



CDSS

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STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
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EDMUND G. BROWN JR.  
GOVERNOR

December 4, 2017

ALL COUNTY LETTER (ACL) NO. 17-104

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CHIEF PROBATION OFFICERS  
ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: DOCUMENTATION OF CHILD AND FAMILY TEAMS (CFTs) IN THE  
CHILD WELFARE SERVICES/CASE MANAGEMENT SYSTEM  
(CWS/CMS)

REFERENCE: [ASSEMBLY BILL \(AB\) 403 \(CHAPTER 773, STATUTES OF 2015\)](#);  
[AB 1997 \(CHAPTER 612, STATUTES OF 2016\)](#);  
[WELFARE AND INSTITUTIONS CODE, SECTION 16501.1](#);  
[ACL 16-84 REQUIREMENTS AND GUIDELINES FOR CREATING AND  
PROVIDING A CHILD AND FAMILY TEAM](#);  
[ACL 15-11 RECORDING DEVELOPMENTAL AND MENTAL HEALTH  
SCREENING, REFERRAL, AND PLAN INTERVENTION INFORMATION IN  
THE CHILD WELFARE SERVICES/CASE MANAGEMENT SYSTEM](#);  
[ALL COUNTY INFORMATION NOTICE I-67-09 FAMILY ENGAGEMENT  
EFFORTS](#)

REASON FOR THIS TRANSMITTAL

- State Law Change
- Federal Law or Regulation Change
- Court Order
- Clarification Requested by One or More Counties
- Initiated by CDSS

This ACL provides county child welfare and probation departments with guidance and instructions regarding how to document CFTs, including CFT meetings, in CWS/CMS. Documentation of the work surrounding and supporting CFTs will help the California Department of Social Services (CDSS) understand how the CFT process is helping children and families achieve positive outcomes, and where opportunities for improvements may be made.

### **Background**

Since January 1, 2017, county child welfare and probation departments have been required to convene CFTs as part of the case planning process for children, youth, and nonminor dependents who enter foster care. This requirement also applies to children, youth, and nonminor dependents in a foster care placement prior to January 1, 2017. The requirement to use CFTs for case planning purposes is fundamental to CDSS's Continuum of Care Reform, and builds upon existing team-based approaches to care already in use, such as Wraparound, Safety Organized Practice, Pathways to Well-Being, and others.

### **Effective Date**

Effective January 1, 2018, county child welfare and probation departments are required to document all CFT meetings in CWS/CMS according to the guidance in this letter and the attached instructions. All CFT meetings that take place on and after January 1, 2018, on behalf of children, youth, and nonminor dependents must be documented in CWS/CMS.

### **Required Documentation**

Documentation of CFT meetings is required in both the Case Plan Notebook and the Contact Notebook of CWS/CMS. Step-by-step instructions are attached to this letter. These instructions are the minimum documentation requirements counties must complete for all CFT meetings convened on and after January 1, 2018. Counties that wish to document additional information may do so, provided the required documentation as described in the instructions is complete.

### **Do Not Use Health Notebook to Document CFT Meetings**

On March 24, 2015, [ACL 15-11](#) provided counties with information and instructions for recording information into CWS/CMS about a child or youth's developmental and mental health screening, referral, and plan interventions. This functionality is located in the Health Notebook, and is intended to track the provision of mental health and developmental health screenings, referrals, and plan interventions. The plan interventions that should be recorded in the Health Notebook are intended to be services that a child, youth, or nonminor dependent receives to address an identified mental health or developmental health need. One of the plan interventions available in the Health Notebook is CFT. Counties are advised that the CFT plan intervention is not intended to document individual CFT meetings and should not be used for that purpose.

In the context of the Health Notebook, CDSS suggests the CFT plan intervention be used only in connection with another mental health or developmental health service that a child or youth is receiving. For example, Intensive Care Coordination (ICC) is a Specialty Mental Health Service that is delivered to a child or youth who also has a CFT. When entering information about this service in the Health Notebook, both ICC and CFT would be selected as plan interventions. In this example, as well as all other cases, counties must still meet the requirements described in this letter and follow the attached instructions to document individual CFT meetings in the Case Plan Notebook and Contact Notebook.

It is also worth noting that CDSS does not plan to use information from the Health Notebook to track or report on CFT-related activities. In order to ensure that CFT-related data is recorded and tracked appropriately, counties should document CFTs and CFT meetings in the Case Plan Notebook and Contact Notebook, as described in the attached instructions.

**Use Health Notebook to Document Screens and Referrals**

Counties are reminded to complete all health screens as required, and to document the information in the Health Notebook. If the results of the screen indicate that a referral is needed, the referral should be completed and documented in the Health Notebook, as well. This documentation is needed to track whether the developmental health and mental health needs of children and youth are being identified and addressed in an appropriate and timely manner.

**Family Engagement Efforts (FEE)**

Please note that the information provided in this ACL supersedes [All County Information Notice I-67-09](#) regarding FEE codes. These codes are not used consistently by counties, and so the information available about practice from a statewide perspective has been limited. As a result, the data is no longer reviewed by CDSS. Effective October 1, 2017, counties are no longer required to utilize any of the FEE codes that appear in CWS/CMS. Counties may continue to use the FEE codes to track local data at their option.

Counties needing additional assistance with CWS/CMS should contact their System Support Consultant at the Office of Systems Integration. If you have any questions or need further information regarding CFTs, please contact the Integrated Services Unit, at (916) 651-6600, or [CWSCoordination@dss.ca.gov](mailto:CWSCoordination@dss.ca.gov).

Sincerely,

***Original Document Signed By:***

GREGORY E. ROSE  
Deputy Director  
Children and Family Services Division

Attachment

c: County Welfare Directors Association  
Chief Probation Officers of California

### Case Plan Notebook, Case Management Services

#### **Context: Prior to Child and Family Team (CFT) Meeting**

According to [California Welfare & Institutions Code \(WIC\) Section 16501.1\(a\)\(1\)](#), the foundation and central unifying tool in child welfare is the case plan; and [WIC 16501.1\(b\)\(1\)](#) says, in part, that the case plan shall be based upon input from the child and family team.

