1201 – CHILD PLACEMENT SERVICES
CHANGE # 02-2010
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V. OUT OF HOME PLACEMENT SERVICES

Through MRS, System of Care principles and family centered practice, parents are supported in their efforts to care for their children in ways that assure the safety and well being of the child. There are times however, when children can not remain in their homes. Therefore every child in the custody and/or placement responsibility of a county Department of Social Services shall receive services from the agency that are designed to achieve the most appropriate permanent plan for the child and that meet the child’s individual needs. Child and family teams involve families in the process of service planning and delivery while focusing on the family’s strengths. It is our job to instill hope because even families who feel hopeless can grow and change. In addition, the county DSS shall provide services to children and families that facilitate placement out of the home, when removal and placement is necessary. Services are required regardless of the type of placement facility or the source of payment for a child's care.

A. Partnerships in Parenting

Children’s Protective Services are involuntary services. The state has the responsibility to act in place of the parent and to intervene when the welfare of the children is threatened because of abuse, neglect and dependency. When intervening, the state has limited, but powerful options. Through the use of child and family teams a decision can be made that would allow for the agency to support and maintain the parent relationship and leave the child in the custody and care of the parents. A joint decision can also determine that the agency should assume custody while leaving the child in the home. A Child and Family team can determine that the child is at risk of repeated abuse or neglect if left in the parent’s care and place the child out of the home.

Whenever it is safe to do so, the job of public child welfare agencies is also to preserve, or help strengthen, families at risk of disruption. The single most powerful relationship upon which to build is the attachment between the child and the parents. Attachment is the single most powerful motivator for parents in crisis. System of Care encourages us to find the strengths in each individual and build upon them. Some parents have been overcome by physical or emotional problems, have not developed skills important for parenting, or have learned harmful and dangerous ways to parent. For these parents, attachment to the child may be the motivation to acquire new parenting skills. Family Centered practice shows us that a crisis is an opportunity for change.
Helping parents see that the purpose of services provided to them is to develop and protect their attachment to their children, will allow them to see services as supportive. When parents believe the agency is committed to preserving their family, they will be more willing to enter into agreements to change negative parenting behaviors.

Partnership means that families help in developing alternative plans, so that permanency can be achieved as soon as possible should the primary plan no longer meet the needs of the child and the family. Partnership also means that social workers should establish an alliance with parents to protect their children, rather than an alliance with children only to protect them from their parents.

Forming partnerships is rarely easy. Parents have few reasons to trust those who have intruded into their lives. Parents may distrust social workers because of preconceived notions about child welfare social workers. Parents may distrust foster parents because they think the foster parents want to keep their child. Usually, parents have no relationship with adoptive parents. Adoptive parents who do not understand the importance of the child's ties to his or her birth family may feel threatened by foster parents, child welfare social workers and birth parents alike. Forming partnerships between these individuals is a critically important part in keeping the child's needs first.¹

B. Preparing the Family, the Child and the Foster Care Provider for Placement

Placement of a child in foster care requires assessment of the child and family's needs and careful planning. The placement process focuses on the whole family rather than only on the child in placement. The child, the family and the foster care providers shall be appropriately prepared for the placement prior to the physical move of the child, except in emergency removals. The social worker shall prepare the child and the parents for the placement by explaining, at a minimum: the reason for the removal; appropriate details about the placement; what to expect from the placement provider and social worker; how to access the social worker or agency in an emergency; when the next contact with one another, including siblings, will occur; and the legal process.

In the event of an emergency removal, the agency remains responsible for explaining the basis of the decision and the reasons that they were unable to prepare the child, family, and foster parents or other placement providers. Social workers shall discuss the placement with the family, the child, the foster parents as soon as possible following the removal and shall assist the family, child, and foster family with the transition.

When the decision is made to remove children from their homes, the County Department of Social Services shall inform the child and family of the decision to initiate a petition in juvenile court and shall inform the parents or caretakers of the right to appeal the court's decision.

1. Preparing the Family for Placement

Regardless of the reason for removal, placement of a child is traumatic for the parents of the child. Parents need time to prepare for the separation and the feelings of loss. The parents’ feelings of guilt, anger, and sadness may be expressed in a variety of ways and social workers should respond to parents’ emotions with sensitivity.

The social worker shall inform parents of the reasons the agency is seeking removal of their child and shall tell them frankly what must be done to reunite the family and protect the child’s health and safety. Risk factors identified during the risk assessment process should be clearly discussed with the parents and extended family. It should be stated clearly to the parents from the beginning that, although reunification is the desired outcome (in cases where reunification is the primary permanency plan), alternative permanency plans will be considered. The parents need to know that the goal is to achieve permanency for their child within one year and that it is in their control to determine whether their child’s permanent home will be with them or in another permanent placement.

The social worker shall inform parents that they have a right and a responsibility to be involved in planning for their child’s future and in decision making of an important or lasting nature.

The social worker shall explain that the Out of Home Family Services Agreement (DSS-5240) will be developed jointly with them. The family should also be informed if the agency plans to use a family group decision-making process and/or Community Assessment Team process to develop the Out of Home Family Services Agreement. (Refer to Section 1201, the Yellow Pages for more information on family group decision-making and Community Assessment Teams) The social worker should assure the parents that they will be treated as partners and full participants in the planning for their child, whenever possible. Parents also have the right to know honestly what the agency will do if they do not follow through with the activities and objectives of the Out of Home Family Services Agreement.
All parents of the child have the same rights and should be involved in case planning for their child. Therefore, it is the duty of the social worker to make diligent efforts at the time of placement (if not accomplished before) to locate parents, including legal and biological fathers.

Even after legal custody has been removed, parents continue to have the right to information about their child’s living situation and condition as long as reunification is the plan. The parents should be told appropriate details about the placement. When appropriate, the parents should have the opportunity to meet the foster care provider or to see pictures of the home and family where their child will be living.

