Promoting Permanency Through Worker/Parent Visits

A One Day Training Program
Modules At-A-Glance

Module One: Setting the Stage – Reviewing the Current Federal and State Child Welfare Mandates

Learning Objectives:

- Recognize the relationship between worker/parent-family visits and placement stability and permanency.
- Recognize the importance of visits with family in order to achieve permanency.
- Recognize how the principles of concurrent planning and full disclosure promote permanency.
- Describe three interpersonal helping skills.

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<th>Activity Name</th>
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<tr>
<td>Activity One: Welcome and Expectations</td>
<td>10 minutes</td>
<td>Flip chart and markers</td>
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<tr>
<td>Activity Two: Reviewing Current Federal and State Child Welfare Mandates</td>
<td>30 minutes</td>
<td>Handout: Important Provisions of the Adoption and Safe Families Act&lt;br&gt;Handout: CFSR Table</td>
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Module Two: An Empowering Approach to Child Welfare Practice

Learning Objectives:

- Explain the three elements of an empowering approach to child welfare practice to achieve placement stability and permanency.
- Explain three elements of assessment.
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<th>Activity Name</th>
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| Activity One: An Empowering Approach – The Three Phases                      | 30 minutes | Photographs  
Handout: Empowering Approach to Practice  
Handout: Elements of Assessment  
Handout: The Evolving Service Plan Agreement |

**Module Three: Developmental Approach to Assessing Safety, Permanency and Well Being with Families**

**Learning Objectives:**

- Define the three areas of assessment; safety, well being and permanency for worker/parent-family visits.
- Recognize the importance of using developmentally appropriate questions to assess safety and well being.

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<tr>
<th>Activity Name</th>
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| Activity One: The Caseworker’s Role in Assessing and Promoting Safety, Permanency, and Well-being | 60 minutes | Flip chart and markers  
Handout: Developmental Milestones  
Handout: Safety Checklist and Well Being Questions for Infants  
Handout: Safety Checklist and Well Being Questions for Toddlers  
Handout: Safety Checklist and Well Being Questions for Pre-school  
Handout: Safety Checklist and Well Being Questions for School Age  
Handout: Safety Checklist and Well Being Questions for Early Adolescence  
Handout: Safety Checklist and Well Being Questions for Middle Adolescence  
Handout: Safety Checklist and Well Being Questions for Late Adolescence |
Module Four: Planning Our Face to Face Visits with Families

Learning Objectives:

- Describe the four steps of a worker/parent-family visit.
- Demonstrate planning for a worker/parent-family visit.

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<th>Activity Name</th>
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| Activity One: The Four Step Planning Process | 40 minutes | Flip chart and markers  
Handout: The Four Step Planning Process  
Handout: Tracey: Case Update |
| Activity Two: The Visit Plan Promise    | 5 minutes | Postcards                                                                          |
Promoting Permanency through Worker/Parent Visits

Acknowledgements:

The curriculum was funded through a cooperative agreement between the Hunter College School of Social Work in New York and the Children’s Bureau to the National Resource Center for Foster Care and Permanency Planning. This National Resource Center was re-funded during the development of this curriculum and renamed the National Resource Center for Family-Centered Practice and Permanency Planning.

We are grateful to our colleagues at the Children’s Bureau/ACF/DHHS for their insight into the need for such a curriculum. Patsy Buida, National Foster Care Program Specialist at the Children’s Bureau and our Federal project officer for the National Resource Center for Family-Centered Practice and Permanency Planning has spearheaded this process and provided guidance and direction in making this curriculum a reality.

Our colleague’s at CWLA, Maureen Leighton and Joanne Matthews provided us with assistance in creating the direction for the curriculums structure. They were instrumental in helping us adapt the four step planning process from the Foster PRIDE/Adopt PRIDE Curriculum.

We want to recognize the amazing job done by Allison Hurwitz, MA-ATR who was the research assistant on this project. She is responsible for the creating the seven developmental checklists which are a corner-stone of this curriculum.

Introduction:

Promoting Permanency through Worker/Parent Visits is a one-day competency-based curriculum.

The curriculum addresses the following worker competency and learning objectives:

Competency:

Worker knows how to structure and conduct worker/parent visits to promote safety, well being, and permanency.
Learning Objectives:

- Recognize the relationship between worker/parent-family visits and placement stability and permanency.
- Recognize the importance of visits with family in order to achieve permanency.
- Recognize how the principles of concurrent planning and full disclosure promote permanency.
- Describe three interpersonal helping skills.
- Explain the three elements of an empowering approach to child welfare practice to achieve permanency.
- Explain three elements of assessment.
- Define the three areas of assessment; safety, well being and permanency for worker/parent visits.
- Recognize the importance of using developmentally appropriate questions to assess safety and well being.
- Describe the four steps of a worker/parent-family visit.
- Demonstrate planning for a worker/parent-family visit.
Module One: Setting the Stage – Reviewing the Current Federal and State Child Welfare Mandates

Learning Objective:

- Recognize the relationship between worker/parent-family visit and placement stability and permanency.
- Recognize the importance of visits with family in order to achieve permanency.
- Recognize how the principles of concurrent planning and full disclosure promote permanency.
- Describe three interpersonal helping skills.

Materials Needed:

- Flip chart
- Markers
- Handout: Important Provisions of the Adoption and Safe Families Act
- Handout: CFSR Table
- Handout: Nine Core Concurrent Planning Components
- Handout: Case Scenario: Tracey
- Handout: Full Disclosure Feedback Guide
- Handout: Full Disclosure Checklist

Estimated Time:

- 120 minutes

Activity One: Welcome and Expectations

1. Facilitator welcomes the participants and introduces self and colleagues. Facilitator should provide background information and share professional experience related to working with children and families in the foster care system. Facilitator explains the objectives of this training program, reviews the agenda and sets ground rules for the session.

Examples of Ground Rules:

- Only one conversation at a time
- Respect one another’s opinion
- Participants should tell presenters when they feel lost

2. Ask participants to introduce themselves, giving their name, agency and one expectation for our time together. Record expectations on the flip chart. State that during our time together there will be further opportunities for additional assistance during the breaks.
3. State that this training program will focus attention on our work with families whose children are in placement. We will pay special attention to structuring our in-person Visits and providing strategic questions that help assess safety and well-being. We will use the service plan as a working document to assess progress towards permanency.

4. State that we are now going to get to know each other. Ask participants to choose a partner that they do not know very well. Instruct them to find out two things that they have in common that are not apparent and one success they have had in promoting permanency with families in the last few months. Give them 90 seconds to do so and then ask the pairs to freeze. Ask for volunteers to share the results of their interviews. Ask the groups to repeat the process again by finding another person to interview.

