Reynolds/Woernlin Family Rapid Response Family Meeting Report

Crisis Response Family Meeting (24 hours from emergent concern)

Rapid Response Family Meeting (72 hours from emergent concern)

**X**

Child(ren)’s Name: \_\_\_\_\_Child 1\_\_\_\_\_\_ \_\_\_\_\_\_Child 2\_\_\_\_\_\_\_\_\_\_

Facilitators’ Names: \_\_\_\_\_Facilitator 1\_\_\_\_\_\_ \_\_\_\_ Facilitator 2\_\_\_\_\_\_

Caseworker’s Name: \_\_\_Caseworker\_\_\_\_\_ \_\_\_\_Supervisor\_\_\_\_\_\_\_\_

# FAMILY PLAN INFORMATION

## Crisis/Rapid Response Family Meeting Date: \_\_1/15/2020\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Meeting Participants | Relationship to the Child | Contact Information (Phone Number/Email) |
|   | mother |   |
|   | Family friend |   |
|   | MGM |   |
|   | Maternal Uncle |   |
|  | Maternal Cousin |  |
|  | Maternal Aunt |  |
|   | Caseworker |   |
|   | CYS Supervisor |   |

##

**Please indicate the emergent concern(s) and actions decided at the family meeting:**

|  |
| --- |
|  **Concern:** A safe, loving home for Child 1 and Child 2 with people they know  |
| **Pe Person Responsible/Initials** | **Action:** |  **Date to be completed**  |
|  Maternal Cousin Maternal Cousin, Maternal Aunt, MGM, MGGMMom, Maternal Uncle  | The family would like MC to be the temporary placement for children while \_\_\_\_\_\_ gets treatment.Provide support to Maternal Cousin when she needs help with appointments, childcare for the boys. Mom would like her brother to bring the boys to her house to say goodbye before she leaves for rehab.   |  Immediately Immediately January 16, 2020 |
| **2. Concern:** Mother’s drug use and recovery |
|  **Person Responsible/Initials** |  **Action:** | **D Date to be completed**  |
| Mother  Mom, Caseworker Mom, Caseworker | Referall Mother agrees to pursue inpatient drug treatment. She has an appointment on 1/16/2020 at 9:30 am with Family Treatment Court at the County CYS Office to start the process.Caseworker will assist Mom in getting connected with the County Family Treatment Court to work through her recovery, when appropriate.As soon as it is allowed, CYS will arrange visits between Mom and her boys in the treatment facility. Mom would like visits as often as allowed. | January 16, 2020 As neededASAP |
| **3. C Concern:** Education for Children |
|  **Person Responsible/Initials** | **Action:** |  **Date to be completed**  |
| CYS, Maternal Cousin Maternal Cousin, CYS |  Mom would like Child 1 to be referred to Early Intervention for services. CYS will make the  Referral. The first step will be an evaluation to see If he qualifies. If he does, services will begin as soon as possible. Mom would like Child 2 enrolled in school ASAP. He will be enrolled in the school closest to her home. CYS is available for support, as needed.  | ASAP ASAP |

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| **3. C Concern:** Support for Child 1 and Child 2 |
|  **Person Responsible/Initials** | **Action:** |  **Date to be completed**  |
|  Mom, Maternal Cousin,Maternal Uncle Mom, MA, MU, MCAll family membersCYS | Mom will put together clothes to last 7-10 days for the boys along with special toys to send to MC’s house. MC and MU will make arrangements to get them to MC’s house. .Mom would like Children to go to X Pediatrics for doctor’s appointments. She will gather all the needed permissions, numbers, information for all appointments for the boys and pass it along to the family before she goes into treatment.It’s important to Mom that people do not treat the boys like a nuisance, and that they are cared for and loved by everyone looking after them.  Mom said the boys’ father is getting released from incarceration on Feb. 8, 2020. She would like CYS to support contact between him and the boys, where/if allowed by the conditions he has on him.  | January 16, 2020January 16, 2020Ongoing TBD |

Private Family Time Offered

 **X**

**Additional support people:**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Relationship:** | **Contact Information** |
|   | Cousin |   |
|   | Aunt |  |
|   | Father |  |
|   | MGGM |   |
|   | Friend of Mom |   |
|   | Friend of Mom |   |

**NOTES:**