County child welfare and probation agencies are expected to document CFTs in the Case Plan Notebook. Since parents will sign and receive a copy of the case plan, documenting the agency's plan to convene a CFT in the Case Plan Notebook is – in part – intended to help parents understand the agency's responsibility to provide services and the family's responsibility to participate in those services.

County social workers and probation officers should meet individually with children, youth, nonminor dependents, and families prior to the meeting to help them understand the CFT process and prepare them to participate in the CFT meeting. CFTs are more likely to be effective when children, youth, nonminor dependents, and families understand the process and their role in it.

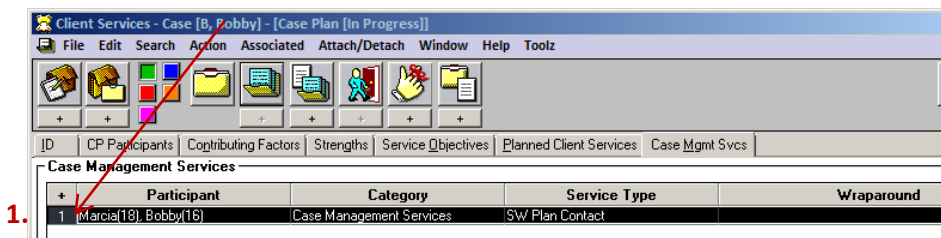
### Case Plan Notebook, Case Management Services

#### **Instruction: Add CFT as a Case Management Service**

When documented in the Case Management Services tab, CFTs appear on the final Case Plan in the "Agency Responsibilities" section. This documents the agency's responsibility to provide a CFT.

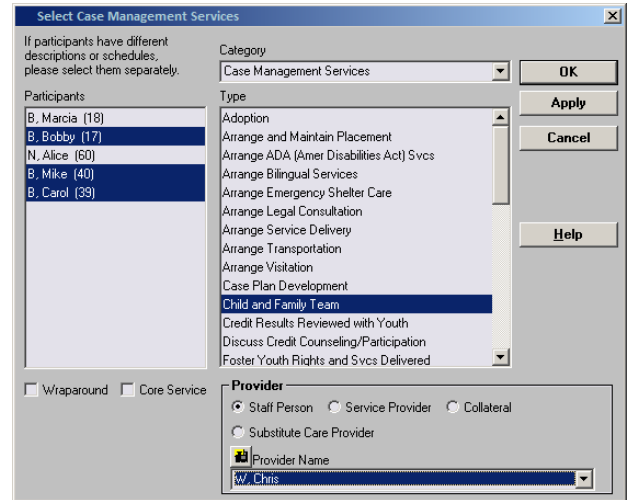
In the Case Plan Notebook, on the Case Management Services tab, Child and Family Team has been added as a new Case Management Services Category.

1) Click "+" to bring up the dialog box.

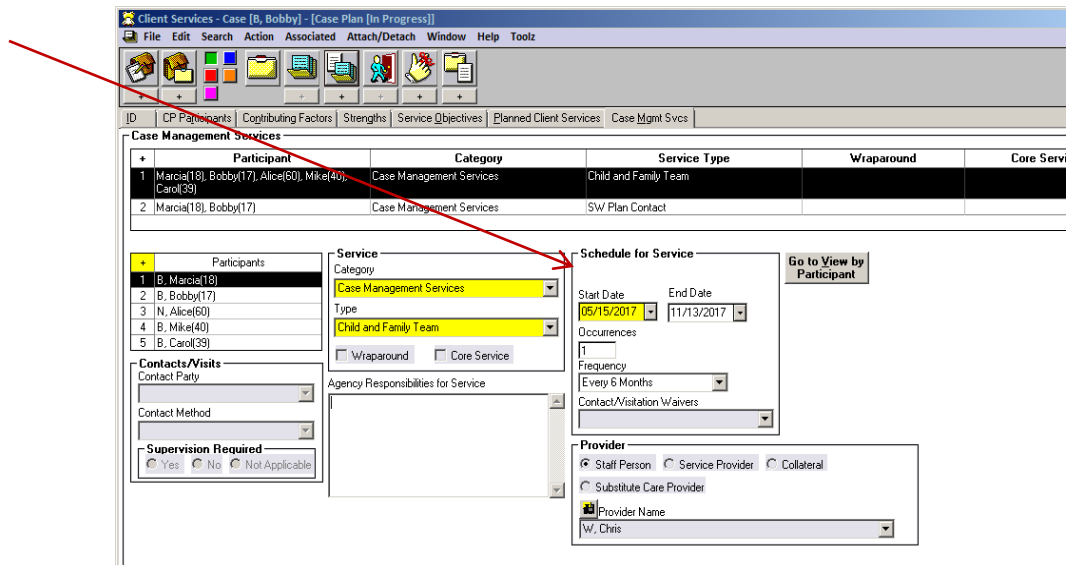


a) Under the Category drop down menu, select Case Management Services.

- b) Under the Type drop down menu, select Child and Family Team.
- c) Select the participants from the participants list.
- d) In the "Provider" frame, select "Staff Person."
- e) Click "OK."



- 2) Complete the “Schedule for Service” frame.
  - a) Occurrences must be “1” or more.
  - b) Frequency must be a minimum of “Every 6 Months.”



- 3) If the child or youth is receiving Intensive Care Coordination (ICC), Intensive Home Based Services (IHBS), or Therapeutic Foster Care (TFC) services, complete the “Schedule for Service” frame as follows:
  - a) Occurrences must be “1” or more.
  - b) Frequency must be a minimum of “Every 3 Months.”