The social worker should enlist the parents' help in giving reassurance to the child prior to his/her leaving home. If the parent is able to reassure the child in a nurturing way prior to the foster care placement, the social worker has learned that the parent has the capacity to put his/her own feelings aside long enough to help the child. The social worker can use this strength to help the parent make further changes. Sometimes parents are too angry, too immature, or too impaired to provide such help at the time of the initial move, but may be able to help later.

The aftermath of the child’s removal from the parent can cause an intense reaction. Parents may suffer intense feelings of anger and/or depression after the loss of their children. Even when the parent has not been an effective parent, he/she has some bond to the child. The social worker should initiate contact within the first day of placement, and it can be helpful for the parent to have some way of contacting the social worker immediately after the child's removal so that he or she can know how the child is doing. This contact, even if by telephone, can help the parent understand that the social worker is interested in him or her as well as the child. This can be a major step toward connecting with the parent to form a working relationship. At the time of placement, the social worker should also arrange a time for the next contact jointly with the parent. An emergency plan shall also be developed for the parent(s), in case immediate help is needed from the social worker.

Parents will often be angry and frustrated at the agency that took their children. They may direct their anger at the social worker. This may be uncomfortable for the social worker, but it can also be an indication that the parents are motivated to improve. The system asks a great deal of parents. The fact that their child has been removed from their care indicates to them that they have been judged as inadequate parents. It is natural that they feel angry at a system that causes them such personal loss of esteem.
In addition, the County Department of Social Services asks that they commit themselves to an extensive, time-consuming Out of Home Family Services Agreement in which social workers will be monitoring them to see if they are following through. This would be a difficult situation for anyone, especially parents who themselves may have lacked consistent loving parents, and have such overwhelming needs of their own that they do not have the emotional energy to care for demanding children. As an added stress, they know that if they cannot change their behavior, they risk the permanent loss of their children.

Services shall be offered to parents that are appropriate to the needs of the individual and which are designed to best address the condition necessitating removal of their child. Services should at all times be supportive of the parents and parents should be made aware of the behavioral changes expected as a result of the service.

When it becomes apparent that reunification will not be the plan, it is usually accompanied by major disruptive crisis in the family system. The family may know that reunification is highly unlikely but may ask the social worker if they can get their child back. It is not kind to offer false hope about reunification. The parents can be told that the Court has ultimate responsibility for this determination. As the social worker establishes a working relationship with the family, agency recommendations can be discussed more fully. The social worker can assure the parent that they will be able to contribute to the decision about what happens to the child, and may discuss voluntary relinquishment for adoption as a concurrent plan.

2. Preparing the Child for Placement

Recognizing that the act of separating a child from his/her parents and home is a traumatic event, preparing the child for this event is crucial. The social worker preparing the child shall keep in mind the concept of viewing this separation through the eyes of the child. Ideally, the child should have a period of preparation for placement in order to have time and opportunity to understand the new situation. Prior to placement, a child should have an opportunity to establish a trusting relationship with the social worker who will have the responsibility of working with him/her during the placement period. Except in an emergency, that social worker should be present during the physical move. The social worker should be skilled in handling placements with the utmost sensitivity. The child will feel extreme grief, loss, fear, and uncertainty. The child needs the support and the continuity of a caring social worker. The social worker should use counseling skills to help the child leave home and transition to foster care placement.
A child should have a period of preparation for placement in order to have time and opportunity to understand the new situation. The child shall know at all times what is happening to him/her, what is going to happen to him/her, and why. When appropriate, taking a child for pre-placement visits to the foster care home or facility will help prepare the child for placement. If the child cannot visit the placement before the move, pictures of the home and of the foster care provider will help ease the child’s fear.

The social worker should allow time, even in emergency removals, for the child to gather personal items and clothing to take in order to maintain some sense of continuity and familiarity. It is helpful for agencies to supply suitcases for children who are moving to a foster care placement and to allow the child time, when appropriate, to pack the suitcase with personal belongings to reassure the child that his/her “stuff” and, thus, his/her sense of identity is important.

The social worker shall also encourage parents to help in preparing the child for the move. Children need the reassurance of their parents. The parent(s) should be asked to help in the transition by making suggestions about bedtimes, routines, favorite foods, or other such things that can help the child feel more comfortable. Efforts by the parent(s) to share this information should be reinforced by the social worker telling the child that their mother or father made the suggestions to help him/her. However, parents may be too angry, too immature, or too impaired to help the child.

The child should be told when he/she will see his/her parents and siblings. If possible, social workers should discuss visitation before the child leaves the home. The social worker should also ensure that the child has a picture(s) of family members to take with him/her to the foster home.

Early in the work with the family the social worker should begin building the child’s life book by taking and procuring photographs of the child, birth family and foster placement. Children will continue to need physical documentation of their histories throughout placement.

3. Preparing the Foster Care Provider for Placement

In order to care properly for a child being placed in their home, foster parents, relatives or other foster care providers need to be told as much information as possible regarding the reason for the child’s placement and the needs of the child.
Medical information about the child shall be shared with the foster parents at the time of placement and updated as new information is learned. The Child Health Status Component (DSS-5243) shall be completed and provided to the foster parents within seven days of placement and the child shall be referred for a physical examination within the first week of an initial placement. Medical information is critical, since the foster care provider frequently takes the child to medical appointments. The foster care provider needs to know of any special medical problems that the child may have in order to care for the child appropriately. Foster care providers should be encouraged to take the Child Health Status Component and any other medical information about the child to medical appointments.

