%	36%	2%	0.5%	
All the information needed for the meeting was provided	60%	37%	2%	0	0.5%
I like where the meeting was held	62%	36%	1%	0.5%	0
The meeting was safe for myself and others	72%	27%	0.5%	0	0
I understood my role at the meeting	64%	36%	0	0	0
We agreed on a plan to keep the child(ren) safe	69%	28%	0.5%	0	2%
The FGDM meeting experience was positive	68%	32%	0	0	0

The majority of participants who completed an evaluation following a FGDM fall between the ages of 19-60 (73%), are female (65%), and are related or connected to the mother or both parents (53%). There were 38 (30%) participants related to or connected to the father or both parents. This data supports the FGDM principle of including both the maternal and paternal family members in the conference.

In reviewing the responses to the question “What could have been better?” several themes emerge:

1. Family participants requesting more clarity about the task they are being asked to complete and having more information about what can go into the plan.
2. Family participant requesting more information or more complete information from the CAS and more information regarding addictions issues and test results.
3. Family participant concerns regarding the process, particularly the private family time. There were requests for help in “getting started” and managing the conflict between family members. There was also some concern about the number of breaks taken.

4. Requests from foster parents to be more involved in sharing their information about the child with the family. There were concerns about foster parents not being on equal footing with both parents and there not being enough support for foster parents in the FGDM process.

Based on this feedback, the focus for the coming year will be:

- Helping CAS and other service providers share the information that the family needs to know in order to plan effectively
- Make sure that the family understands their task prior to the private family time starting at the FGDM
- Explore how foster parents can share their information with the circle and focusing on the process being safe for foster parents

I got to move home with my Daddy! (Child Participant)

V. FGDM Development

Training: Local and Provincial

Once again this year, the Coordinator provided training to a wide variety of community members, including community service providers, both locally and provincially.

	Training Local	Number Trained?	Mentor Local	Training Provincial	Number Trained?	Mentor Provincial
2005-06	9		1	3	71	
2006-07	4	173	2	6	49	4
2007-08	16	38	1	6	83	5
2008-09	9	46	2	2	280	3
TOTAL	22	257	6	17	483	12

Local FGDM Development

A significant local focus this past year has been working with Six Nations as they explore how they want to develop their ADR processes. The Brant FGDM coordinator has provided many materials to them as requested and been available for consultation as needed.

The Brant coordinator began training a local member of Six Nations to become a FGDM coordinator during this fiscal year. The Brant coordinator also attended two training sessions in Ohsweken, one with local service providers and the other with the on and off reserve CAS staff.

Another local focus this past year has been working with the OCL when appointed to represent a child in the FGDM process. This is going smoothly in our community, and OCL attend nearly all of the FGDM's where they have been appointed.

One MSW student completed her field placement with the FGDM Coordinator during this past year.

Local training included presenting at unit meetings within CAS, providing orientation to new workers, and providing presentations to local service provider groups.

Provincial FGC Development

One of the provincial highlights for the Brant FGDM coordinator was organizing and moderating a panel presentation to the ADR symposium for Ontario, comprised of three family members and two Brant CAS staff who have participated in a FGDM.

The Coordinator continued to participate in the FGC Ontario Provincial Resource and provided training and mentoring on a provincial level for new coordinators. The Coordinator participated in a joint committee with the Office of the Children's Lawyer to help develop best practices for coordinators and OCL in the FGDM process. The Coordinator also is helping revise the Ontario training materials for coordinators as well as the Ontario FGC/FGDM coordinator's manual.

Brant CAS is participating in a research project looking at using FGC/FGDM for youth leaving foster care. This is being coordinated through the George Hull Centre and the FGC Ontario Provincial Resource.

Brant CAS is contributing our local and provincial FGDM training statistics to the provincial training resource for FGC, located at the George Hull Centre for Children.

The Brant FGDM Coordinator continues to provide leadership in Family Group Conference development across the province through regular participation in the provincial FGC training committee meetings, offering FGC training to trainees from outside Brant County, mentoring new coordinators from outside Brant County, and participating in consultations at the Ministry level.

The regional networking group of FGDM coordinators from Brant, Hamilton, Niagara and Kitchener-Waterloo continued to meet during this fiscal year as a way of providing peer consultation, support and sharing local and provincial information. Regular informal contacts between coordinators in the province, as well as sharing Brant's FGDM information with others in the province, across Canada and internationally continues on a regular basis.