5. State that in our work with families it is essential to develop helping partnerships. This activity gives us a chance to think about how we ask questions and engage with people. It is also important to build on our successes and share them with others.

6. State that now we will examine the recent changes and research in child welfare practice and how can use this information in our practice.
Activity Two: Reviewing Current Federal and State Child Welfare Mandates

1. Introduce the Adoption and Safe Families Act.

The Adoption and Safe Families Act (ASFA) was passed in November of 1997. It was designed to promote safety and permanency for children through its emphasis on adoption. ASFA also identified circumstances under which reasonable efforts to reunify are not required and shortened the timeframe for initiating proceedings for the termination of parental rights. In addition, ASFA provided incentive payments to states to encourage adoption of children out of foster care (U.S. Department of Health and Human Services, 2003).

2. Refer to Handout: Important Provisions of the Adoption and Safe Families Act and briefly review.

While you are probably familiar with ASFA let’s briefly look at some of the provisions of the law that impact permanency planning of children in foster care are:

- 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 the child to safely return home.

- 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.

- Permanency planning hearings must be held within 12 months of the child’s entry into care and a permanent plan must be determined. The plan may be reunification, adoption, guardianship or other planned permanent living arrangement.

- 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, there is a compelling reason why filing is not in the best interest of the child, or the agency has not provided the family with services that would allow the child to return home.

- States are permitted to place a child for adoption or in other permanent placements concurrently with the efforts to reunify the child with his or her family.
• Foster parents, pre-adoptive parents, or relatives caring for children must be given notice of and opportunity to testify at any reviews or hearings involving these children.

3. Promote a discussion of the outlined provisions by asking any of the following questions:

**NOTE:** You may list on an easel pad page any identified barriers to positive outcomes and any identified strategies toward positive outcomes that arise during this discussion. Use this discussion to move into a discussion of the national statistics related to ASFA.

• To what degree do you see the provisions being implemented?
• Have you seen a change over the past seven years in how permanency planning is done?
• To what degree do you feel the provisions are resulting in improved outcomes?
• What do the provisions NOT cover that you feel could result in improved outcomes?

4. Note that ASFA has resulted in some progress toward positive outcomes for children in care.

Studies show that the passage of ASFA has promoted increased adoption of children in foster care. A report by the US General Accounting office in December of 1999 cites that over the four year period from Fiscal Year (FY) 1995 to FY 1998, adoptions increased by 38 percent.

According to the Children’s Services Report (1999), 36,000 children were moved from foster care to permanent homes in 1998, an increase of about 5,000 over 1997 statistics. According to AFCARS estimates (ACF, 2004), in FY1998 there were 559,000 kids in foster care and 37,000 kids who were adopted while in FY2002, there were 532,000 kids in foster care and 53,000 who were adopted.

These statistics suggest that since the passage of ASFA in 1997, there have been modest reductions in the number of children in foster care (5%) and more substantial increases in the number of children who have been adopted (30.2%).

5. Promote a discussion of the outlined provisions by asking any of the following questions:

**NOTE:** You may list on an flip chart any identified barriers to positive outcomes and any identified strategies toward positive outcomes that arise during this
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- To what degree do you see the provisions being implemented?
- Have you seen a change over the past seven years in how permanency planning is done?
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These statistics suggest that since the passage of ASFA in 1997, there have been modest reductions in the number of children in foster care (5%) and more substantial increases in the number of children who have been adopted (30.2%).

7. Note that despite this progress the plight of children in foster care continues to be of great concern.

While progress has been made since the passage of ASFA seven years ago, the statistics are still grim concerning the plight of children in foster care. According to a recent study by the Pew Commission (2004), half a million children and adolescents are in foster care in our country on any given day and live in an average of three different placements during their time in foster care.

Almost half of these children spend at least two years in out of home placements, with nearly twenty percent of this population spending five or more years in foster care. In addition, this study also found that many children do not receive the appropriate educational, medical and mental health services that they needed while in care.
Though we have made impressive gains in promoting permanency for children and youth we still have work to do. The recent findings by the Pew Commission (2004) highlight the need for strategies to promote placement stability and focus on child and youth well being while in foster care.


In 2001, the Department of Health and Human Services’ (HHS) Administration for Children and Families (ACF) implemented the Child and Family Services Reviews (CFSR) in order to increase states’ accountability and improve existing means of monitoring compliance (U.S. General Accounting Office, 2004). The CFSR uses states’ data profiles and statewide assessments, as well as interviews and on-site case review, in order to measure state performance on 7 outcomes and 7 systemic factors (U.S. General Accounting Office, 2004).

9. Note that an important focus of the CFSR review is to monitor progress toward safety, permanency, and well being.

The CFSR process reviews the statewide data indicators and qualitative measures to determine state achievement in the following areas:

**Safety**
- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their own homes whenever possible.

**Permanency**
- Children have permanency and stability in their living situations.
- The continuity of family relationships and connections is preserved for children.

**Child and Family Well-Being**
- Families have enhanced capacity to provide for their children’s needs.
- Children receive appropriate services to meet their educational needs.
- Children receive adequate services to meet their physical and mental health needs.
Note that the CFSR also focuses on the systemic factors that directly impact the state’s capacity to deliver services that support improved outcomes.

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The systemic factors under review for each state include:

- the statewide information system
- the case review system
- the quality assurance system
- staff training and development
- array of services
- agency responsiveness to the community
- foster and adoptive parent licensing, recruitment and retention rates

10. Explain that states develop a Program Improvement Plan (PIP) that is designed to address the issues found in the CFSR.

State that for each of the outcomes and systemic factors, a number of performance indicators will be evaluated. Performance on these indicators will be used to determine whether states are in substantial conformity on each outcome and systemic factor. ACF will then work with states that do not achieve a rating of ‘substantial conformity’ to develop a PIP (National Child Welfare Resource Center for Organizational Improvement Newsletter, 2001).

The review process provides states with the opportunity to develop plans to address systemic barriers to positive outcomes. These plans in turn are monitored for progress toward the state’s goals. Program improvement plans must describe the steps that will be taken to correct identified weaknesses. In addition, program improvement plans must also set up standards to measure the State’s progress in putting the steps in the plan into practice. PIPs are also a good way to evaluate the effectiveness of these plans.

11. Note that one interesting result of the review process is that we are gaining significant information about what works and does not work.