It is recognized that foster parents and residential care providers have a need to know the HIV status of children in their care. Infections or viruses that are less serious in a non-infected child can be fatal to an HIV-infected child, and foster parents must be aware of symptoms that require immediate medical attention. However, prior to disclosure of a child’s HIV status, DSS must consider and protect the child’s right to confidentiality. While concern for confidentiality exists throughout the service delivery system, information regarding persons infected with HIV requires special consideration. This is due to the potential social and psychological damage that can be caused by inappropriate sharing of such information.

G.S. 130A-143 provides that HIV status and information is strictly confidential and shall not be released or made public except under certain circumstances. One such circumstance provides that release of all or part of the medical record can be made with the written consent of the person or persons identified or their guardian. In this context, guardian applies to a local DSS having authority to release HIV status and information on a child in its custody on a need to know basis to foster parents and residential care providers.

Information on the child’s HIV status should be shared only with persons who have a need to know, and persons informed should be told that re-disclosure of the information is prohibited without consent of the child, the parent or guardian. Best practice would suggest involving the parents in these decisions to the extent possible and appropriate.

If the child is school-aged, the necessary information regarding the child’s educational needs shall be shared with the foster care provider in order to enroll the child in school and to collaborate with school personnel in ensuring that the child’s educational needs are met.
The foster care provider shall be told specific information about the child's behavior. It is important for the foster care provider to know what may be expected from the child behaviorally in order to respond appropriately to those behaviors. Agency policy and practice shall ensure that licensed placement providers are verbally informed of and provided with written policy addressing the following issues regarding discipline:

- Child discipline must be appropriate to the child's chronological age, intelligence, emotional make-up, and experience;
- No cruel, severe, or unusual punishment shall be allowed;
- Corporal punishment is prohibited; and
- Deprivation of a meal for punishment, isolation for more than one hour, verbal abuse, humiliation, or threats about the child or family will not be tolerated.

The social worker should also inform the foster parent of the concurrent permanency planning process for the child and of possible alternative plans for achieving permanence for the child. The foster parent should be informed of their role in planning for the child in partnership with the agency and the birth family, including participation in the Permanency Planning Action Team meetings. The social worker can also discuss with the foster family whether they want to consider becoming a child's permanent family if reunification is not possible.

C. Using One Caseworker or Casework Team

In a one caseworker or casework team approach, the social worker(s) responsible for CPS services continue to serve the child and family after the Department of Social Services has obtained custody and/or placement responsibility. This approach provides more continuity and stability for children and families during the times they most need it. By retaining the same social worker or a team of social workers, children and parents retain some familiarity and stability during an otherwise unstable period. There is no loss of information about the child and family and no adjustment period for the social worker, child, and family. The team approach likewise facilitates the transfer of information about the family. Social workers may even overlap or share services to the child and family before, during, and after the transition to foster care. If the agency contracts for some or all of the direct social work services, the contract social worker functions as part of the casework team.
In agencies that do not use the one caseworker or casework team approach, a thorough transfer of information between social workers is critical. A complete and effective transfer of information facilitates continuity of services for the child and family. Sharing information also helps the foster care social worker in developing a timely Out of Home Family Services Agreement for the family and a parallel legal plan for achieving safety and permanency for the child within one year. All information previously obtained about the family and a history of the agency’s involvement with the family must be thoroughly documented in the case record and effectively transferred from one social worker to the next. Whenever the case is transferred between social workers, a transitional visit should be planned to allow the family and child to meet the new social worker.

(Refer to Section 1201, the Yellow Pages for more information about One Caseworker / One Casework Team.)

D. The First Two Weeks of Placement

The first two weeks of placement are critical in the child’s transition to foster care placement and to the family’s engagement in the change process. The social worker should obtain as much information about the child and family as possible so that appropriate resources may be chosen and so that the social worker can help the substitute family to meet the child's needs. Assessment and planning are the activities that lay the foundation for the future work with the family and are important tasks in the initial placement process. Assessment and planning should involve collaborative efforts by all of the parties involved with the family.

1. Collaboration

To achieve the goals of foster care placement, MRS and family centered principles of partnership show us that it is critically important to consider a strategy of collaborating with all agencies involved with the family in order to develop one coordinated assessment process that involves the family in a comprehensive evaluation of their strengths and needs. A coordinated assessment process alleviates the need for the family to "tell their story" repeatedly to each different service provider. At the same time, this process ensures that services are coordinated and delivered in a manner that best meets the needs of the child and family over time.
Community Assessment Teams (or other family decision-making models) are valuable tools for assessing the strengths and needs of families and children in the early phase of placements. By involving the child’s family, relatives and other kin, foster parents, community supports and all of the agencies involved with the child and family in an early assessment process, everyone involved has the opportunity to understand clearly the reasons for placement and the issues that need to be resolved in order for reunification to occur or, if reunification is not the plan, the child’s need for permanency. Everyone involved contributes to the plan for permanency for the child and can clarify what each person is expected to do to contribute to that plan. Although the assessment process is ongoing throughout the placement, a Community Assessment Team meeting within the first two weeks of the placement provides an opportunity to focus on the permanency plan quickly, thereby facilitating timely achievement of that plan. A Community Assessment Team meeting within the first two weeks can motivate parents to make changes early and often leads to shorter lengths of stay. (Refer to Section 1201, the Yellow Pages for more information on Community Assessment Teams and one coordinated assessment)

2. Ongoing Risk Assessment

Risk assessment is an ongoing process that continues during placement of the child out of the home. As the work with the family proceeds, the factors that have been identified in the initial Safety Assessment, Family Risk Assessment, Family Assessment of Strengths and Needs and Case Decision Summary, and updated with new information from the Family Reunification Assessments, will help to shape the scope of work with the child’s parents. In preparing the parents for the removal of the child, explicit discussion of these reasons will already have been done. However, in preparation for the completion of the Out of Home Family Services Agreement, the social worker and the parents can begin the mutual process of reviewing the risk factors and identifying strengths and the needs that must be addressed in order for the child to be returned, if reunification is the plan. This, in turn, will facilitate and solidify the Out of Home Family Services Agreement planning process with the parents.