Brant's FGDM Coordinator is a provincial trainer for FGC and is on the provincial trainer's roster to provide both provincial training in FGC and mentoring for new coordinators. During this past year, some of the provincial training activities were completed through the coordinator's private practice.

Brant's FGDM Coordinator has been attending the regional Ministry ADR meetings during this past year.

Brant remains committed to assisting the development of FGCFGDM across the province through consultation, training and mentoring rooted in the FGC model based on the New Zealand principles of Family Group Conferencing.

Other Developments Nationally and Internationally

The Coordinator has been involved in assisting New Brunswick as they develop and implement their FGC process, and was one of three people in Ontario who trained their 21 FGC coordinators, 2 supervisors, and their entire child welfare staff.

The Coordinator continues to be part of the consultation at the American Humane Association in Denver who has gathered an international panel together to develop good practice guidelines for FGDM.

The Coordinator presented a workshop at the American Humane FGDM conference in June 2008. This workshop provided information from Brant CAS staff about the case management practices that supported FGC. The Coordinator had an article published about this topic in the American Humane Association's Journal, *Protecting Children*. A copy of this Journal was purchased for each protection team at Brant CAS.

VI. Future Directions

Brant has now been offering the FGDM service to families for the past six years. During this previous year, referrals continued to be spread more evenly across the agency than in the past. This trend has resulted in a 25% increase in FGDM intakes over the previous fiscal year.

The increase in referrals meant that a waiting list had to be established for the first time. At the end of March 2009, there were 18 families on this wait list. It would take one coordinator approximately one year to provide the FGDM service to these families.

Brant CAS was not successful in obtaining funding through the EBBS grant and continues to explore ways to address the insufficient coordinator capacity to meet the demand for the FGDM service.

A summary of FGDM intake and referral activity across teams is below:

2008-09						
	INTAKE	INTAKE	REFERRAL	REFERRAL	REFERRAL	
	Active	Concluded	Active or	FGDM Held	Concluded	
		No Referral	Review Planned		No FGDM	TOTAL
Eagle Place	2	2	2	3	2	11
Paris-Nova Vita	1	2	0	0	0	3
New Beginnings	2	0	0	0	1	3
West Brant	0	2	3	2	1	8
North	3	0	3	1	3	10
Central East	0	2	3	7	3	15
Central West	0	2	1	1	1	5
Grey Street	1	2	1	1	2	7
ASU	0	0	0	0	0	0
NSB	0	1	0	0	0	1
Adoption	0	0	0	0	0	0
PSU	1	2	1	1	0	5
SSU	0	0	0	0	0	0
TOTAL	10	15	14	16	13	

Family participants in FGDM regularly state that they wish that the FGDM had been held earlier in a family's involvement with the CAS. There seems to be a steady trend during the past four years to hold a conference earlier in the CAS involvement with families. However, even with this trend noted, families continue to ask why they were not called together earlier. Hopefully with the initiation of conferences using the SOS format, extended families will become more involved from the beginning of the CAS involvement with a family.

A focus for the practice of FGDM for the past year was to explore the family's traditions and ways of beginning important gatherings more carefully to assist them to plan for an FGDM opening. There has been an increase in family members beginning the conference in ways that are meaningful for them.

Brant's Coordinator will continue to offer training and mentoring to new coordinators, as needed, both locally and across the province.

If Brant CAS is successful in increasing the FGDM coordinator capacity, a future focus will be on youth leaving foster care and how the FGDM process can assist them in transitioning into adulthood.

VII. Conclusion

This has been a year of exciting growth in the FGDM service at Brant CAS and we anticipate that this growth and development will continue into the coming year. Brant has shown leadership in FGC development over the past four years, and looks forward to continuing this leadership into the next fiscal year.

It provided us with the opportunity to resolve past sins. They were aired and dealt with. It put nothing but a positive spin on how to move forward with the child's life. The parents grew up some and found ways to better communicate. (Family Member)

We as a family were able to deal with underlying issues that may not have been dealt with if this meeting hadn't taken place. I believe we have set out a clear and good plan as a family to help. (Family Member)

I like the way how everything was laid out. Expectations. Information. Ground rules for discussion/behaviour. And then left to the rest of us to hammer out. It far exceeded my expectations. There was emotion, yes, but nothing got out of hand. A good experience. (Family Member)