Describe that Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs which is measured by looking at the following four indicators:

- Providing services to children, parents, foster parents (Item 17)
- Involving children and parents in case planning (Item 18)
State that while no states achieved a rating of ‘substantial conformity’ on all four measures of Well-Being Outcome 1, ten states did show a strength rating in the area of worker Visits with child (item 19): Arizona, Delaware, Kansas, Massachusetts, New York, North Carolina, California, Connecticut, Ohio & Tennessee.

State that through the review process, it was found that there is a significant positive relationship between caseworker Visits with children and a number of other indicators for safety, permanency and well-being. These indicators include:

- Providing services to protect children in the home and prevent removal
- Managing the risk of harm to children
- Establishing permanency goals
- Achieving reunification, guardianship and permanent placement with relatives
- Achieving the goal of other planned living arrangements
- Placement with siblings
- Preserving children’s connections while in foster care
- Maintaining the child’s relationship with parents
- Assessing needs and providing services to children and families
- Involving children and parents in case planning
- Caseworker Visits with parents
- Meeting the educational needs of the child
- Meeting the physical health needs of the child
- Meeting the mental health needs of the child

State that for further clarification, Handout: CFSR Table shows a complete listing of the safety, permanency and well-being outcomes and indicators that were assessed by the CFSR in fiscal years 2001 & 2002 as well as states’ level of compliance with these measures. Those indicators that were found to be significantly correlated with caseworker Visits with children (item 19) have an asterisk (*) next to them.

12. Note that one of the most important things we have learned through the review process is the importance of caseworker visits to the child and family in foster care.

Certainly we have always known that a worker’s relationship with a child is important. But the CFSR process has demonstrated that completion of worker-child Visits has a positive correlation with most of the outcomes being measured. Worker-child Visits help assure safety, permanency,
and well-being. This makes sense. We have always known that the relationship provides the foundation and context for our work in child welfare.

13. State that an essential element to promoting child and family attachment is visits/visitation. Ask the group what are some ways that they currently promote Visits/visitation with families.

14. Review the following information from Visiting Between Children in Care and Their Families: A Look at Current Policy.

- Several Researchers have found a relationship between parent-child visiting and children's well-being while in care. Children who are visited frequently by their parents are more likely to have high well-being ratings and to adjust to placement than are children less frequently or never visited.

- Visiting has also been found to be strongly associated with the outcomes of placement, particularly family reunification, and with length of stay in care. Children who are more frequently visited are more likely to be discharged from placement and to experience shorter placement time in months.

- There is an association between frequent visiting prior to return and successful (i.e., lasting) reunification.

- Frequent visitation has consistently been found not only to benefit children in care emotionally, but also contribute to the achievement of permanency for them.

15. **NOTE:** Review specific policies on parent/worker visits/contacts as well as contact/visitation policy for your state and insert this information here.

16. Note that the research linking child and parent/family visit with positive outcomes presents both an opportunity and a challenge.

It is encouraging to know that we are making progress toward achieving positive outcomes for children in care. Research linking visitation with the child and parent to more positive outcomes presents us with an opportunity and a challenge. It is now more critical than ever to promote positive relationships with parents, children and with their foster families.

Now let's look at how concurrent planning and full disclosure can be used as tools to promote permanency with families and form the foundation of our casework practice.
Activity Three: The Importance of Concurrent Planning and Full Disclosure

1. Review the principles of concurrent planning from the National Resource Center for Family-Centered Practice and Permanency Planning’s Concurrent Planning Curriculum using the following information:

   - Concurrent planning is meant to minimize the negative impact that separation, loss and unresolved grief can have on children and to reduce the relationship disruptions children experience even if they must be placed in foster care to protect them from abuse or neglect.
   - Concurrent planning strengthens and enhances the child-focused and family-centered child welfare practice framework with younger and older children.
   - The practice framework: while working towards reunification – when reasonable efforts are required – while also implementing an alternative or back-up permanency plan if reunification is unable to be accomplished within the timeframes of ASFA.
   - Concurrent planning rather than sequential planning efforts to more quickly move children from the uncertainty of foster care to the security of a safe and stable permanent family.
   - Engaging families in early case planning, case review and decision making about permanency options to meet children’s urgent need for stability and continuity in their family relationships.
   - Developing a network of foster parent (relatives or non-relatives) who can work toward reunification and also serve as a permanency resource for children.
   - Maintaining continuity in children’s family, sibling and community relationships.

2. Lead a discussion using the following questions:

   - How has concurrent planning changed child welfare practice?
   - To what degree do you see concurrent planning provisions being implemented?
   - Since using concurrent planning have you seen a change in how permanency planning is done?

3. Explain to the group that we are now going to engage in a brief exercise highlighting the components of effective concurrent planning.

   Ask them to think about a child who is special to them. Now write that child’s name on a piece of paper or if they are artistically inclined, they could draw a representation of that special child.
Ask them to sit back and relax; to think of this special child. Think about what that child looks like, feels like when you give him/her a hug, act like when misbehaving, how they respond when they need to go to bed or are playing with their friends.

Then ask them to imagine that you returned home from work one day to find that this child had not returned from school or day care, and had been taken into protective custody due to a report that was filed. Collect the pieces of paper that participants had completed as symbol of placement.

4. Divide participants into small groups and post the following questions on the flip chart:

- How you would be feeling?
- What you would want to know?
- How you would want to be treated?
- How you would want your child to be treated?

Ask the groups to spend five minutes discussing the four questions. Ask that they appoint a recorder. Allow each group to share that highlights of their discussions.

5. Summarize the discussion using the following information:

- Acknowledge the range of feelings and conditions that parents are faced with; and the phases of shock, depression, anger, bargaining and acceptance that people go through when in crisis and faced with deep loss.
- Respect parents' need to have information about what they can expect and what they need to do to get their children back.
- Involve parents and families respectfully in the planning and decision making about strengths, services needed and where their children will be placed and potentially grow up if they couldn't provide the care needed.
- Provide a way for children to have stability and continuity in their living arrangements.

6. Refer to the Handout: Nine Core Concurrent Planning Components and link the information to the guided group discussion focusing on the questions what you would want to know and how you would like to be treated.

7. State that one of the nine core components of concurrent planning is full-disclosure. Review the definition:

- Respectful, candid discussion early on about the impact of foster care on children, clarity about birth parents’ rights and responsibilities,
supports agency will provide, permanency options, and consequences of not following through with the case plan.

- Open, honest discussions with all parties – birth families, relatives, foster/adoptive families, attorneys, other service providers.
- Use of family group decision-making/conferencing strategies to involve families in early planning.

8. State that full disclosure depends upon respect, empathy and respect which are the interpersonal building blocks for the worker/parent relationship.

