

Handout: Important Provisions of the Adoption and Safe Families Act

The Adoption and safe Families Act of 1997 was passed to improve the safety of children, to promote adoption and other permanent plans for children who need them, and to support families. Some of the law's provision that will affect permanency planning include the following:

1. Reasonable efforts must be made to preserve families before children can be placed in foster care and to reunify families and make it possible for children to return home safely. Children's health and safety must be the paramount concern throughout this process.
2. Agencies do not have to make reasonable efforts to reunify families under certain specific circumstances when the child or a sibling has been severely abused or the parent has previously had parental rights terminated. In these cases, a permanency hearing must be held within 30 days and the state must make reasonable efforts to place children permanently in families.
3. Permanency planning hearings must be held within 12 months of children's entry into care. At the hearing, a permanent plan must be determined. The plan may be reunification, adoption, guardianship or other planned permanent living arrangement.
4. A petition to terminate parental rights must be filed on behalf of any child, regardless of age, who has been in foster care 15 out of the last 22 months. Exceptions can be made if the child is cared for by a relative or there is a compelling reason why filing is not in the best interest of the child.
5. States are permitted to place children in a home willing to adopt or in other permanent placements concurrently with the efforts to reunify the child with his or her family.
6. Foster parents, pre-adoptive parents, or relatives caring for children must be given notice of and opportunity to testify at any review or hearings involving those children.

Source: Adapted from Foster PRIDE/Adopt PRIDE Training Program. CWLA, Washington, D.C., 2003.

Table 1						
Outcomes and Indicators	States in Substantial Conformity	States not in Substantial Conformity	Strength		Area Needing Improvement	
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.	5	27				
Item 1. Timeliness of initiating investigations			15		17	
Item 2. Repeat maltreatment			13		19	
Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate.	4	28				
Item 3. Services to protect children & prevent removal			16		16	
Item 4. Risk of harm to children			11		21	
Permanency Outcome 1: Children have permanency and stability in their living situations.	0	32				
Item 5. Foster care re-entries*			8	8	8	8
Item 6. Stability of foster care placements			5		27	
Item 7. Permanency goal for child			5		27	
Item 8. Reunification, guardianship, relative placement*			8	3	9	12
Item 9. Adoption			5		27	
Item 10. Other planned permanent living arrangement			14		18	
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.	5	27				
Item 11. Proximity of foster care placement			31		1	
Item 12. Placement with siblings			24		8	
Item 13. Visiting with parents and siblings in care			12		20	

Item 14. Preserving connections			17	15
Item 15. Relative placement			18	14
Item 16. Relationship of child in care with parents			17	15
Well Being Outcome 1: Families have enhanced capacity to provide for their children's needs.	0	32		
Item 17. Needs/services of child, parents, foster parents			1	31
Item 18. Child/family involvement in case planning			5	27
Item 19. Worker visits with child			10	22
Item 20. Worker visits with parents			7	24
Well Being Outcome 2: Children receive appropriate services to meet their educational needs.	7	25		
Item 21. Educational needs of child			7	25
Well Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.	1	31		
Item 22. Physical health of child			12	20
Item 23. Mental health of child			2	30

* The two data elements, Items 5 and 8, were modified between the 2001 and 2002 reviews. The results are not comparable from one year to the next. Thus, we report here the 2001 and 2002 results in separate columns.

Handout: **Nine Core Concurrent Planning Planning Components**

1. Success Redefined

- Early permanency for children is the goal

2. Differential Assessment and Prognostic Case Review

- Culturally respectful family and child assessments – strengths, needs, core challenges
- Tentative reasoned hypothesis about the probability of the child’s returning home. and the family’s capacity to benefit from reunification services, and the need for an alternative plan.

3. Full Disclosure

- Respectful, candid discussion early on about the impact of foster care placement on children, clarity about birth parents’ rights and responsibilities, supports agency will provide, permanency options, and consequences of not following through with case plan.
- Open, honest discussions with all parties – biological families, relatives, foster/adoptive families, attorneys, other service providers
- Use of family group decision-making/conferencing strategies to involve families in early planning.

4. Crises and Time Limits as Opportunity

- Placement and clarity about time limits designated by law can create crises for families.
- Using time limits and the “crisis” of the placement as an opportunity to make change
- Time limits based on children’s urgent need for a stable, caring, and permanent family.

5. Empowering Parents to Change

- The role of the worker is to engage families in planning, to empower them to change and support the process of change.

- The role of the parent and/or family is to change

6. Frequent Parent-Child Visitation

- Parents who consistently visit have the best chance of reunification with their children.
- The more structured the visitation plan, the more likely parents will participate.
- Involving foster parents in parent-child visits promotes more supportive relationships.

7. Plan A and Plan B: Permanency Planning Resource Families and Connections

- Having a back-up contingency plan
- Options counseling
- Early search for and involvement of absent fathers and immediate and extended family; early Native American heritage identification
- Foster parents as permanency resources if reunification doesn't work out
- Completion of an early home study for resource family
- Partnerships between birth families, agency workers and foster parents
- Identification of permanent connections for older youth.

