

**Testimony of Julian Richter, in support of LD 857: An Act Improve Family Team Meetings in Child Welfare Cases to Ensure Better Outcomes for Children by Providing Adequate Funding**

**Joint Standing Committee on Health and Human Services  
Tuesday, January 16, 2024**

Senator Baldacci, Representative Meyer, and distinguished members of the Health and Human Services Committee, I am offering testimony on behalf of the Maine Child Welfare Advisory Panel (MCWAP, or the Panel) in support of LD 857, An Act Improve Family Team Meetings in Child Welfare Cases to Ensure Better Outcomes for Children by Providing Adequate Funding.

FTMs represent the primary form of collaboration between parents and families who are involved in child welfare cases and the Department of Health and Human Services (“the Department”). While FTM practice is not currently codified in statute, in practice, FTMs are the primary method of engaging parents, parent attorneys, and Guardians *ad litem* in the participation of creating rehabilitation and reunification plans pursuant to 22 M.R.S. §4041(1-A)(A)(1)(a). Given their importance to the child welfare system response, MCWAP has been discussing the family team meeting (“FTM”) process in its monthly sessions and has formed a workgroup to discuss the efficacy and potential areas of improvement in the practice of FTMs in child welfare proceedings.

The FTM policy defines FTMs as “[a] meeting convened by the Office of Child and Family Services (OCFS) which includes the family, child (whenever appropriate), and their supports to ensure the family understands the child safety concerns and the action steps that must occur for the child to achieve safety, permanency, and well-being.” O.C.F.S. Policy Section IV Subsection D-6. This policy recognizes the critical role that FTM’s play in developing prevention service family plans and reunification and rehabilitation plans. The frequency of FTMs should be based on the identified needs of the family, but are noted to be generally appropriate and needed prior to any Department decision to remove a child from the home, within the first thirty (30) days of an open prevention service case, and every three months when a case has been filed in the District Court. *Id.*

FTMs, by policy, are structured to be a mechanism where both the family and OCFS employees have standing to request a meeting. These meetings are intended to be scheduled promptly in response to case developments, such as prior to filing a Jeopardy petition and to discuss the development of a rehabilitation and reunification plan; to inform the development of a child plan and youth transition plan; prior to recommending a child enter residential treatment; prior to changing the case goal, prior to starting a trial home placement; and prior to case closure. *Id.*

The FTM policy requires caseworker to invite parents and caregivers, the child (if developmentally appropriate), resource parents, tribal partners (in ICWA cases), Guardians ad

litem, parent attorneys and visit supervisors. It is also best practice for the parent to be supported in these meetings by their professional and personal support systems. Id.

FTM preparation by the Department caseworker is also a critical area in which the caseworker engages the family and team members in “meaningful conversations related to the family’s strengths and needs.” Preparing for FTMs should be incorporated into the caseworkers ongoing work with families, their formal and informal supports, and other collateral contacts. The caseworker should discuss the family’s goals during monthly contacts with the family and other team members.” Case decisions such as removal and reunification are to be routinely discussed and planned during FTMs. Id.

In MCWAPs discussions and workgroups surrounding FTMs, considerable information has been shared with the panel by members and through feedback by those with experience of the system response, which led to MCWAP asking for data from the Department to examine the extent to which FTM practice aligns with policy. MCWAP discovered that routine and reliable data is unavailable and generally not collected regarding several of the requirements that are set out in the FTM policy.

The Panel’s primary concern with the prevalence that we hear that FTM practice does not align with Department policy, is the negative impact on the ability of parents to understand the Department’s concerns, as well as the conveyance of critical case information between team members, both of which have significant implications on both child safety and the family’s ability to successfully reunify. All of the above components of FTM policy and practice are important. The absence of any one of them can be likely to result in less effective collaboration, making intervention with families less successful.

MCWAP has discussed methods by which collection and analysis of FTM data will help inform efforts to improve the responses to children and families who are engaged with the Department. In the upcoming MCWAP annual report, the Panel will recommend “OCFS enlist the technical support of an outside entity to conduct a thorough evaluation of current FTM practices, and to make recommendations for the development of ongoing data collection and quality assurance practices.” That technical assistance would serve to “provide the data needed to assess current practice strengths and gaps, and establishing a process for ongoing data collection and analysis will contribute to the success of this strategic priority in the coming years.”

FTMs represent a crucial service within the child welfare system that functions as a bridge between the Department and the parents and caregivers of children. Compliance with Department policy is essential not only to collaboration between team members, but also to discuss case dynamics and make accurate decisions about safety and reunification of families. By supporting fidelity to the FTM model that is outlined in policy and implementing stronger, ongoing quality assurance mechanisms, the Legislature has the opportunity to help ensure that Department staff are engaging with critical case workers in each case, and improve

reunification services, child safety, and, most importantly, long-term well-being outcomes for children.

The Maine Child Welfare Advisory Panel asks you to support this important bill. Thank you for the opportunity to be heard.