MRS and System of Care shows us that the work of reunification must be a mutual partnership between the agency, the parents, and any other significant person or agency.
As the risk assessment process continues, the social worker and parents should discuss family strengths with the same degree of intensity as they do the identification of the needs within the family. No matter what problems a family demonstrates, there are strengths within the family. These strengths are the social worker's ally in helping the family make the needed changes so that the child can be returned.

3. Other Children in the Home

As a part of the risk assessment, social workers should remember the other children that may remain in the parents' home. Frequently, these children have service needs of their own. In many cases, once the "identified child" has been removed, the other children in the home are at greater risk. Thus, the social worker shall continually assess the risk of harm to the remaining children and to incorporate their needs into the Out of Home Family Services Agreement as necessary. Documentation of these ongoing services and risk assessment shall be incorporated into the court report.

According to State law, at each hearing to determine the need for continued non-secure custody, the Court shall:

- inquire as to whether there are other juveniles remaining in the home from which the juvenile was removed and, if there are,
- inquire as to the specific findings of the investigation conducted under N.C.G.S. § 7B-302, and
- any actions taken or services provided by the Director for the protection of the other juveniles.

4. Medical Needs and the Child Health Status Component

When a child is placed out of his/her home, information about the child's medical needs, medication, any special conditions, and instructions for care should be given to the foster parent prior to or at the time of placement. The social worker is responsible for bringing any medications, glasses, hearing aids, etc. to the foster care placement with the child. Social workers should document in the record when these items are given to the foster care placement providers. The Child Health Status Component (DSS-5243) shall be completed within seven days of initial placement and a copy shall be provided to the foster parents.
Frequently, it is the foster parent who takes the child to medical appointments. Therefore, it is important that the foster parent have the Child Health Status Component to take with them to those appointments, as well as any other medical or social history information that impacts the delivery of health care services. Any printed summary report that is provided to the physician should have non-essential, confidential information (such as the identity of the perpetrator) removed or obliterated. The Child Physical Evaluation form (dss-5244) is recommended for use by physicians to record findings and to assure continuity of care among providers.

A child must have a physical examination scheduled within seven days of the date of placement. Social workers shall also schedule dental, developmental, psychological, and educational assessments, when needed, within one week from the identification of the need.

It is recognized that foster parents and residential care providers have a need to know the HIV status of children in their care. Infections or viruses that are less serious in a non-infected child can be fatal to an HIV-infected child, and foster parents must be aware of symptoms that require immediate medical attention. However, prior to disclosure of a child’s HIV status, DSS must consider and protect the child’s right to confidentiality. While concern for confidentiality exists throughout the service delivery system, information regarding persons infected with HIV requires special consideration. This is due to the potential social and psychological damage that can be caused by inappropriate sharing of such information.

G.S. 130A-143 provides that HIV status and information is strictly confidential and shall not be released or made public except under certain circumstances. One such circumstance provides that release of all or part of the medical record can be made with the written consent of the person or persons identified or their guardian. In this context, guardian applies to a local DSS having authority to release HIV status and information on a child in its custody on a need to know basis to foster parents and residential care providers.
Information on the child’s HIV status should be shared only with persons who have a need to know, and persons informed should be told that re-disclosure of the information is prohibited without consent of the child, the parent or guardian. Best practice would suggest involving the parents in these decisions to the extent possible and appropriate.

5. Educational Needs and the Child Education Status Component

The Fostering Connections to Success and Increasing Adoptions Act (P.L. 110-351) addresses a number of concerns about outcomes for children who have entered foster care placement. Educational instability can cause great harm to children in foster care:

- Children who lose contact with their educational community upon entering foster care lose not only their contacts with teachers and friends but also with the continuity of their learning process. Disruptions in relationships as well as in the educational process often lead to lost grade levels and basic knowledge.
- Children who are moved between schools simply as a result of multiple placements continue to suffer in their learning, in their grade placements, and in the comfort of familiar surroundings and people.
- Lost or delayed educational records continue to negatively impact on a child’s academic process due to delays in enrollment.

Because of these issues, states are required to specifically address the educational stability of the child in the family services agreement. In order to meet the purposes of this requirement, the Child Education Status Component of the Family Services Agreement (DSS-5245 rev.3/10) has been amended to address the following requirement in Section 204:

“The child’s case plan must include (1) assurances that the child’s placement takes into account the appropriateness of the current education setting and the proximity to the school in which the child was enrolled at the time of the placement;
(2) an assurance that the state agency has coordinated with appropriate local educational agencies to ensure that the child remains in the school in which the child is enrolled at the time of placement; and (3) if remaining in the school is not in the child’s best interests, assurances by the state agency and the local educational agencies to provide immediate and appropriate enrollment in a new school, with all of the educational records of the child provided to the school.”

Completion of the Child Education Status Component (DSS-5245) is required within seven days of placement and a copy shall be provided to the foster parents. However, it is more helpful if that information can be given to the foster parent at the time of the placement in order to facilitate enrolling the child in school. The foster parent(s) as well as the parent(s) should be included in educational decisions about the child.

6. Contact between the Social Worker and the Child in Foster Care Placement

The social worker shall have face-to-face contact with the child at least once within the first week of initial and subsequent placements. However, a telephone call or visit to the foster parent the day after placement provides reassurance to the child and the foster care provider. Prompt contact after placement also allows the social worker to answer any early questions about the care of the child. The foster care provider and the child should know as early as possible when the next face-to-face contact with the social worker will be and when the first visit for the child with the birth parents and/or siblings will be.

