



CHILD AND FAMILY TEAM MEETING FACILITATOR DEBRIEF / FEEDBACK

State Form 54600 (R2 / 8-22)
DEPARTMENT OF CHILD SERVICES

In order to ensure Child and Family Team (CFT) Meetings are effective, it is important that you complete this form within twenty-four (24) hours of your CFT Meeting. Peer Leads/Facilitator Coaches: Variations in questions help you determine how to answer based on your relationship to the Facilitator. Please bring this form with you to your next supervision meeting to discuss with your FCM Supervisor.

NOTE: All new facilitators are required to facilitate one (1) additional CFT Meeting on their own within thirty (30) days of being observed by their Peer Lead/Facilitator Coach for official release from new facilitation training. It is the new facilitator's responsibility to provide their region's Practice Model Consultant with the completed notes from the one (1) additional CFT Meeting. The notes appraisal needs to be at a satisfactory level or above in order for the facilitator to be released. The region's Practice Model Consultant will ensure that the master facilitation training list is updated showing the new facilitator has been officially released as a trained facilitator and will notify the region's Practice Liaison.

Name of Family Case Manager (FCM)	
Name of Family	
Name of Peer Lead/Facilitator Coach	
Date of CFT Meeting (<i>month, day, year</i>)	Date form completed (<i>month, day, year</i>)

What went well with the preparation of the CFT? What would you do to improve that process?
(Peer Lead/Facilitator Coach evaluation regarding Facilitator's strengths and needs during the preparation of the CFT.)

What went well with CFT Meeting? How was that achieved? What would you have done differently?
(Peer Lead/Facilitator Coach evaluation regarding Facilitator's strengths and needs during the CFT Meeting.)

What do you need to feel more successful facilitating your next CFT Meeting?
(Peer Lead/Facilitator Coach Evaluation regarding Facilitator's readiness in facilitating CFT Meetings; list Facilitator's strengths and needs; release/not release and why?)

What type of follow-up will you complete after the CFT Meeting? (Peer Lead/Facilitator Coach Evaluation regarding next steps if not releasing as a Facilitator.)

Signature of Facilitator

Signature of Peer Lead/Facilitator Coach

Signature of FCM Supervisor