9. Ask the group to think about how they can demonstrate genuineness, empathy and respect with families they work with. Record responses on the flip chart.

10. Make sure the following points are identified:

**Genuineness:** Being real, being yourself; verbal and non-verbal behaviors match; being spontaneous and non-defensive.

**Empathy:** Communicating understanding; connecting with feelings; recognizing non-verbal cues; discussing what is important to the client; showing a desire to understand their feelings.

**Respect:** Showing commitment; communicating warmth and suspending critical judgment; applauding the client's resiliency.

11. State that we are now going to practice using full disclosure. Remember that full disclosure is a three step process:

- Provide family with positive information – sharing strengths
- Honestly address the difficult information – respectfully sharing the challenges observed
- Summarize the discussion using working with the families strengths.

12. Distribute the **Handout: Case Scenario: Tracey** and divide participants into small groups of three. Ask one person to play the role of Tracey; another the role of the worker and the third to act as an observer. Once the groups have assigned roles distribute and review the **Handout: Full Disclosure Feedback Guide** to observers.

Provide the following instructions for the role play. The goal of this interview is to review the case progress with Tracey and create with her the agency plan for the next four months. It is important to be mindful of ASFA timelines.
NOTE: It is important to review the ASFA timelines with the group. Provided in Appendix A is ASFA regulations.

Allow the groups ten minutes to complete their interviews. Allow time for observers to share their feedback.

Use the following questions to debrief the role play with the group:

- How did those who played Tracey feel during the interview?
- How did those who played the worker feel during the interview?
- As the observer, how did the worker practice full disclosure?

13. Distribute and review the Handout: *Full Disclosure Checklist* with the group as a resource when working with families.

14. State that concurrent planning and full disclosure are important practices that promote permanency for children and families. Now we are going to integrate these practices into a three phases empowering approach to permanency practice.
Module Two: An Empowering Approach to Child Welfare Practice

Learning Objective:

- Explain the three elements of an empowering approach to child welfare practice to achieve permanency.
- Explain three elements of assessment.

Materials Needed:

- Flip chart
- Markers
- Photographs
- Handout: Empowering Approach to Practice
- Handout: Elements of Assessment
- Handout: The Evolving Service Plan Agreement

Estimated Time:

- 30 minutes

Facilitator Notes:

Activity One: An Empowering Approach – The Three Phases

State that in order for workers to achieve permanency it is important to create a framework for strengths-based, child centered, family focused services. This curriculum introduces workers to the phases and processes of empowering practice developed by B.DuBois, K. Miley, and M. O'Melia in their book Generalist Social Work Practice – An Empowering Approach.

Distribute the Handout: Empowering Approach to Practice and state that the empowering approach guides workers through three phases;

- Dialogue,
- Discovery,
- Development.

These phases are important in achieving permanency by developing relationships with the child, family and caregiver, assessing strengths and needs, constructing achievable service plans, and implementation through activating resources, creating alliances and expanding opportunities. We then are integrating full disclosure and concurrent planning into all three phases of our child welfare practice.
State that during the dialogue phase child, family and caregivers discuss their situation, goals, and strengths. Through this exchange workers define their relationship with child, families, and caregivers as a collaborative partnership to which all contribute. In this phase, they define the purpose of the relationship and the focus of their work together.

Explain the importance of developing a helping relationship with children, youth, families and caregivers. (CWLA, The Caseworker Client Relationship Module V, Session 1)

*Developing a helping relationship with children, youth and their families is critical to helping them change the conditions or the patterns of behavior that caused the agency intervention. The relationship begins with the very first Visit with the child, youth and their families and continues to develop with ongoing worker and client communication and interaction. By definition, relationships have a strong emotional component. Good relationships don’t just happen they must be built and nurtured. The worker-client relationship does not result from a worker’s charismatic personality or a mystical connection between people. It is not essential, in fact, that the client personally like the worker for an effective relationship to be developed. Rather, it is a product of the caseworker’s commitment to helping the client, an ability to relate effectively to the client on an interpersonal level, and the client’s willingness to be open and risk “relating” to the caseworker. Obviously, you cannot control the client’s behavior, but you can control your own. Your behavior toward children, youth, families and caregivers can significantly increase the chances that a positive relationship will develop.*

Review the following with participants about the dialogue phase which builds on information shared in the last module, collaboration centers on:

- Building partnerships based on respect, genuineness, acceptance, trust, and an appreciation of cultural differences and similarities within and amongst groups
- Defining their respective roles
- Discuss child, families and caregivers experiences with challenging situations
- Defining the purpose of the work
- Activating child, families and caregivers motivation for change
- Addressing crisis needs

State that during the discovery phase, workers continue to assess, and systematically explore resources on which to build solutions. Together they organize the information gathered during the assessment and develop a service plan agreement. During this phase, collaboration centers on:

- Exploring the child, youth, family and caregivers strengths
- Exploring the resources in the child’s, youth’s, families and caregivers environment
- Collecting relevant information from all collateral sources
- Assessing capabilities of available resource systems
- Developing a service plan with specific goals and concrete objectives

State that in the dialogue phase we begin assessment through building the worker/client relationship but as we move into the discovery phase assessment and planning are our major activities.

Ask the group what guides their assessments. Record their responses on the flip chart. Divide participants into groups of approximately 5 people. Distribute a photograph to each group. Ask the group to answer the following questions about their photo:

- What are the people in the photograph doing?
- Why are the people doing what they are doing?
- What can you infer from what you see about the people in the photograph?

Give groups 5 minutes to answer the questions and ask each to report to the group their findings.

State that this is an unfair activity because one cannot answer the last two questions. We can guess – but how accurate can we truly be. This is the danger with an assessment. Assessments can be used to infer all kinds of information about the children, youth and families. The best assessments can only be like a photograph – a moment captured in time.

Ask participants to share ideas on how to keep ourselves from falling into this trap. Write responses on the flip chart.

State that assessment is a continuous process of information gathering and analysis for the purpose of maximizing the strengths of an individual, while minimizing their challenges. A good assessment will assist in making decisions about the need for change and the actions that will promote it. The nature of the decision to be made informs the types of information to be gathered, the methods used to gather it, and the process used to analyze it.

Distribute the Handout: Elements of Assessment and review the elements of assessment:

**Information Gathering:** The element of assessment considers underlying conditions (perceptions, beliefs, values, emotions, capability, self concept, experience, development, family system, and culture) and contributing factors (mental illness, substance abuse,
domestic violence, developmental disabilities, physical impairment, inadequate housing, environment which includes inadequate income and social isolation) that influence an individual’s strengths and needs

**Analysis:** The essential review of underlying conditions and contributing factors provides the general framework. These two elements influence an individual’s strengths and needs and impact upon the strategy or intervention chosen.