The social worker shall have face-to-face contact with the child at least monthly, unless otherwise indicated in the Out of Home Family Services Agreement. The majority of these visits should be in the child’s residence. The social worker shall also have face-to-face contact with the foster parents at least monthly.

7. Documentation within the First Two Weeks

Because these first weeks of placement are so crucial in the child and family’s life, it is most important that accurate and timely documentation be kept. Documentation provides a record of the events and processes in the agency’s work with the family as well as a record of the interaction with the agency.
From this documentation, plans can be drawn and the risk that the child will stay too long in care will be minimized. In addition, pictures of the child and the family during this period help the child’s adjustment to foster care placement. With the proper foundation laid in the first weeks of placement, the next phase of work with the family can begin.

The dss-5094 and IV-E eligibility determination forms should be completed and data entered within 24 hours of placement.

During the first two weeks, documentation regarding missing parents and relatives should be reviewed and supplemented. The Court will ask about the whereabouts of missing parents, including legal and biological fathers, at the seven day non-secure custody hearing, as well as at subsequent hearings. Available information should have been recorded during the investigative assessment phase, but unknown or unresearched information should be updated. The Child Support Enforcement Unit, the Federal Parent Locator Service, and the Internet White Pages are three useful sources to locate the addresses of missing persons.

(Refer to Section 1201, Record Keeping and Documentation, for further information on record keeping requirements).

E. Maintaining One Single, Stable Foster Care Placement

The agency shall arrange for and maintain a single, stable living arrangement for each child, preferable within the child’s own community. A child will be moved only when it is in his best interest, and there are clear indicators to support the necessity of the move. Documentation shall reflect diligent efforts made to maintain a single placement in the child’s community or reasons why this is not possible.

Foster care placements should be carefully selected and well prepared, with placements based on child’s needs and ability of foster parents to meet those needs. The social worker must provide consistent and ongoing support to the foster family and facilitate the resolution of problems that occur when the child is placed in a foster home. Foster parents should also be valued as partners with the agency and family in providing for the best interests of the child. Foster parents that are actively involved in the planning for the child are better prepared to provide a stable placement and often become the best permanency option for children if reunification fails.
The agency should have a plan to manage placement disruption and should document and record disruptions in both the child’s record and in the foster parent’s record. This record can provide valuable information as to what kinds of behaviors a particular foster parent cannot handle. This analysis can guide future placement decisions, as well as identify training needs of the foster parents. One of the best tools to manage placement disruption is to plan for placement supports such as regular and consistent respite care. The social worker should have sufficient contact with the foster placement provider to know when conditions exist that could lead to disruptions. Intensive Family Preservation Services, as available, are also a resource for preventing foster care placement disruptions.

When a Child Protective Services report involves an allegation against a foster parent, there shall be a Safety Assessment completed by the county responsible for the assessment to determine the safety of the child in foster care and to all other children in the care of the provider. Prior to the case decision, children shall be removed from the foster home only when the Safety Assessment indicates that the child is unsafe. (Refer to Family Services Manual, Chapter V, Jurisdiction in Child Welfare).

F. Required Services for Children

- The agency shall evaluate and supervise the placement of children to ensure that they are receiving proper care.
- The social worker shall make frequent visits with children in foster care placement. Face-to-face visits shall be conducted at least once during the first week of initial and subsequent placements in order to assess the child’s adjustment, or there shall be documentation to reflect diligent efforts. The social worker shall have face to face contact with the child at least monthly. The majority of these visits shall be in the child’s residence. The social worker shall have more frequent contact when indicated by the child’s needs. The need for less frequent contact must be documented in writing and the documentation should include the level of contact expected.
- Within one week of placement, a visitation plan for siblings to visit each other shall be developed and placed in the record. A signed sibling visitation plan shall be current at all times. Whenever circumstances warrant a change in visitation, a new visitation plan will be developed within 7 days.
• The social worker shall make contact at least twice a month with a person or persons significant to a child’s case other than the placement providers, such as family members, collaterals, or other service providers. The agency shall have more frequent contact when indicated by the child’s needs. The need for less frequent contact must be documented in writing.

• Children in foster care placements shall have physical examinations scheduled within seven (7) days of the date of their placement.

• Children shall have visits with their parent(s), siblings, and family unless otherwise ordered by the Court or there is written documentation that visitation would be harmful to the child.

• Children receiving foster care services shall have individualized, written Out of Home Family Services Agreements, which state the permanency goal for their future and a target date for completion.

• Children in foster care placement shall receive services designed to assure their emotional and developmental needs are met. Children shall also receive services that help mitigate the feelings of grief and loss that result from removal from the home.

• The agency shall ensure that the child receives all needed evaluations, medical care and psychological treatment services needed through referral to other agencies and providers.

• Youth 16 and 17 shall be assessed to determine their needs for services to prepare them for making the transition from foster care to independent living. Specific areas of need, as listed on the Out of Home Family Services Agreement (dss-5240), must be assessed including education, vocation/job preparation, basic living skills, and personal/social/emotional development.

Youth ages 16 and older shall receive independent living services as indicated by their personal needs assessment, which the social worker shall complete. The plan for independent living services shall be documented on the Transitional Living Plan of the Out of Home Family Services Agreement (dss-5240). If a youth will not be able to live independently due to profound developmental, physical, or mental disabilities, the basis for this determination must be documented, and a Transitional Living Plan is not required. Youth who are mildly or moderately disabled and who can benefit from aspects of the program shall be offered services appropriate to their needs, and a Transition Living Plan is required. Refer to the Family Services Manual, Volume I, Chapter IV, 1201, Adolescent Services for information on developing a Transitional Living Plan.
G. Agency Plan for Abducted or Runaway Foster Children

The mission of ensuring a safe, permanent nurturing family for children is supported by an agency’s capacity to prevent, and manage, instances in which a child in its legal custody or placement authority may be missing or runaway from a foster care placement. Missing foster children are defined as those who have either left care voluntarily (runaways) or involuntarily (abduction or lost), and can not be accounted for by the agency responsible for their care and placement. Each county DSS is required to have an agency policy regarding missing foster children that addresses both prevention and recovery issues.