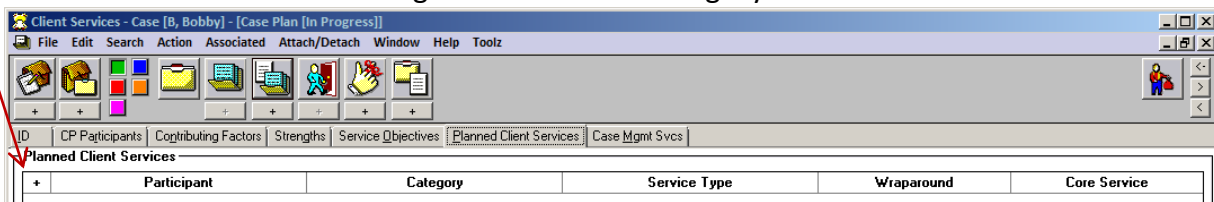
*Note: CFT meetings may occur more frequently. For example, if the needs of the child, youth, or nonminor dependent and family are such that CFT meetings are planned to occur on a monthly basis, then “monthly” should be selected on the “Frequency” drop down menu.*

## Case Plan Notebook, Planned Client Services Add Child and Family Team as a Planned Client Service

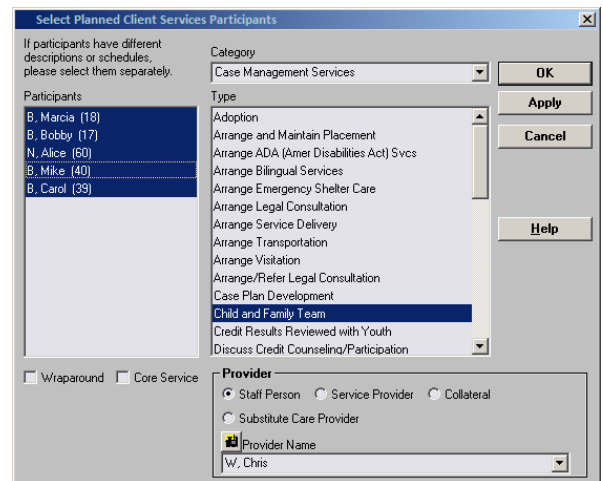
When documented in the Planned Client Services tab, CFTs appear on the final Case Plan in the “Client Responsibilities” section. This documents the family’s responsibility to participate in the CFT process.

On the Planned Client Services tab, Case Management Services has been added to the Category dropdown menu in the Select Planned Client Services Participants dialog box.

- 4) Click the “+” to bring up the dialog box. The new service type of “Child and Family Team” is available after the Case Management Services category has been selected:



- a) Under the Category drop down menu, select Case Management Services.
- b) Under the Type drop down menu, select Child and Family Team.
- c) Select the participants from the participants list.
- d) In the “Provider” frame, select “Staff Person.”
- e) Click “OK.”

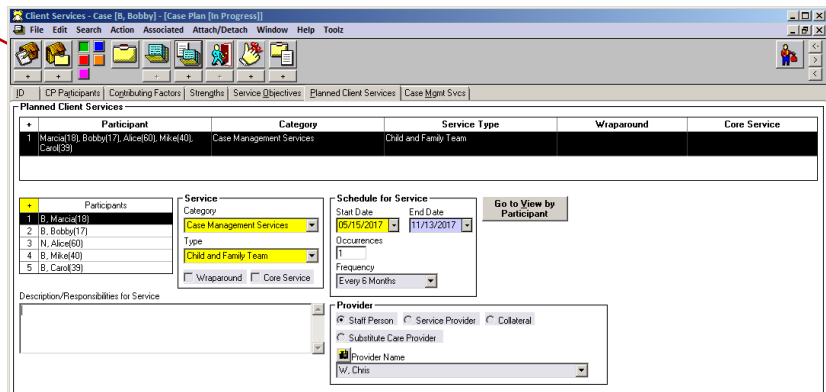


- 5) Complete the “Schedule for Service” frame.

- a) Occurrences must be “1” or more.
- b) Frequency must be a minimum of “Every 6 Months.”

- 6) If the child or youth is receiving ICC, IHBS, or TFC services, complete the “Schedule for Service” frame as follows:

- a) Occurrences must be “1” or more.
- b) Frequency must be a minimum of “Every 3 Months.”



## Contact Notebook

### Context: Individual CFT Meetings

Individual CFT meetings are in-person meetings, and at minimum include the identified child, youth, or nonminor dependent, family members, others identified by the family, the child's current caregiver, and the assigned child welfare social worker and/or probation officer. If the child, youth, or nonminor dependent also receives services from a community-based provider or other system, they should also be included in the CFT process. Please refer to [ACL 16-84](#) for more information about the minimum requirements and guidelines for a CFT.

