

Comprehensive Family Focused Meeting (FFM) Notes

CASE INFORMATION				
Children's Names				
Parent/Caregiver Name	Parent/Caregiver/Noncustodial Names			
Date of Meeting	Facilitator Name			
Next Court Hearing Date and Time	Type of Hearing			

Meeting Purpose

Initial Reason for Involvement and How Safety Was Assured (pull from CPA/HHS case plan)

Family Voice

Narrative Summary of Family Interaction Planning (if applicable)

Family Strengths, Services, and Supports

Discussion of Current Plan

Next Steps

Genogram review (with consent of the family)

Child Well-Being

Family Input on How to Address Risks and Safety Concerns

Goal:					
Date	Action Steps	Who is Responsible?	By When	Completion Date	
Goal:			T	T	
Date	Action Steps	Who is Responsible?	By When	Completion Date	
Goal:					
Date	Action Steps Who is Responsible		By When	Completion Date	
Crisis Pl	an				
Concurr	ent Planning (if in out of hor	ne placement or at risk of out of hon	ne placemen	it)	
_	iscussion of relatives/fictive	kin options if children are not in kin/	fictive kin ca	ire	
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SIGNATURES AND NOTIFICATIONS

Invited Team Members	Role	Contact Information	Attended	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	

	Yes	□No
	Yes	☐ No
	Yes	□No
	Yes	□No
	Yes	☐ No