8. Written Agreements, Documentation and Timely Case Review

- Short-term immediate goals and long-term permanency goals developed with family members – Who will do what, when, and how?
- Service linkages are key – drug treatment, domestic violence, mental health, family support
- Writing down goals, tasks and time frames provided and case progress which are reviewed during each contact
- Documentation of services provided and case progress
- Early and ongoing case review to assess progress, review continuing needs, revise plan

9. Legal/Social Work Collaboration

- Consideration of due process and parental rights when children are first placed in foster care
- Early determination of paternity and search for relatives, absent parents
- Consultation and support from legal staff assures legally sound case work and case planning
- A good social work plan is a good plan
- Use of non-adversarial child welfare mediation strategies to resolve conflicts

Source: Adapted from Concurrent Planning materials of Lutheran Social Services of Washington and Idaho

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Handout: Tracey

Tracey is a 32 year old mother of 2 children all in out of home care. The older child, Natalie, 8 was placed with in a foster home for the last 14 months who has expressed interest in adoption. Tanya, born 8 months ago tested positive for cocaine resides in the same foster home. Tracey has a long history of drug addiction, having entered and left drug treatment programs three times in the past four years. Tracey had two older children that have been adopted. These children were age 13 and 10 and adopted by their foster parents a little over two years ago. The plan for Natalie and Tanya is reunification with Tracey.

After Tanya was born, Tracey realized she wanted her family together again. She entered a 28 drug treatment program that she had not attended before trying to make a “fresh start” as she put it. She has been involved in NA in her community and has seen an outpatient drug counselor twice a week for the past 6 months. She has visited with the baby twice a week since leaving the inpatient program, and her interactions are described as positive, nurturing and connected to Tanya. The foster mother has served as a “mentor” to Tracey. She has helped her during visits to interact with the baby and engage in age-appropriate activities. Tracey has recently been able to take the baby to the park on her own during these visits. Parenting skills have not been described as a problem for Tracey.

She has returned to her part-time job as a waitress. She is currently living with her brother to save money for an apartment. She attends NA three times a week, and has entered a counseling program as ordered by the court.

The record reveals that Tracey has reached this plateau several times, and then relapses and begins to use drugs again. Tracey had been in foster care herself, and had been sexually abused by her mother’s boyfriend. She spent most of her adolescence in three different group homes.

Tanya is described as a happy eight month old baby girl. Her foster mother reports that she plays easily with others. She has not experienced any serious developmental delays as a result of the prenatal crack exposure.

Natalie, age 8, is less connected to her mother and is very close to her foster mother. Natalie is doing very well in school, has no behavior problems, and has verbalized that she does not want to live with her mother. She says. “I like my foster home better.” She relates well to her baby sister. During Tracey’s visits, Natalie is reluctant to participate in activities and stays close to the foster mother.

Handout: Full Disclosure Feedback Guide

Please help your colleagues improve their practice skills through constructive feedback. When giving feedback:

- **Be concrete:** identify specific strengths and challenge points.
- **Be constructive:** make suggestions on what could have been done differently.

Pay attention to the following:

Ability to communicate with genuineness and empathy

Paying attention to body language and using reflective listening

Help parent focus on the best interests of the child

Including the need for safety, permanency and well being

Be honest and straight forward

No hidden agenda's; use of neutral, non-judgmental language; focus on behavior, underlying needs – not promises to change

Give feedback and clarify consequences

Assessment and progress toward case plan objectives. Explain consequences of not reunifying and discuss the remaining reunification time.

Summarize the discussion

Include double reflections, reinforce self-motivational statements

Keep it simple

Including clear, neutral language, limit number of issues to discuss

Affirm the family member

Mention twice as many strengths as concerns; support the family member's self-efficacy and self esteem

Source: adapted from materials developed by Laura Williams, California Department of Social Services, 2001

Handout: Full Disclosure Checklist

Have You.....

- ✓ Talked with the birth parents/families about their rights?
- ✓ Talked with the birth/family about your role as a representative of the agency?
- ✓ Talked with the birth parents/family about the role of the foster parents?
- ✓ Verbally advised birth parents/family of their rights?
- ✓ Asked the birth parents/family about their understanding of the circumstances that caused placement?
- ✓ Shared with the birth parents/family – respectfully, but directly – the official reasons for placement?
- ✓ Explained permanency planning time frames to the parents/family?
- ✓ Discussed concerns about past involvement or present barriers to permanency planning with family?
- ✓ Discussed and agreed to a mutually satisfactory visitation plan?
- ✓ Discussed purpose, types and behavioral expectations of visitation?
- ✓ Discussed service plan and assessment process with parents/family?
- ✓ Discussed consequences of following through/not following through with the plan?
- ✓ Identified additional planning resources, i.e., relatives, friends, service supports?
- ✓ Asked the foster family about their willingness to adopt, if birth family is unable to plan?
- ✓ Provided feedback to parents/family about progress being made/not made?
- ✓ Gently confronted parents/family about planning ambivalence?

Source: Adapted from Kriya Associates – St. Christopher Otilie, Families Together Project, NRCFCPP)