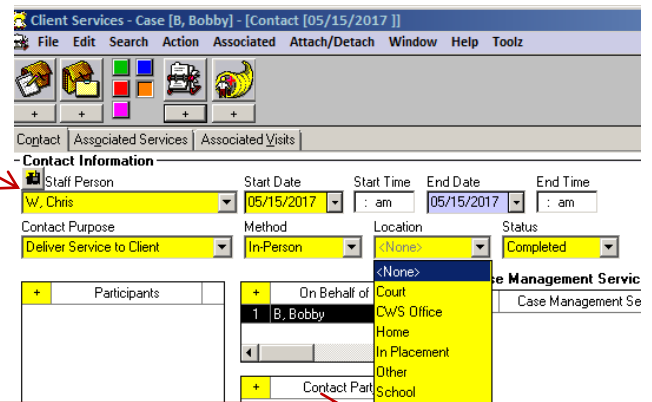
## Contact Notebook

### Documentation of Individual CFT Meeting

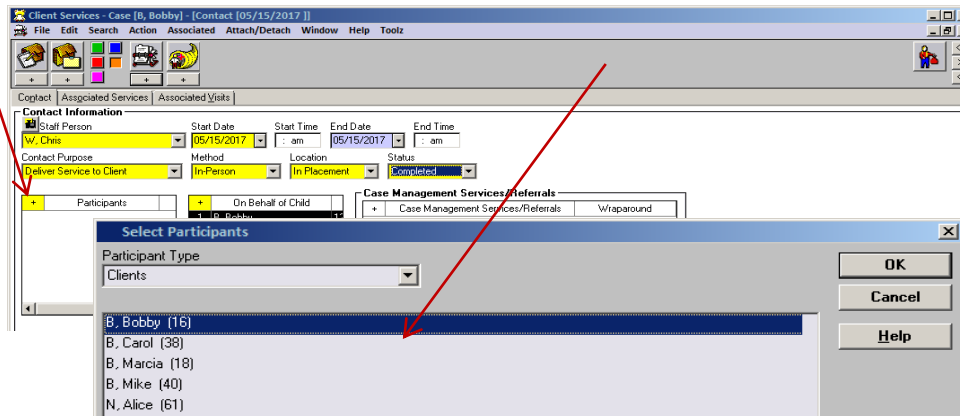
Individual CFT meetings must be documented in the Contact Notebook with an Associated Service.

1. Create a new or update an existing contact with the following information:
  - a. Staff Person
  - b. Start Date, Time of CFT meeting
  - c. End Date, Time of CFT meeting

2. The fields below should be completed as shown:
  - a. Contact Purpose: Deliver Service to Client
  - b. Method: In Person
  - c. Location: In Placement or Home (*ideal*)
    - i. CFT meetings should take place in a convenient setting that maximizes family member participation.
  - d. Status: Completed (*required*)
    - i. Status must be recorded as "Completed"

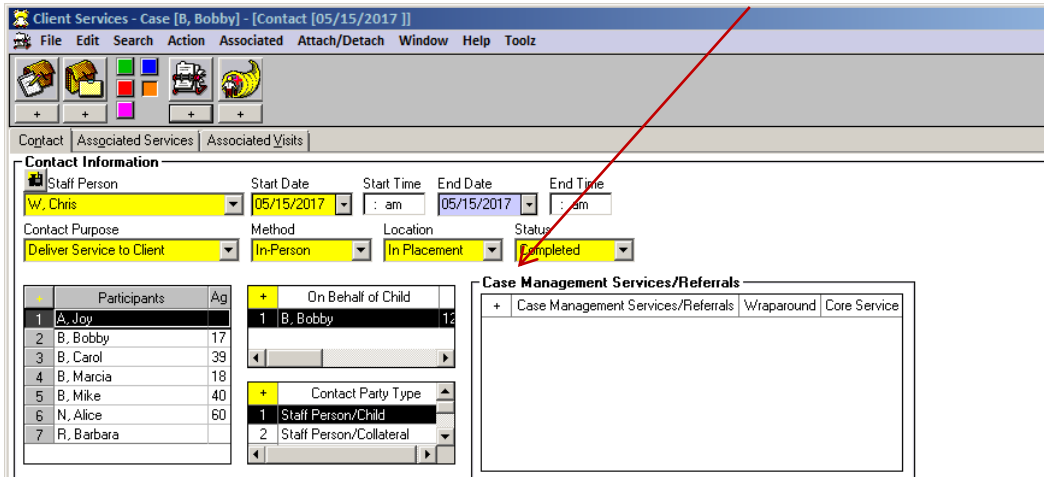


3. Open "Select Participants" dialog box by clicking "+."
  - a. Select all of the individuals who participated in the CFT meeting and click "OK."