**Decision Making:** The strategy of choice is dependent upon ascertaining what needs are being met by the present state of functioning as well as the individual's view and feelings of her/his issue or situation.

State that when we think about conducting assessments with children, youth, and families our process must be multi-dimensional – assessing safety, well being and permanency.

Highlight that an assessment is both a process as well as a product. This assessment process is a dynamic one by which information is being collected by various sources and coordinated into a plan driven by the client with the support of caregivers and staff. The product of the assessment is the service plan agreement.

State that finally we come to the development phase, all parties work together to activate interpersonal and institutional resources, create alliance with other systems, and expand opportunities through resource development. During this phase, collaboration centers on:

- Operationalizing the service plan
- Accessing resources necessary to achieve the goals in the service plan
- Creating alliances among persons and organizations to accomplish the service plan
- Enhancing opportunities and choices by creating additional resources
- Evaluating ongoing progress and outcomes

Review with the group that creating and implementing a service plan is an evolving process. Summarize that the service plan changes as the professional relationship and the focus of the work progresses over time. Distribute and review the **Handout: The Evolving Service Plan Agreement** as it follows the three phases of empowering practice.
<table>
<thead>
<tr>
<th>Phase</th>
<th>Type of Agreement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dialogue</td>
<td>Relationship Agreement</td>
<td>Agreement to form a working relationship and define direction</td>
</tr>
<tr>
<td></td>
<td>Conducting Strengths</td>
<td>Agreement to explore the situation, assess strengths/needs, and resources</td>
</tr>
<tr>
<td></td>
<td>Based Assessments</td>
<td>available</td>
</tr>
<tr>
<td>Discovery</td>
<td>Agreement for Change –</td>
<td>Agreement on service plan.</td>
</tr>
<tr>
<td></td>
<td>Develop Service Plan</td>
<td></td>
</tr>
<tr>
<td>Development</td>
<td>Conclude the Relationship</td>
<td>Agreement to conclude the worker-client relationship as plan has been achieved.</td>
</tr>
</tbody>
</table>

State that now that we have a framework for our work. We are going to focus on how to use face to face Visits to focus on safety, permanency and well being. We will also discuss the types of questions that promote the helping relationship and develop effective worker-client partnerships.
Module Three: Developmental Approach to Assessing Safety, Permanency and Well Being with Families

Learning Objectives:

- Define the three areas of assessment; safety, well being and permanency for worker/parent-family visits.
- Recognize the importance of using developmentally appropriate questions to assess safety and well being.

Materials Needed:

- Flip chart
- Markers
- Handouts: Developmental Milestones
- Handout: Safety Checklists and Well Being Questions for Infants
- Handout: Safety Checklists and Well Being Questions for Toddlers
- Handout: Safety Checklists and Well Being Questions for Pre-school
- Handout: Safety Checklists and Well Being Questions for School Age
- Handout: Safety Checklists and Well Being Questions for Early Adolescence
- Handout: Safety Checklists and Well Being Questions for Middle Adolescence
- Handout: Safety Checklists and Well Being Questions for Late Adolescence

Estimated Time:

- 60 minutes

Facilitator Notes:

Activity One: The Caseworker’s Role in Assessing and Promoting Safety, Permanency, and Well-being

1. State that visitation with families enables a worker to assess how well they will be able to promote safety, permanency and well being for their child/children. State that in order to assess if the family can provide a safe, stable, and nurturing environment the worker must work with the family and include caregivers to collect as much information about the child and family as possible.

When working with youth it is important to include them as active members of the team. Youth should be included in all decisions that affect their lives. This will help to make it more likely that the youth’s needs will be met and that s/he will be able to establish positive relationships.

2. Review what is meant by safety, permanency, and well being and how these concepts can be used to structure visits with the birth families.
- **Safety** means protecting children from harm, including physical, sexual, and emotional abuse, as well as neglect; ensuring that when children and youth leave foster care, they remain safe with a permanent family; providing housing and other services to young people who leave care to live on their own as adults as 18.

- **Permanency** means that a child has a stability and permanency in their living situations and the continuity of family relationships and connections are preserved.

- **Well being** includes a child’s physical, emotional health, developmental and educational needs, and cultural identity must be addressed.

Divide participants into seven groups:
- Infants (0-18 months),
- Toddlers (18-36 months),
- Preschoolers (3-6 years old),
- School Age Children (7-9 years old),
- Early Adolescence (10 – 12 years old),
- Middle Adolescence (13-16 years old),
- Late Adolescence (17 -21 years old).

3. Assign each group an age range. Distribute flip chart paper and markers and **Handout: Developmental Milestones** to each group. Ask each group to take twenty minutes to develop a list of questions that would focus on well being issues and questions and/or things to check for safety when working with families. Encourage them to use the **Handout: Developmental Milestones** to help design their well being questions.

4. Review with the group that the age of the child and their unique conditions and characteristics will determine how to use the developmental information. Since every child develops at a different rate, chronological age alone is not the only determinant of a child’s developmental level. As a result, it is important to remember that other factors also need to be considered in determining a child’s developmental level, such as: prior exposure to trauma, the nature and duration of the abuse or neglect that led to their placement in foster care, socio-economic status, cultural issues, learning disabilities and emotional disturbances (Massengale, 2001).

5. First ask each group to share their safety questions and checklists with the large group. Encourage participants to ask questions for clarity. Ask the groups if they noticed any similarities and difference in the safety checklists and questions. Record responses on the flip chart. Remind the group that when assessing safety and well being for children who are infants, intentional questions need to
be asked of parents and/or caregivers. However, it will be important to observe the interaction between the child and his/her parent and/or caregiver.

6. Second ask each group to share their well being questions starting with the infants. Encourage participants to ask questions for clarity. Ask the groups how paying attention to developmental milestones helped them develop their well being questions. Record responses on the flip chart.

7. State that in order to more accurately assess how well a child’s safety, permanency and well-being needs are being met by families, we have created a series of developmentally appropriate checklists and questions that workers can use with both families, children, youth and caregivers during their visits. Since the age range of children and youth in foster care can be anywhere from several days to twenty-one years old, we have divided the population into seven age groups and created different sets of questionnaires for each group. Due to the considerable differences in developmental stages that are encompassed by this broad age range, we have varied not only the way in which questions about safety are being asked but also who is being questioned.