The agency’s plan must describe steps it will take to prevent the abduction or runaway of a foster child. Examples of these efforts may include the following:

- Maintain administrative oversight of its program and practice to ensure agency compliance with laws and policies concerning case contacts, reviews and hearings.
- Maintain photographs of foster children in the case record.
- Design the work schedules of staff to be sufficiently flexible to meet the child’s needs.
- Strictly enforce requirements regarding the frequency of direct contact with foster children.
- Assure supervisory review and staffing of all foster care cases on a regular schedule.
- Recruit and support foster homes in communities from which foster children come into care.
- Utilize the child’s Permanency Planning Action Team meetings to facilitate community service provision and collaboration to meet individual needs.
- Maintain close communication with foster parents, group home staff, and GALs to assure that information is shared on a timely basis.

The agency’s plan must also describe steps it will take to assist in the recovery of a missing child. At a minimum the agency’s plan must include the following activities:

- Provide immediate verbal notification to the appropriate, local law enforcement agency, and follow up by sending subsequent written notification within 48 hours.
• Provide immediate verbal notification to the child’s family and GAL and discuss collaborative efforts that all parties can take to locate the child.

• File a motion with the Court within 10 to 14 days after the child was known to be missing or runaway to inform it of the child’s status and efforts being made towards recovery.

• Document in writing the agency’s continuing efforts to locate the child and to collaborate with law enforcement, GALs, family members and other appropriate persons.

Information to be shared with law enforcement includes:

• Biographical information and photographs
• Names and addresses of friends, relatives, present and former foster parents and placement staff, and acquaintances
• Locations which the child tends to frequent
• Suspected destinations and accomplices
• Prior disappearances and outcomes

Other information regarding special circumstances must be particularly highlighted in communications with law enforcement officials. Examples include:

• Child younger than 13 years of age
• Child believed to be out of the zone of safety for his or her age and developmental stage
• Child mentally incapacitated
• Child drug dependent, including prescribed medication and/or illegal substances, and the dependency life-threatening
• Child missing for more than 24 hours before being reported to police
• Child believed to be in a life-threatening situation
• Child believed to be in the company of adults who could endanger his or her safety
• Child’s absence inconsistent with his or her established patterns of behavior and the deviation not readily explained
• Other circumstances involved in the disappearance that would cause a reasonable person to conclude that the child should be considered “at imminent risk”.

1. Services for Children: Practice Guidelines

The social worker should provide a continuous relationship with children in foster care placement through case planning, case management and frequent visits. The social worker should assist the children in their personal, social, and emotional development while in foster care placement; in their continuing relationships with members of their own family and other persons; and in addressing problems facing them as a result of foster care placement. The social worker should also provide referrals to counseling services for children, as needed. Frequency and intensity of social work contact should be determined by individual needs and problems of the child, but no less than monthly face to face contact.

The social worker should help children understand why they cannot live with their own parents, so that they will be able to understand their foster care placement and make use of available services. It is important for a child in foster care placement to have a “part of his/her own family” with him/her, such as pictures of parents and favorite toys.

During the early stages of placement, the children should have close contact with the social worker, until the desired relationship with the foster care placement provider is established. Children removed from their homes need special attention and frequent contacts at the time of placement in a new foster care facility, as well as any time the child is moved from one living arrangement to another.

Special attention should be given to changes affecting the social work relationship, such as changes in frequency of contact, vacation, transfer of social worker, or termination of contact through the social worker’s leaving the agency. Changes of social worker may reactivate in children fears of separation and abandonment. These fears can lead to disturbances in children’s behavior and subsequent consequences in their relationships with foster care placement providers, teachers, friends, and others.
Children need and deserve adequate preparation for changes in service delivery and need to understand why changes are taking place. Casework teams reduce the anxiety children and families experience when individual social workers leave the agency.

Children who are old enough and of sufficient maturity shall be invited to participate in all case reviews. At any age, children should be aware of what the agency is planning for their future and, to the extent appropriate, they should be involved in the decision making.

Children, should be given an opportunity to discuss openly their feelings about a placement. This exchange should occur prior to a placement and during the placement. Often the social worker is the only person the child feels he/she can talk to. Children in foster care placement must be treated with respect.

H. Required Services for Parents

Parents of children in foster care placement retain many of their rights, including the right to visit their child, unless the Court has ordered that visitation is not allowed. Parents also have the right to information regarding their child’s circumstances and adjustment in the foster care facility and in school. County Departments of Social Services shall ensure that parents have the information to which they are entitled, including a copy of the Out of Home Family Services Agreement and the visitation plan, and should involve parents in making decisions regarding their child’s placement whenever possible.

Services should also be offered to parents. Services should be appropriate to the needs of the individual and designed to best address the behavior or condition that necessitated removal of their child. Services should be supportive of the parents and the parents should be made aware of the behavioral changes expected as a result of the service. Efforts shall be made to involve parents in the development of the Out of Home Family Services Agreement.

1. Procedural Notice to Parents of a Plan to Change Placement of a Child

Parents shall be given written notice of any intended change in the placement of their child. The exceptions to the advance notice are:
the child’s health or well being would be endangered by delaying the action; or
the child would be endangered if prior notice were given.

