

## **An orientation to Conferencing and Teaming...**

# **Allegheny County Department of Human Services (DHS) Conferencing and Teaming**

### **What is DHS Conferencing and Teaming?**

Conferencing and Teaming begins with a gathering of the individual or family participant (sometimes called the consumer), family members, friends, and professionals. A participant may be the parent(s)/guardian of dependent(s). Everyone meets to plan and organize support based on the *participant's perceived needs and goals*. The first meeting is called a *conference*. The conference results in a specific plan in the family's own language. A highly-trained facilitator uses a structured agenda to support the meeting. After the conference, the participant and family meet with professionals and friends in ongoing meetings called *teaming*. The goal of teaming is to build a strong network of participant, family, friends, and professionals to address concerns and assist the participant in reaching her/his goals, making decisions, and becoming self-reliant.

### **What is the purpose of the meetings?**

Conferencing and Teaming allows the participant to plan what actions are needed to improve her/his health, safety, well-being, and self-reliance and, in the case of a parent or guardian, the dependent's health, safety, and well-being. The best plans support the efforts of participants to take responsibility for those steps and actions that are needed in order for their situation to improve as they have defined improvement. Teams are constantly planning ways to strengthen healthy and self-reliant relationships within families and networks of friends, mindful that formal services will decrease over time and eventually end. Teams ensure that all services are working and fit together. When differences and conflicts arise, team meetings provide a way to discuss and resolve them. Meetings acknowledge the strengths and capabilities of participants and family members and provide team members opportunities to celebrate successes.

### **Who attends Conferencing and Teaming?**

Participants choose the members of their conference and team meetings. However, the facilitator can encourage participants to include specific members when their presence will make a stronger, more effective team. Service providers must attend team meetings when invited. Teams are effective and successful when all individuals who impact the lives of participants attend and come willing to take actions necessary to improve and support health and self-reliance.

### **What happens at meetings?**

Members of the conference and team are chosen by the participant and they gather at a place of their choice. Meetings occur because there is a specific concern and meetings are organized around supporting the team addressing these concerns and challenges. The facilitator supports everyone at the meeting using a structured agenda to address difficult issues and mobilize necessary resources. With experience, participants and family members can become comfortable facilitating their own meetings. The typical steps of a meeting include:

**One: Welcome** and team member introductions.

**Two: Purpose for the meeting:** Facilitator discusses the use of the conferencing and teaming model, its purpose and philosophy.

**Three: Outcomes for the conference/meeting:** Participant states the goals/outcomes for the conference and the facilitator helps to gain agreement from the team to work on these outcomes.

**Four: “Non-negotiables” and confidentiality:** Facilitator discusses any “non-negotiables” and asks the team to sign a confidentiality statement.

**Five: Ground rules:** Facilitator asks for ways to help manage emotions and keep the meeting focused on the outcomes.

**Six: Family story:** The family story establishes this time as the “family’s meeting,” and assists the team in developing empathy for the family.

**Seven: Strengths to achieve outcomes:** Facilitator asks the team members to identify family strengths to help achieve outcomes.

**Eight: Identification of individual and family needs:** Facilitator asks the family what they need to achieve the outcomes.

**Nine: Brainstorm how to meet needs:** Team creates a list of ideas, without limiting the possibilities to available funding or services.

**Ten: Develop the plan: agreements for who will do what, when:** Ensure that steps are small and measurable, with time limits; identify what, who, and when to accomplish steps; design some steps to be short term to permit early success; each team member gets a copy of the plan.

**Eleven: Assessing what can go wrong:** The facilitator helps the team to explore if there is anything they can foresee that can go wrong with the plan. Could a crisis prevention plan be developed? Were there previous attempts to address similar concerns and, if so, who did the family reach out to then for assistance and support?

**Twelve: Private family time:** The participant, family, and natural supports meet privately to discuss and improve the plan and future meetings.

**Thirteen: Next steps and closing:** Thank the participant, family members, and support people for their efforts. Schedule the next meeting (future meetings may not require the full team) and commit to providing a written copy of the plan to each team member.

Questions?

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