8. Distribute and review the Handouts: Safety Checklists and Well Being Questions for Infants, Toddlers, Pre-school, School-age, Early Adolescence, Middle Adolescence, and Late Adolescence.

9. Since we can all agree that preparation and planning are important elements to promoting placement stability and ensuring permanency, we are now going to discuss intentional planning and preparation for our face to face visits.
Module Four: Planning Our Face to Face Visits with Families

Learning Objective:
- Describe the four steps of a worker/parent-family visit.
- Demonstrate planning for a worker/parent-family visit.

Materials Needed:
- Flip chart
- Markers
- Handout: Building An Agenda For Face to Face Visits
- Handout: Tracey: Case Update

Estimated Time:
- 45 minutes

Facilitator Notes:

Activity One: The Four Step Planning Process

1. State that now that we now have a series of checklists and questions to help us assess safety, permanency and well being during our face to face visits. Now we are going to discuss a four step planning and preparation process.

2. Consider the following as you start to prepare for the visit with the family.

   Step One: Preparation:

   - Schedule visits with the family in advance

     Be sure you include a beginning and end time, as this will help you adhere to your agenda. Try to plan for success. Discuss with the family when is the best time to schedule your visit. Sometimes it may be important to have unscheduled visits.

   - Review the case, including the service plan

     Using the service plan as the basis, review the case and its progress related to safety, permanency, and well-being. Consider timeframes and ASFA requirements.

   - Identify your areas of concern/barriers to progress

     You need to have in your mind a sense of how the case is progressing and what your concerns are.
- Prepare an agenda

You need an agenda to ensure that all important topics are addressed during the visit. Call the family prior to the visit to review the agenda and to make any additions. Both you and the family need to know what is to be discussed prior to the meeting.

3. Discuss conducting the visit.

The family visit is a professional consultation between yourself and the family. It is not a friendly visit or an opportunity to chat about "how they are doing." If you have done appropriate planning, you will be able to use your time wisely and toward helping meet the families needs.

To conduct the family visit:

Step Two: Exploration

- Worker and family members focus and discuss immediate needs and concerns.
- Review the agenda to establish the purpose or the meeting; make any changes or additions.
- Establish the time frame for the visit.
- Worker reviews all progress and any challenges since last visit.
- Worker reviews the content of visit with the focus on assessing safety, well being and permanency.

Step Three: Direction

- Worker uses a series of developmentally appropriate questions to assess how the family will provide for the child's well being and safety.
- Use the service plan as a basis for the case discussions
  - identify progress toward the identified permanency goal
  - indicate completion of tasks identified for family and worker
  - identify problems and develop solutions
  - make needed changes and modifications. The service plan is a working document which is developed in partnership.
- Discuss the family's strengths and needs related to
  - promoting permanence
  - meeting protective and nurturing needs
  - meeting developmental needs
- Identify supports/services needed to help family to meet needs
Step Four: Wrapping Up

- Worker reviews the information discussed with family members.
- Worker summarizes the strengths and challenges towards achieving the goals addressed in the service plan agreement and any new strategies discussed during the visit.
- Worker makes specific arrangement for the next visit.

4. Conduct an exercise to help participants plan for their face to face visits.

Tell participants that the purpose of the exercise is to help them to start thinking in a planful way about what they can accomplish through face to face visits with families.

Distribute Handout: Building An Agenda For Face to Face Visits to participants.

Explain that participants are being asked to develop a draft agenda for a face to face consultation with Tracey. Distribute Handout: Tracey: Case Update. Ask the group to think about how they will use the service plan during the visit.

Tell them to work with a partner on this exercise for 10 minutes.

5. Ask for three to four volunteers to write their agendas on flip chart paper and present to the group. Compare the agendas and discuss as a large group. Summarize following the discussion.

This exercise was intended to demonstrate how preparing for your face to face visits will help you in making sure that the important case issues are covered. As in any type of meeting, if the purpose is not clearly set forth, the work may not be accomplished. Remember that, in your real work, this agenda would be your starting point. You would then speak with the family to finalize the agenda.

6. Summarize the activity.

The face to face visit is a valuable tool to help the team in meeting the families needs. But it must be planned for and conducted in a professional, collaborative, and directed manner.
Activity Two: The Contact Plan Promise

State that we have covered a lot of ground today. Ask the group to look over their materials and notes for the day. Ask them to identify a “key learning or concept” that they are going to implement in their practice in the next two the three weeks.

Distribute a postcard to each participant. Ask them to write a “contact plan promise” to themselves. Have them address the postcard to where they feel most comfortable receiving this mail. Indicate that you will mail this postcard to them as a reminder. Give participants five minutes to write their “contact plan promises” and advise them that they are going to have to share them with the group.

Ask the group, how many people have ever made promises to themselves and never told anyone. Ask for a show of hands. State that sometimes when make our promises public by telling others we are often more invested in carrying them out. Therefore we are going to share our promises. Ask for a volunteer and then more around the room.

Collect all postcards and mail them to participants in two to three weeks. Thank the group for their participation and distribute training evaluations.
REFERENCES:


Clackamas Education Service District. Early Intervention and Early Childhood Special Education. www.clackesd.k12.or.us/earlychildhood/eiecse.htm


Appendix A

ASFA regulations

Adapted from The New Adoption and Safe Families Act Federal Regulations by Debra Ratterman Baker, ABA’s Child Welfare Law Tips

Overview
The U.S. Department of Health and Human Services (HHS) published final regulations on the Adoption and Safe Families Act (ASFA) on January 25, 2000. While these regulations, for the most part, reiterate the federal statute, they do clarify and expand on certain issues. The 74 pages in the Federal Register also have extensive commentary to guide state compliance. 65 Fed. Reg. 4020 (2000) (to be codified at 45 C.F.R. §§ 1355, 1356 & 1357)

Time Periods
The regulations use two different starting points in defining requirement time periods: actual removal and foster care entry. Actual removal is the date the child is removed from the home. A child "enters foster care" the earlier of:

- The date the court found the child neglected or abused.
- Sixty days after the child's actual removal.

45 C.F.R. § 1355.20(a)

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Deadline</th>
<th>Starting Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Plan</td>
<td>60 days</td>
<td>Actual Removal</td>
</tr>
<tr>
<td>Reasonable Efforts to Prevent Removal</td>
<td>60 days</td>
<td>Actual Removal</td>
</tr>
<tr>
<td>Six-Month Periodic Review</td>
<td>6 months</td>
<td>Foster Care Entry</td>
</tr>
<tr>
<td>Permanency Hearing</td>
<td>12 months</td>
<td>Foster Care Entry</td>
</tr>
<tr>
<td>Reasonable Efforts to Finalize Permanency Plan</td>
<td>12 months</td>
<td>Foster Care Entry</td>
</tr>
<tr>
<td>Mandatory Termination Petition Filing</td>
<td>15 of the last 22 months</td>
<td>Foster Care Entry</td>
</tr>
</tbody>
</table>

The commentary clarifies that states are free to choose to hold these hearings earlier. For example, a state may run all time periods from actual removal.

