Family Treatment Team Meeting Preparation Checklist and Questionnaire

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Evaluation with the youth and the youth's family or caused as the basis of the treatment plan in the areas of community functioning as well as toward meeting dev	school, vocational, family, social, and
e of this preparation meeting:	
nature(s) of agency staff involved in this meeting:	
We, the Family/Caregivers ofeting.	understand the purpose of this
We, the Family/Caregivers ofpose of this meeting.	need more information about the
natures of Family/Caregivers involved in this meeting:	