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| DYS Seal | **Commonwealth of Massachusetts** |
| ***Executive Office of Health and Human Services*** |
| **Department of Youth Services** |
| **Family Engagement Principles and Guideline****Dated January 2019** |

Department of Youth Services (DYS) values families as essential partners in our efforts to create environments where youth can make positive change. DYS recognizes that supportive family engagement leads to improved behavior, stronger school performance and reduced recidivism for youth.

DYS shall infuse family engagement into as many aspects of our everyday work as often as possible to support youth success. Using these guiding principles, DYS seeks to increase access and participation for families in treatment, release and discharge planning. This guide serves as a reference to encourage more family involvement during the educational process, service coordination, community supervision, and agency sponsored activities and events. These principles and guidelines apply to all youth involved in DYS including those over 18 years of age.

A. General Principles for Family Engagement

Each DYS state operated and provider-contracted location shall incorporate family engagement principles including those identified here to engage families in as many aspects as possible.

1. Youth and families shall have input into the development of visit schedules and activities, and find suitable times and activities in order to help foster positive connections and engage families within their locations. When creating schedules, staff shall identify as many hours as possible for visits with as few restrictions as possible and include special events for families such as dinner visits, family activity nights, holiday parties and youth performances; visits at off-site locations such as at the gym or a park in order to engage families in different activities as allowed by the DYS Pass Policy; and consider flexible hours outside of regular visits to accommodate individuals unable to make regular times or have to travel longer distances.
2. Locations shall consider input on family engagement from family service organizations or other parent advisory boards where applicable.
3. At the time of intake, and during the course of a youth’s residential treatment, employees, including clinicians and caseworkers, shall identify family members and supportive individuals to be approved as visitors. Once approved, visits should be encouraged in accordance with this policy and location specific procedures. Employees shall also ask family members and the youth to identify other supportive individuals who will visit the youth. The youth’s interests may be a basis to identify others who could be supportive individuals for visits.
4. DYS shall provide services that are appropriate and based on families’ cultural values. Families are encouraged to inform staff of cultural and ethnic considerations to be included when developing each youth’s case plan and treatment program.
5. Families may bring in specialty foods as allowed by the location for special events sponsored and planned by DYS.
6. Employees will work together with families to facilitate their active participation in their youth’s treatment and programming. Active participation may include assisting with transportation and calling the family after meetings for updates if they are unable to attend. Families will also be encouraged to understand and reinforce the new skills the youth is learning and to help the youth utilize these new behaviors in the program and in the community.
7. DYS values input from families and will provide access for families to regularly engage and communicate with program administration including informing families of their ability to participate and share feedback through surveys and interviews.
8. When appropriate, DYS will offer counseling, support services/resources and referrals to youth and families such as Parent support groups, meetings with a Family Engagement Specialist and information about the following:
	1. Domestic Violence Referral Services
	2. Child Requiring Assistance (CRA) Information
	3. Services through the Department of Children and Families (DCF) and/or Department of Transitional Assistance (DTA)
	4. Health Insurance information including Community Health Care and Community Behavioral Health Initiatives (CBHI)
	5. Camps and Youth Recreational programing information
	6. Parent Advocacy Groups information
	7. Youth Grievance Process
	8. Information on transportation assistance and opportunities including notifying families of local organizations that may offer ride assistance
	9. Substance abuse assessment and treatment services
	10. Youth parenting skills

B. Incorporating Family Engagement Principles throughout the Continuum

1. Orientation at all Locations

a. Intake staff from the program where youth is placed will call the parent/legal guardian to share information about site (name, address, phone number, visiting and call times) where the youth is located.

b. Youth is encouraged to also call/speak to parent/guardian as soon as possible.

2. Family Engagement with Caseworker and Community upon Intake

a. Caseworker shall be assigned and make contact with the family within 3 calendar days of a youth being committed to DYS;

b. Assigned caseworker shall arrange a visit in the community with the parent or guardian within 7 business days;

c. At the initial visit, the caseworker will review with the parent:

i. the orientation packet describing the services the youth will receive;

ii. forms that the parent or guardian must complete including releases;

iii. assessment and staffing process and importance of the parent or guardian’s role in designing a case plan for the youth; and

iv. identification of other individuals who could visit the youth.

d. Caseworker may utilize the Family Engagement Specialist to discuss family needs and identify additional resources.

3. Encouraging Family Involvement at Assessment Locations

a. While at assessment location, the casework team and program staff shall:

i. Contact, interview and encourage the parents’ or guardians to participate in completing the youth’s assessment;

ii. Discuss programs and services available to DYS youth and families;

iii. Encourage families to contribute to the case planning process including their goals for the youth;

iv. Schedule staffing at a time to accommodate family members; and

v. Explain that the staffing is a forum to discuss decisions regarding treatment plan and specifics of the staffing, ie, length of meeting, who attends, format, etc.

vi. Include the parents/legal guardian in the Regional Review Team (RRT) meeting to discuss placement by explaining the specifics of RRT and inviting them and allowing them to participate.

b. Following the staffing and within 24 hours of any decisions by the Regional Review Team, the youth and parent or guardian shall be notified of decisions regarding the youth’s course of treatment and placement.

4. Incorporating Family Participating at the Residential Treatment Locations

* 1. Within 2 days of placement at a residential treatment location, a clinician shall be assigned and complete the following:

i. Contact and encourage the parents/guardians to participate in the youth’s treatment;

ii. Discuss programs and services available to DYS youth and families

iii. Provide ongoing consultation to the parent or guardian about the youth’s progress in clinical treatment;

iv. Encourage family to participate in therapy as per the treatment plan.

b. Monthly Treatment Meetings, including the 90-60-30 day meetings, to review the progress that the youth has made in clinical and educational services, as well as his/her behavior in programming shall be scheduled to accommodate family members and conducted in a way that the family can contribute, ask questions, share their hopes and concerns for their youth’s return to the community, and feel connected and supported by the plan that is developed.

5. During Community Supervision, Caseworkers shall encourage the family to stay involved and to communicate with the DYS caseworker as further detailed in the Case Management Practice and Procedure Manual.

C. Release Requirements

1. Releases for a parent or legal guardian to receive youth information are not required if the youth is under 18 years old. A parent or legal guardian is entitled by law to inspect a youth’s file at any reasonable time. Questions regarding sharing information pertinent to the youth’s care while at DYS including the case plan, assessment, case history, incidents involving the youth and monthly treatment plan shall be referred to the General Counsel’s Office.
2. For youth under 18 years old, youth shall be notified that such information will be shared with their parent/ guardian. If the youth is uncomfortable sharing this information, staff will help the youth develop a plan to address the concerns.
3. For any youth 18 years or old, the youth must sign a DYS release of information indicating who may receive this information.

D. Notifying Parents/Guardians of Incidents involving the youth

 1. As soon as possible and preferable within one hour but no later than the end of the shift of the following incidents occurring, the caseworker, if applicable, and the youth’s parents/legal guardians must be informed by the residential staff by telephone. If the program cannot reach the family by phone by the end of the shift, the residential program will continue to call until such contact is made.

i. transfer of youth to another DYS facility;

ii. screening of youth for acute psychiatric evaluation;

iii. findings of the screening of the youth for psychiatric evaluation;

iv. youth was involved in an assault

v. youth was involved in a restraint;

vi. youth placed in room confinement;

vii. youth attempted suicide or other self-harming behavior

viii. youth receives an injury requiring first aid or

ix. 51A is filed to report abuse and neglect of the youth.