A child may already be living with a relative when the state intervenes. The agency may decide the child should remain with the relative with that relative as the child's foster parent. In this situation, the child is "constructively removed" for time period requirements even though the child does not change homes. The date of constructive removal by court order is used as the date of actual removal. 45 C.F.R. § 1356.21(k)
"Contrary to Welfare" Findings
A court finding that "continuation in the home is contrary to the welfare of the child" must be made at the first court ruling on the child's removal, even if temporary. If it is not made at this hearing, the child's "stay in care" is ineligible for Title IV-E. In other words, it cannot be remedied by a finding at a later hearing, unless the child has returned home and a new placement in foster care is necessary. 45 C.F.R. § 1356.21(c)

Contrary to welfare findings must be "detailed" and be in the court order or hearing transcript. Affidavits, nunc pro tunc orders, or orders simply referring to a state law requiring such findings for removal do not meet this requirement. 45 C.F.R. § 1356.21(d) The finding does not have to follow the exact wording of the federal statute. For example, a finding that placement is in the child's best interests is okay.

Reasonable Efforts
A court finding that "reasonable efforts have been made to prevent the child's removal from home" must be made within 60 days of the child actual removal from home. If it is not made within this period, the child's entire "stay in care" is ineligible for Title IV-E. 45 C.F.R. § 1356.21(b)

The court must also make a finding that the agency has made reasonable efforts to finalize a permanency plan. The permanency plan may be to reunify the family or secure the child a new permanent home. In other words, the regulations have consolidated these two reasonable efforts findings into one. The finding is based on the agency's permanency plan at the time of the hearing, not on a prior plan the agency has abandoned.

This finding must be made within 12 months from when the child "enters foster care," presumably at the permanency hearing. It must then be made every 12 months to retain Title IV-E for the child. A negative, insufficient, late, or missing finding means the child is ineligible for Title IV-E until the court makes a positive finding.

The court may find that a lack of efforts is reasonable, such as when there is no safe way to make efforts to prevent removal. Reasonable efforts findings must be detailed—they must include relevant case facts. These findings must be in the court order or hearing transcript. Affidavits, nunc pro tunc orders, and orders simply referring to state laws requiring reasonable efforts for removal do not meet the requirement. 45 C.F.R. § 1356.21(d)

The exact wording of the federal statute does not have to be used as long as the findings make clear that the agency made reasonable efforts.

Aggravated Circumstances
The court may waive reasonable efforts to reunify if it finds aggravated circumstances. If reasonable efforts are waived, a separate reasonable efforts finding is not required.

The regulations clarify that the court must waive reasonable efforts if a parent has been convicted of an enumerated felony. However, if criminal proceedings are pending or under appeal, the court has discretion to determine if it is reasonable to proceed with reunification. This decision is based on the child’s developmental needs and the length of time before the criminal proceedings or appeal will be resolved. 45 C.F.R. § 1356.21(i)

Permanency Hearings
The permanency hearing is a state plan requirement. It is not a Title IV-E eligibility requirement. If the state fails to hold a permanency hearing for a child, it is out of compliance with the state plan. However, the child remains eligible for Title IV-E. 45 C.F.R. § 1356.21(h) The permanency hearings must be held by a court or a court-approved administrative body that is not under the supervision or direction of the state agency. 45 C.F.R. § 1355.20(a)
A full hearing is required. Paper reviews, ex parte hearings, agreed orders, and hearings not open to parental participation are not permanency hearings.

The regulations clarify that the court may order reunification as the permanent plan at this hearing if:

- The parents have been diligently working toward reunification.
- Reunification is expected in a time frame consistent with the child's developmental needs.

The agency may change the child's permanency plan at any time. It does not have to wait for the permanency hearing to do so. It does not need to get court approval of the change. 45 C.F.R. § 1356.21(b)(2)

**Guardianship**

Like ASFA, the regulations define a "legal guardianship" as a judicially-created relationship between the child and caretaker that is permanent and self-sustaining. It must transfer the child's protection, education, care and control, custody, and decision-making to the caretaker. The caretaker does not have to be a relative. States are not required to adopt the statutory definition into their law. 45 C.F.R. § 1355.20(a)

Guardianship subsidies may not be paid out of Title IV-E monies unless the state has received a federal waiver. However, this does not preclude states from funding guardianship subsidies.

**Trial Home Visits**

Child welfare agencies may continue to receive Title IV-E for children with parents on "trial home visits." These visits can be for no more than six months unless the court authorizes them for a longer period. The court order must explicitly extend the trial home visit-a court hearing continuance is not sufficient. 45 C.F.R. § 1356.21(e)

If the trial home visit exceeds six months without court authorization, then the child's return to care is considered a new placement. To establish Title IV-E, new "contrary to the welfare" and "reasonable efforts to prevent removal" findings must be made.

**Termination of Parental Rights**

While the child is on a trial home visit, the "clock stops" for the mandatory termination petition filing deadline ("15 of the last 22 months"). For example, if the child is in foster care for 10 months, then goes home for a trial home visit, the deadline for filing a termination will be five months after the child returns to foster care. However, if the trial home visit is over seven months long, the clock starts over. Runaway episodes also stop the clock. 45 C.F.R. § 1356.21(i)

The state has discretion to file a termination petition whenever it is in the child's best interests. The "15 of the last 22 months" is a maximum, not a minimum. States have the option of making the child's length of stay a termination ground, but are not required to do so. The agency must file a termination within 60 days of a judicial determination that:

- The child is an abandoned infant.
- Reasonable efforts are not required because the parent's felony conviction.

The agency must begin the adoptive family search and approval process when it files the termination petition.
Compelling Reasons

The term "compelling reasons" is used in two different provisions in ASFA:

- The agency may determine it has a "compelling reason" not to file a termination petition within the "15 of the last 22 months" time period.

- The court may determine at a permanency hearing that there is a "compelling reason" that reunification, adoption, guardianship, and relative placement are not the child's best interests. If it makes such a finding, it may order "another planned permanent living arrangement" for the child.

45 C.F.R. § 1356.21(i)

"Compelling reasons" not to file a termination petition must be considered on a case-by-case basis considering the individual circumstances of the child and family.