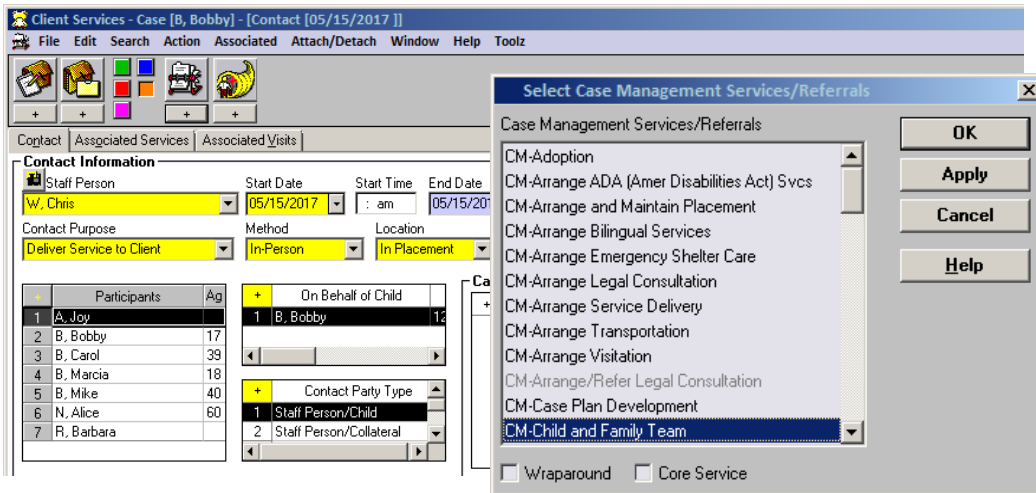




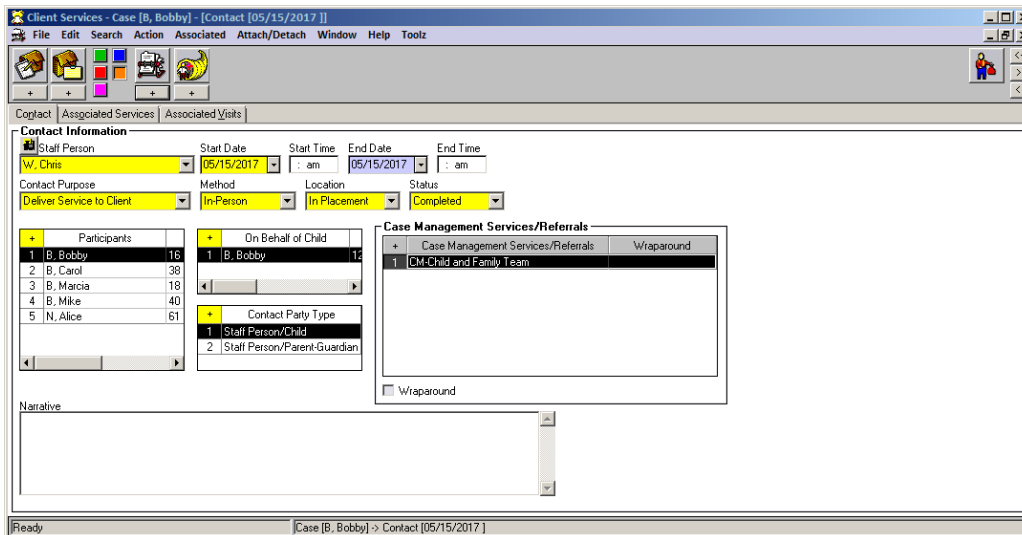
4. Complete the Case Management Service/Referrals Frame
  - a. Click on “+” to open the case management services list.



- b. Select “CM-Child and Family Team” and click “OK.”



5. Contact appears as shown:



## Contact Notebook

### Context: Individual CFT Meetings as an Associated Service

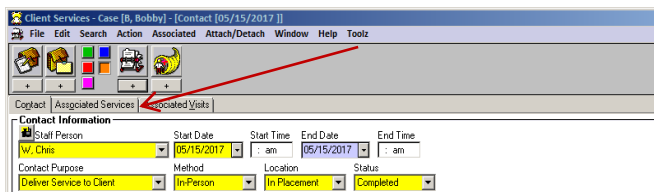
Documentation of an individual CFT meeting is incomplete until an Associated Service has been attached to it. This documents the county agency responsible for convening the CFT meeting, and also records the Key Roles associated with those who attended.

## Contact Notebook

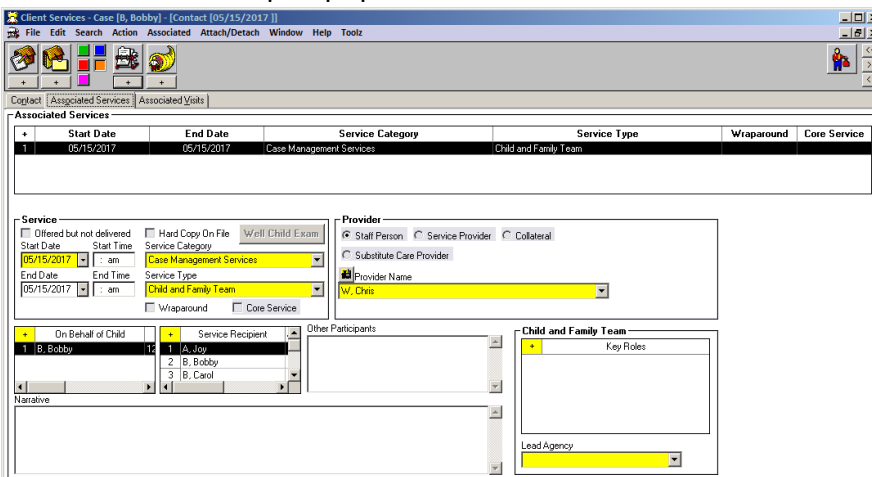
### Add Individual CFT Meeting as an Associated Service

Individual CFT meetings must be added to a Contact as an Associated Service to document the Lead Agency involved and the Key Roles attending and participating in each meeting.

6. Click on the “Associated Services” tab.

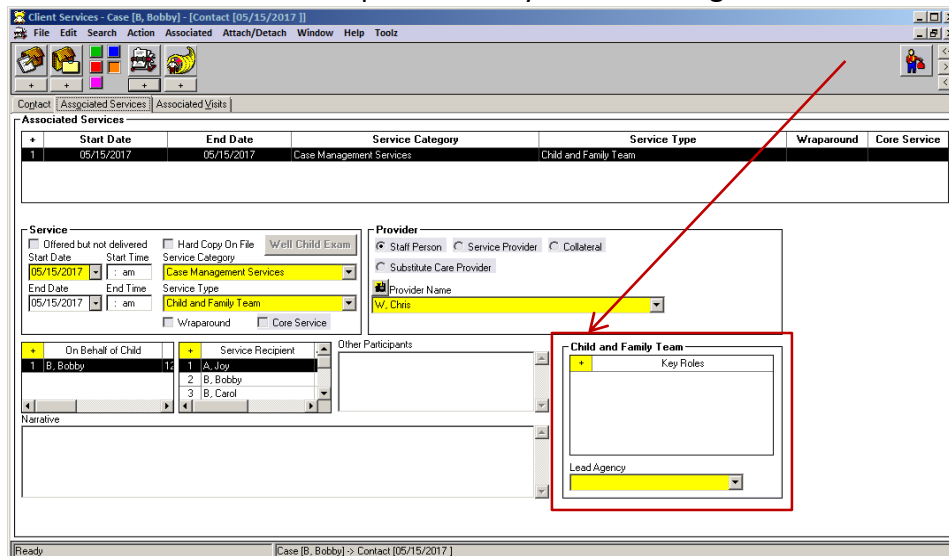


7. Most fields will be pre-populated



8. Complete the Child and Family Team frame, Key Roles and Lead Agency information.

- a. Click on the “+” to open the “Key Roles” dialog box.