To comply with the above requirement, the agency shall complete the following form:

a. Notice to Parent Regarding a Proposed Change in the Placement of the Child (DSS-5189I)

   • This form shall be completed by the agency when the decision is made to move the child.
   • This notice specifies that the parent has 10 days within which to advise the agency of his/her desire to discuss with the social worker or the Permanency Planning Action Team the plan for the proposed change.
   • If the parent does not agree with the decision of the social worker or the Permanency Planning Action Team, he/she has the right to request that the agency file with the Court a motion for review. Pending the hearing on the motion for review, the agency may move the child as planned; however, the court review will determine if the child shall continue in the new placement.
   • If the parents of the child are not living together, each parent must be given this notice.

b. Notice to Parent Regarding a Change in Placement of the Child (DSS-5189I)

   • This form must be completed by the agency when a child has been moved without prior notice to the parent.
   • This notice specifies that the parent has 10 days within which to advise the agency of his/her desire to discuss concerns about the change with the social worker or the Permanency Planning Action Team.
   • If the parent does not agree with the decision of the social worker or the Permanency Planning Action Team, he/she has the right to request that the agency file with the Court a motion for review.
The court review will determine if the child shall continue in the new placement.

- If the parents of the child are not living together, each parent must be given this notice.

2. Participation in Case Review

Parents have the right to participate in every review of their child’s case by the Permanency Planning Action Team. Parents must be provided adequate notice of team meetings. (Refer to Section 1201, Case Reviews, for more information).

Notice to parents regarding Permanency Planning Action Team meetings shall be in writing and every reasonable effort should be made to meet at a time and location that enables the parents’ attendance. Parents shall also be given notice of the issues that will be discussed and shall be informed that they will be given an opportunity to present information to the team from their perspective. Parents should be encouraged to bring relatives, kin or any other support person that they would like to have present at the meeting. Parents shall also be informed of their right to have an attorney present.

3. Participation in Judicial Review

Parents shall be notified of their right to attend judicial review hearings and of their right to be represented by counsel.

4. Social Worker Contact with Parents

When reunification is the plan, there shall be at least one face-to-face contact with parent(s) per month.

I. Parent /Child Visitation

1. Visitation Plans

The agency shall develop a Visitation and Contact Plan (dss-5242), as part of the Family Services Agreement, with each parent that specifies at least the frequency and location of visits. Visitation plans are required until the court orders termination of visitation or termination of parental rights. The Visitation Plan should be signed by the parents. If the parents refuse to sign, the social worker shall document their refusal on the form.
Often, parent attorneys advise parents not to sign anything. In that case, it may be helpful to involve the parents’ attorney in developing the visitation agreement.

If parents will not be visiting together, a separate Visitation and Contact Plan must be established with each parent. In any instance in which there are circumstances that necessitate a change in the Visitation Plan, the parents must be notified and a new agreement developed with them. Visitation Plans should be addressed in every court hearing and reflected in every court order, particularly when unsupervised visits are considered.

In addition to the frequency of visits, the Visitation Plan should address the following crucial elements:

- where visits will be held;
- length of time,
- transportation arrangements for the parents and the child;
- individuals, other than the parents, with whom the child may visit;
- whether visits will be supervised, by whom, and for what purpose;
- anticipated changes in the visiting arrangements as the case progresses;
- a clause requiring advance request for visits other than those regularly scheduled;
- explanation of possible consequences if the parties do not carry out their responsibilities; and
- whether other kinds of contacts are appropriate such as telephone calls, emails or letters and if monitoring of them is needed.

2. Benefits of Visitation

Visiting between parents and their children is an essential component of work with children in foster care and their families. It is also a right and a responsibility retained by parents. It has been demonstrated that children who have frequent, meaningful visits with their parents are more likely to return home.

Conditions supporting frequent and meaningful visitation include:

- Visits maintain and improve the parent/child relationship which facilitates return home. Visits enable children to see their parents realistically and rationally and can help to calm separation fears.
Visits show children that they are loved despite the physical separation. Visiting is the principal and often only means of maintaining, improving, or developing the child’s relationship with his/her parents;

- Visits provide the opportunity for parents to improve their parenting skills and to demonstrate their ability to care for their child;
- Visits provide the social worker the opportunity to observe and to evaluate the strengths and the weaknesses of the parent-child relationship. The social worker can determine whether behavior is appropriate or inappropriate. Information about the level of commitment of the parent can be gathered. The reaction of the child can be observed. Such information can assist the agency in making decisions regarding the most appropriate permanent plan.
- Visits provide a good indicator of the possibility of reunification and they provide the court and other agencies with documentation of the parent’s progress.
- Visits can be a motivator for parents who are making progress on the objectives of their Out of Home Family Services Agreement. When social workers observe parents making progress, they can ask the Court to review the visitation plan and revise it to allow more frequent visits, longer visits, or unsupervised visits, as appropriate.

3. Restriction of Visitation

The physical separation that is created by foster care placements does not eliminate the attachment between the parent and the child. Separations will have a marked effect on both the child and the parents. The emotions created by separation and the grieving that results may be difficult and will be intensified during and after visits. As a result, parental behavior during visits may be unpredictable and disturbed and may have damaging effects on the child. When problems and negative reactions occur, they should be handled first by clarifying why the problems are occurring and what can be done about them. If this does not lessen the problems, limiting different aspects of the Visitation Plan should be tried before consideration is given to terminating visits completely.

Before visits can be sharply limited or terminated, the agency should:

- Identify specific parental behaviors which are upsetting to the child;
• Demonstrate that the child's difficulties are not a child’s normal anxiety response to parent-child visits, and that they have destructive effects;
• Demonstrate that reasonable efforts have been made to explain to parents the implications of not working to improve visiting;
• Support the decision through consultation with medical, psychiatric, or other appropriate professionals;
• Petition for a court order limiting visitation, even if parents agree with this plan.