The commentary gives examples of "compelling reasons:"

- Adoption is not the appropriate permanency plan for the child.
- There are no grounds to file a termination petition.
- The child is an unaccompanied refugee minor.
- An international legal obligation or compelling foreign policy reasons would preclude termination.

These examples are just illustrations. The state may not specify categories of children for whom filing a termination petition is not appropriate.

The compelling reason must be documented in the case plan. This is an agency decision-court approval is not required. The agency does not lose federal funding even if the court disagrees.

This decision is only required to be made once. Review at subsequent hearings is recommended, not required.

The commentary also gives examples of "compelling reasons" for a court to order "another permanent planned living arrangement:"

- An older teen who specifically requests emancipation as his or her permanency plan.
- A child who has a significant bond to a parent unable to care for the child because of an emotional or physical disability. The foster parents are willing to raise the child and facilitate visitation with the parent.
- An Indian child for whom the tribe has identified another planned permanent living arrangement.

The state may not identify a specific category of children who are excluded from one or more permanency options. For example, it cannot categorically exclude delinquents from being considered for adoption. 45 C.F.R. § 1356.21(h)

Responsibility for Placement

For Title IV-E eligibility, the public child welfare agency must have "responsibility for the child's placement and care." This means that the agency decides the child's specific placement, not the court. If the court orders the child into a specific placement, the child is ineligible for federal
matching funds. 45 C.F.R. § 1356.21(g)

**Foster Family Home**
All foster family homes, including relative homes, must meet the same licensing standards. Any state that has separate standards for relative homes will have six months to come into compliance with this requirement. The commentary does allow states to waive some non-safety standards, such as square footage requirements, for relatives. 45 C.F.R. § 1355.20(a)

The regulations allow states to claim Title IV-E from the date the foster parent satisfies all licensing requirements, even if the actual license has not yet been issued. However, the license must be issued within 60 days.

**Criminal Records Checks**
ASFA requires states to run criminal records checks on potential foster and adoptive parents. States may opt out of this requirement. 45 C.F.R. § 1356.30

To opt out, the state must adopt legislation or the governor must send HHS a letter. States who opt out must still document they considered safety issues in licensing a foster or adoptive parent.

States who do not opt out must document they made criminal records checks for all foster and adoptive parents licensed after November 19, 1997 (the effective date for ASFA). States do not have to go back and make these checks on those approved before this date. Checks are required for foster and adoptive parents only, not on other household members.

The state cannot license anyone convicted of a violent felony. It also cannot license anyone convicted of a drug-related felony in the last five years. "Drug-related felonies" include alcohol-related felonies.

This is both a Title IV-E state plan and child eligibility requirement. The state cannot claim Title IV-E funds for a child placed with a foster parent with any of the enumerated convictions.

**Foster Parent Rights**
ASFA gives the child's caregiver a right to notice and an opportunity at any hearing on the child. It does not require states give foster parents "party" status. 45 C.F.R. § 1356.21(o); 45 C.F.R. § 1355.34(b)(2)(v)

The regulations require this notice to be "timely" and to be given for permanency hearings and six-month periodic reviews. They do not prescribe how to notify the foster parents, but recommends the same procedure as for parties.

The regulations do not define "opportunity to be heard." However, the commentary states that foster parents do not have a right to appear at the hearing as long as they can give input to the court, such as through a written submission.

**Delinquents in Foster Care**
The regulations clarify that delinquents and status offenders placed in Title IV-E eligible placement must meet the same requirements as dependent children. The child welfare agency does have flexibility to do appropriate individual case planning. 45 C.F.R. § 1356.21

A delinquent or status offender "enters foster care" 60 days after the child is removed from home. The only exception is when a child is first placed in detention and then moved to foster care: the time period runs from the date the child is placed in a Title IV-E eligible placement.

There must be a "contrary to the welfare" finding at the first hearing on the actual removal. However, a finding that "continuation in the home is contrary to the interests of society" is not acceptable for Title IV-E eligibility.
Voluntary Placements
The same requirements apply whether the child's placement is involuntary or voluntary. A child in voluntary placement "enters foster care" 60 days after actual removal. The agency has no affirmative duty to notify parents who voluntarily place a child of ASFA requirements. 45 C.F.R. § 1356.22

Indian Child Welfare Act
The regulations clarify that Indian children must meet the same requirements as other dependent children. States must still meet Indian Child Welfare Act (ICWA) and nothing in the regulations supercedes ICWA.

The definition of "foster family home" includes foster parents living on or near an Indian reservation who are licensed or approved by the tribe. "Child care institutions" also includes those facilities licensed by the tribe. 45 C.F.R. § 1355.20(a)

One example of a "compelling reason" mentioned in the commentary is an Indian child for whom the tribe has identified another planned permanent living arrangement. 45 C.F.R. § 1356.21(h)

Tribes are encouraged to form agreements with states to receive Title IV-E monies. However, all Title IV-E funds must go through state agencies, not directly to tribes. Under such agreements, a tribe may have "responsibility for a child's placement and care."

Tribes do not have authority to adopt their own definitions of "aggravated circumstances." However, if a tribe has responsibility for the child's placement and care, it could determine there is a "compelling reason" not to file a termination petition. However, it may not categorically exempt children—it must make the determination on a case-by-case basis.

Multiethnic Placement Act
The Multiethnic Placement Act (MEPA) prohibits discrimination based on race, color, or national origin in foster care or adoptive licensing and child placement. States may not routinely consider ethnicity in placement decisions. 45 C.F.R. § 1355.38

HHS will impose penalties on a state for individual violations determined by a court finding or Justice Department investigation. States may lose from two to five percent of fiscal year Title IV-E funds based on the number of violations.

If a state agency has a statute, regulation, policy, procedure, or practice that, on its face, violates MEPA, it has six months after HHS notification to remedy this violation before penalties are imposed. It must submit a corrective action plan which must be approved by HHS. Private agencies that violate MEPA must return all federal foster care and adoption funds to HHS.

States do not violate MEPA by:

• Making special recruitment efforts for minority foster and adoptive parents.
• Using a relative placement preference.
• Following Indian Child Welfare Act requirements.

Effective Date
The final rule went into effect March 27, 2000. For certain new requirements, states have 12 months from this effective date to comply. These include:

• The consolidation of the finding on reasonable efforts to reunify the family and the finding on reasonable efforts to secure the child another permanent home into a single finding on
reasonable efforts to "finalize a permanency plan."

- The permanency hearing requirement for children who were formerly exempt—children in long-term foster care and preadoptive homes.