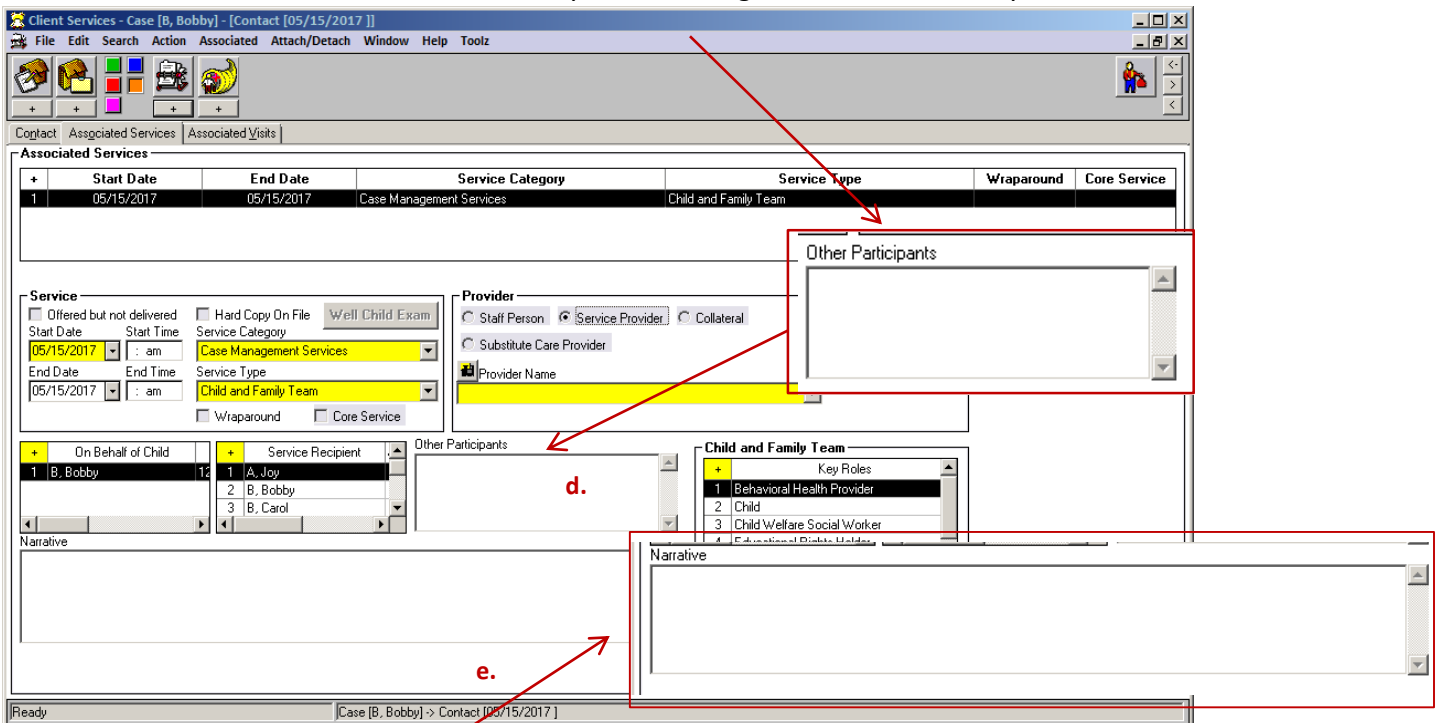


9. From list of available roles, select all of the Key Roles in attendance at the individual CFT meeting being documented.
  - a. Multiple roles may be selected, however, each role can be selected only once for each documented CFT meeting.
  - b. Key Roles are not assigned to particular individuals involved in the case. Each Key Role selected is recorded as attending the specific CFT meeting being documented.
  - c. Select Key Roles according to the definitions shown in the following table.

Key Role	Description
<b>a) Behavioral Health Provider</b> <i>Please always select this role for a representative of the county Mental Health Plan</i>	Supports the child, youth, nonminor dependent, and family by bringing a trauma-informed, clinical perspective to the team about the mental health status of the child, youth, or nonminor dependent.
<b>b) Child</b>	The identified child, youth, or nonminor dependent.
<b>c) Child Welfare Social Worker</b>	The assigned child welfare social worker of the identified child, youth, or nonminor dependent.
<b>d) Clergy</b>	Any recognized representatives of a church or other faith organization.
<b>e) Court Appointed Special Advocate</b>	An individual who advocates independently on behalf of a child, youth, or nonminor dependent, and is appointed by the court to ensure they live in an environment free from abuse and neglect.
<b>f) Education Partner</b>	Any representative of the identified child’s school or academic achievement efforts.
<b>g) Education Rights Holder</b>	Person responsible for making education decisions in the child’s best interests. The Education Rights Holder may be the child’s parent, caregiver, legal guardian, or someone else appointed by the court. The Education Rights Holder cannot be the child’s social worker, probation officer, attorney, STRTP/group home staff member, or school staff member.
<b>h) FFA Staff</b>	An individual from the Foster Family Agency that supervises the identified child or youth’s placement.
<b>i) Natural Support</b>	People or organizations identified by the child, youth, nonminor dependent, or family as important. Natural supports are a family’s relationships and connections within their community, enhancing safety and diminishing loneliness and isolation. Examples include friends, neighbors, etc.
<b>j) Other Community Support</b>	Individuals that an identified child, youth, nonminor dependent, or family may invite to be a team member, such as the youth’s swim coach, girl scout leader, or softball teammate, for example.
<b>k) Other Family</b>	Family members not reflected in one of the other roles.
<b>l) Parent Partner</b>	Individuals with lived experience who provide support and advocacy to parents whose children have been removed, helping them understand and navigate the system and encouraging them through the process.
<b>m) Parent/Father</b>	Birth father of the identified child, youth, or nonminor dependent. Do not use this role for a parenting youth or parenting nonminor dependent.

Key Role	Description
n) Parent/Mother	Birth mother of the identified child, youth, or nonminor dependent. Do not use this role for a parenting youth or parenting nonminor dependent.
o) Probation Placement Officer	The assigned deputy probation placement officer.
p) Regional Center Provider	Representatives of a Regional Center provider of developmental health services.
q) Resource Parent	Substitute care provider.
r) Short Term Residential Therapeutic Program Staff	Representative from the STRTP where the identified child or youth resides.
s) Therapist	The therapist providing services, but may also be used to mean any other mental health provider serving a child, youth, nonminor dependent and family.
t) Tribal Representative	Representative from the identified child's, youth's, nonminor dependent's, or family's Native American tribe.
u) Youth Partner	Individual who works directly with the identified child, youth, or nonminor dependent to help them understand and navigate the process, and encourage them to participate and work with the team.

d. Anyone whose role at the CFT meeting is not identified in the list above may be added to the "Other Participants" dialog box. Other Participants will not be tracked.