4. Practice Guidelines for Visitation

Visitation is an opportunity to build a case toward a permanent resolution and to serve the best interests of the child. Parents who are given the opportunity for frequent visitation and who take advantage of this opportunity, are more likely to keep their attachments strong and to work to have their child returned. Parents who do not follow through on the chance to visit or who demonstrate that their needs come before their children’s needs provide strong evidence that the connection is weak and that abuse or neglect are more likely to continue. In addition, agencies have the obligation to preserve the child’s relationship with the family until reunification has been eliminated as a permanent placement option.

Children need visits to:

• Keep a connection to their family
• Mitigate their grief
• Have their worth reaffirmed
• Have the assurance that their parents “exist”
• Re-establish and strengthen a relationship with their parents

Parents Need Visits To:

• Remain attached to their children
• Stay motivated to work for reunification
• Practice what they have learned in treatment
• Understand the unique needs of their children
• Mitigate their grief
• Re-establish and strengthen a relationship with their child
• Demonstrate their attachment and abilities
Social workers Need Visits To:

- Assess parents’ ability to be responsive to their children's needs
- Prepare the child and parent for reunification
- Assist parents to understand the child’s needs and behaviors
- Guide and observe parents’ responses to child’s behaviors
- Observe parents’ relationship with their child
- Observe changes in parents’ behavior over time
- Observe child’s reactions and responses to parents
- Document all of the above and thus provide evidence to support the plan

Visitation should occur frequently and in a positive, natural setting. Social workers should be creative in implementing visitation to assure frequent and positive visitation. Limiting visits to what is convenient for the agency limits the agency’s knowledge of the parent’s ability and limits the parents' opportunity to learn and demonstrate how to care for their children. Social workers should think creatively about visitation to make visitation a real tool for assessing families and for mitigating the grief and loss experience of children who have been removed from their homes.

Strategies for creative visitation include:

- **Ask the foster parents.** Visits in the foster home allow the parent to observe a positive approach to child care; allow the child to see all those who care for him/her as allies; and begin the building of a potential permanent resource for the future. This promotes a sense of partnership between the foster parents and birth parents.

- **Think about school and day care.** Most children would welcome lunch with their parents and most schools not only allow it but encourage this. Day care providers may also cooperate with encouragement. The parent can learn about this most important aspect of their child’s life, and meet the teacher or day care provider.

- **Include the parents at the doctor or dentist appointments.** This provides the parent with the opportunity to take the responsibility for medical concerns when possible and keeps the parent informed. It can also reassure the child who may be fearful.
- **Take the visits outside the agency.** Parks, playgrounds, fast-food restaurants, and other places allow for visits that more closely resemble normal parent child interaction.
- **Recruit volunteers and make them visitation specialists.** Transportation and the need for supervision should not limit the opportunity for visits. Volunteers may also become role models and mentors.

Social Workers should observe and document the following during visits:

- Who participated?
- How long did the visit last?
- How did the parents greet the child?
- What was the child’s response?
- What was the interaction between parents and child?
- What activities took place? How was the time spent?
- Did the parents set limits and/or discipline the child?
- Did the parents pay attention to the child’s needs?
- Did the parents and child display affection?
- How did the child behave?
- Was the social worker required to intervene?
- How did the parents and child separate?
- What happened after the visit?

### J. Required Services for Foster Parents

Good foster parents are valuable assets to every aspect of Children’s Services. Not only do these volunteers care for vulnerable children, but also they are the best recruiters for other foster parents. They are resources for birth families learning to parent appropriately. They are resources for adoptive families learning to care for the child whose interests they share, or they themselves may become adoptive parents. They have the best access to teach children skills as they learn to be self-sufficient. Foster parents often hold more credibility as trainers for other foster parents and new social workers than do professional trainers. Foster parents give their time, their energy, their creativity, their love, and their own resources to care for children in DSS custody and placement responsibility. All children who are in the custody and placement authority of a county DSS must be in foster homes licensed by the state, or in another placement specifically approved by the Court. This includes placement with unlicensed relatives.
Foster parents need agency support. The licensing social worker shall make a minimum of quarterly visits, with at least half of these visits occurring in the foster home. In addition, the child’s social worker shall make contact with the foster parent at least once during the first week of placement and at least monthly thereafter. The agency social workers are responsible for monitoring the level of care offered in the placement, to work cooperatively with the foster parent in helping the child to overcome the trauma of placement, and to engage in discussions that are supportive of the foster parent/agency relationship. Foster parents need each other. The agency should help foster parents to meet by providing space and arranging childcare for meetings on a regular basis. The agency should participate in these meetings so that foster parents’ concerns are communicated to the agency.

If a child becomes eligible for adoption, the foster parent should be given consideration as a potential adoptive parent. This consideration should be made without regard to race or ethnic background or the child’s age and the length of placement in the home. (Note: A child who is a member of a federally recognized Indian tribe is subject to the provisions of the Indian Child Welfare Act. A copy of the act is appended to the Family Services Manual, Volume I, Chapter VI, Adoption Services). If another non-relative home is chosen for the child, documentation should contain justification as to why the foster home was not selected.

A key factor influencing the relationship between the agency and foster parents is the attitude of the agency as expressed by the social workers. Foster parents are partners. They should be given all information known about a child, be given a quick and supportive response during crises, and when appropriate, be given an opportunity to help parents work toward reunification.

Foster parents are usually members of fostering families, each with its own set of dynamics. It is critically important that both the licensing social worker and the children’s social workers be aware of the impact that fostering has on a family, as well as the impact that planned or unplanned changes can have on that family. In order to minimize foster family burnout, the agency should encourage their participation in local and state foster parent associations and should provide or arrange for services needed by the family.

Information on licensing, discipline, and the agency foster parent agreement, is in the Family Services Manual, Volume I, Chapter IV, Standards and Procedures for Licensure, Section 1213.