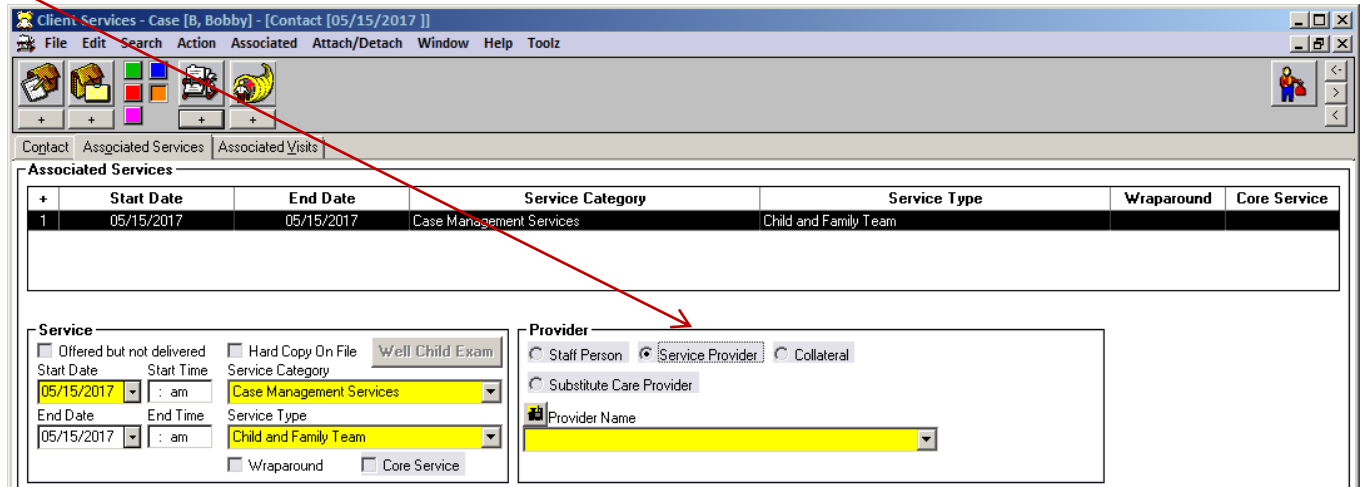


e. A description of the content of the CFT meeting, including topics, goals, tasks, agreements, challenges, achievements, outcomes, etc, may be added to the "Narrative" field, at county option. The narrative field can also be used to note if a service provider acted as a CFT Facilitator.

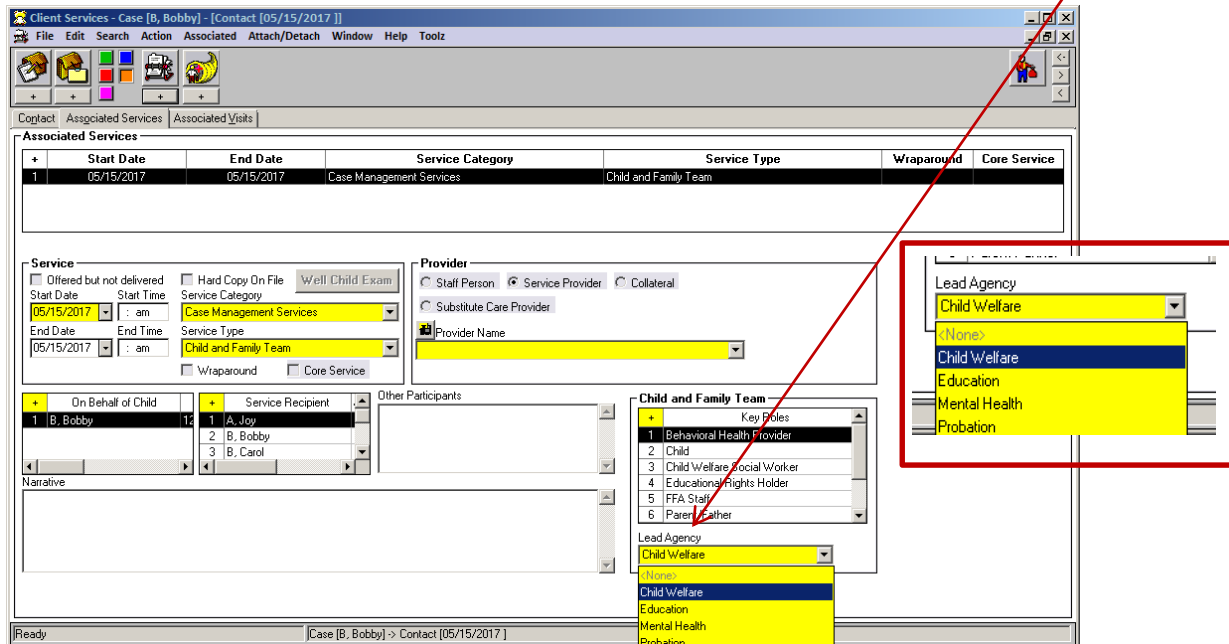
**Please Note:**

*While the functionality is not currently able to track a CFT Facilitator specifically, counties may use the Provider frame to document if a service provider participated in the CFT meeting.*

*If the service provider acted as the CFT Facilitator, counties are encouraged to record that information in the Narrative field, as noted above on page 11.*

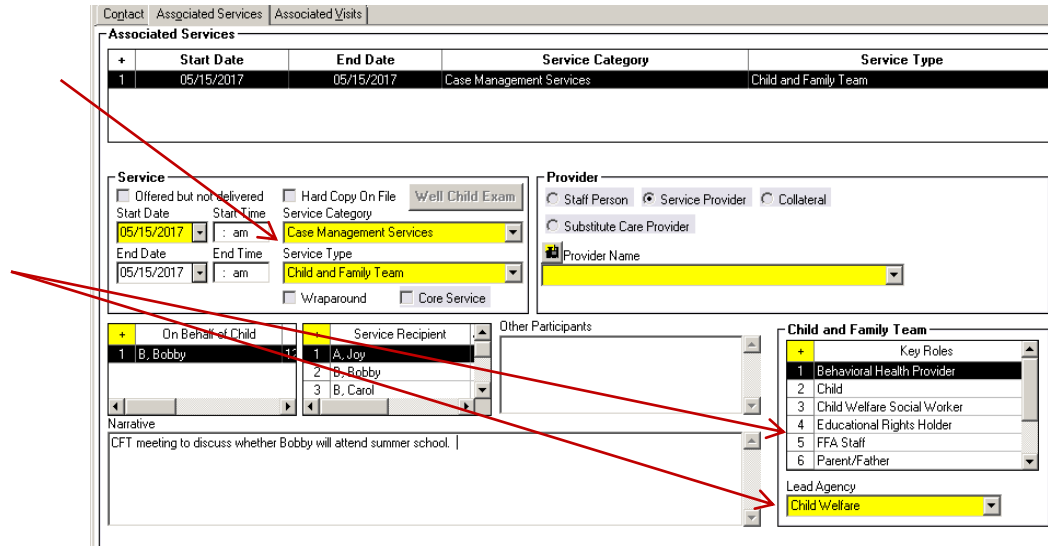


10. Select the "Lead Agency" (county agency) responsible for convening the CFT on behalf of the child, youth, or nonminor dependent.
  - a. Select "Child Welfare" for foster care or dependency cases.
  - b. Select "Probation" for probation or delinquency cases.

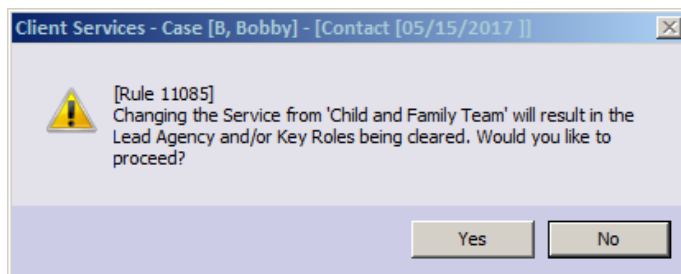


**Please Note:**

When working in the Associated Services tab, if the Service Type is changed to a value other than "Child and Family Team," information entered in the "Key Roles" and "Lead Agency" fields will be cleared.



A dialog box with the following message will be displayed:



**End of CFT Documentation in the Contact Notebook**

Documentation of CFTs will be reflected in the following reports and documents:

### Local Reports

#### 1. Case Plan, Individual Client Responsibilities

When documented in the Case Plan Notebook as described on pages four through six of this document, Child and Family Team planned services will appear on the Individual Client Responsibilities report in the Client Responsibilities section under Case Management Services.

### Documents

#### 1. Case Plan & Case Plan Update (Agency Responsibilities)

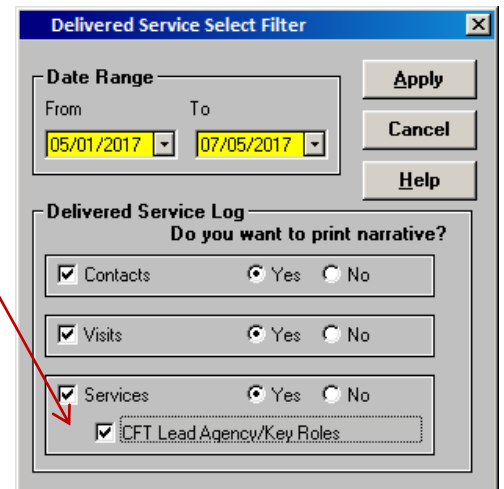
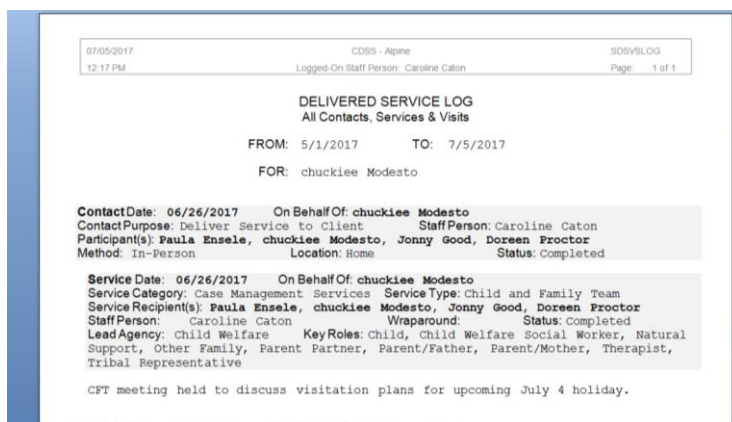
Documentation of CFTs as a Case Management Service in the Case Plan Notebook, as described on page four of this document, will be reflected as an agency responsibility in the Case Plan and Case Plan Update documents. The information will appear in the Agency Responsibilities section, under Case Management Services.

#### 2. Case Plan & Case Plan Update (Client Responsibilities)

Documentation of CFTs as a Planned Client Service in the Case Plan Notebook, as described on page six of this document, will be reflected as a client responsibility in the Case Plan and Case Plan Update documents. The information will appear in the Client Responsibilities section, under Case Management Services.

#### 3. Delivered Service Log

A new checkbox has been added to the Delivered Service Select Filter when printing the Delivered Service Log. The checkbox is enabled when the "Services" box is checked.



The Delivered Service Log will reflect CFTs as a service, and include the CFT Lead Agency and Key Roles – plus any narrative – that were documented in the Contact Notebook for each documented CFT meeting.