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Module 8, Session One—Promoting Permanency Outcomes

**MODULE EIGHT
SESSION ONE**

Revised 02/2012

Session One Competencies and Objectives

Competencies:

The foster parent:

- Knows the importance of permanency in the lives of children.
- Knows that family reunification is a primary child welfare goal.
- Knows the Permanency Goals for children in out-of-home care.
- Understands the factors in the decision-making process for permanency planning.
- Understands the process of reunification and the impact of a child's transition from the foster family to the birth family.

Objectives:

Session One will enable the participants to:

- Get acquainted with the trainers and each other;
- Describe the relationship between this PRIDE module and complete PRIDE training program;
- Explain the concept of permanency for children in foster care;
- Relate permanency planning to the child's sense of time in the reunification process;
- Identify the Permanency Goals for Return Home;
- Identify the factors considered in making permanency planning decisions;
- Recognize the possible feelings of children, birth parents and foster parents during the reunification process; and
- Describe how the feelings of children, parents, and foster parents relate to behavior during the reunification process.

Session One Agenda

Part 1: Welcome and Introductions

- A. Welcoming remarks and participant introductions
- B. Use of the PRIDEbook
- C. Purpose of this Module
- D. Review of session objectives and agenda
- E. Discussion of Teamwork Agreement

Part II: Promoting Permanency Outcomes

- A. Understanding children's need for permanence
- B. Understanding child and family teams, service planning, and permanency goals
- C. Identifying the feelings of children, birth parents, and foster parents during reunification

Part III: Closing Remarks

- A. Summary
- B. Preview of next session
- C. Taking PRIDE Activity
- D. End session

Defining Permanence

Children need permanence through enduring relationships and commitments they can count on. Permanence can be defined in three ways:

➤ **Societal Permanence:**

Society expects that children are a permanent part of the family. Children in foster care do not have societal permanence since they are not a permanent members of their foster family, even though they may live there for a long time.

➤ **Emotional Permanence:**

People gain emotional permanence through trusting that in important relationships, obligations are binding and expectations will be fulfilled. Children in foster care may be in limbo if they feel an emotional bond with the foster family and yet are not a permanent members of the family.

➤ **Legal Permanence:**

Legal permanence comes through legal confirmations of attachments between people, as in marriage. Legal responsibility for children in foster care is split among the parents, the agency and the court. Legal responsibility for the children can change hands. Foster parents are not legally responsible for the children in their care.

Permanency Goals

Children have Permanency Goals. Parents have Service Plans. Service Plans are written plans, developed by the caseworker and family, which specify the services the agency will provide and the actions the parents/family will take to correct the conditions which led to the child's neglect or abuse. Service Plans must always support the Permanency Goal.

Most families have a permanency goal of "Remain at home." This means the children are *not* removed from their parents' home and the agency is working to strengthen the family and prevent placement.

During the first twelve months of a case when the child is in placement, the agency assigned to work with the family may use a recommended Permanency Goal, based on the facts of the case. If the child has not been returned home, at the 12-month Permanency Hearing the judge selects a Permanency Goal based on the evidence presented and the recommendation of the caseworker. Once the court has set the Permanency Goal for a child, it can be changed only by the court.

- A. The minor will be ***returned home*** by a specific date ***within 5 months***.
- B. The minor will be in ***short-term care*** with a continued goal to ***return home within a period not to exceed 1 year***, where the progress of the parent or parents is substantial, giving particular consideration to the age and individual needs of the minor.
 - B-1:** The minor will be in ***short-term care*** with a continued goal to ***return home pending a status hearing***. When the court finds that a parent has not made reasonable efforts or reasonable progress to date, the court shall identify what actions the parent and DCFS must take in order to justify a finding of reasonable efforts or reasonable progress, and shall set a status hearing to be held not earlier than 9 months from the date of adjudication, and no later than 11 months from the date of adjudication, during which the parent's progress will again be reviewed.
- C. The minor will be in ***substitute care*** pending court ***determination on termination of parental rights***.
- D. ***Adoption***, provided that parental rights have been terminated or relinquished.
- E. The ***guardianship*** of the minor will be transferred to an individual or a couple on a permanent basis, ***provided that goals A through D have been ruled out***.
- F. The minor over age 12 will be in ***substitute care*** pending independence.

- G. The minor over age 12 will be in *substitute care* because he/she can not be provided for in a home environment due to developmental disabilities or mental illness or because he/she is a danger to self or others, if *goals A through D have been ruled out*.

A Child's Sense of Time

Answer each of the following questions for the different age children listed.

- A. The foster mother tells the child her mother will visit “next week.” What does “next week” mean to a

2-year-old child

8-year-old child

14-year-old child

- B. The caseworker asks you to help explain to the child that he will be going to live with his aunt in about three months. What can you and the caseworker do to help the child understand if he is a

2-year-old child

8-year-old child

14-year-old child

- C. The caseworker wants the supervised visits at least weekly, even though the visits must take place at the agency for now. Are weekly visits sufficient to maintain the parent-child relationship for a

2-year-old child

8-year-old child

14-year-old child

- D. The caseworker is encouraging you to work with the birth mother to help her learn appropriate ways to care for and discipline her child. How often do you think the child and the mother would have to visit or interact in order to change their patterns of behavior, if the child is a

2-year-old child

8-year-old child

14-year-old child

Best Interest of the Child

The Best Interest of the Child is a legal cornerstone for judges and caseworkers in making decisions and taking actions. “Best Interest,” by definition, includes outcomes of safety, well-being and permanency for children. The Best Interest of the Child also provides a standard by which “substantial progress” by the parents can be evaluated.

The following factors are specified in Illinois law, the Juvenile Court Act, as the considerations for determining the Best Interest of the Child.

- The physical safety and welfare of the child, including food, shelter, health and clothing;
- the development of the child’s identity;
- the child’s background and ties, including familial, cultural, and religious;
- the child’s sense of attachments, including
 - where the child actually feels love, attachment, and a sense of being valued (as opposed to where adults believe the child should feel these things);
 - the child’s sense of security;
 - the child’s sense of familiarity;
 - continuity of affection for the child;
 - the least disruptive placement alternative for the child;
- the child’s wishes and long-term goals;
- the child’s community ties, including church, school, and friends;
- the child’s need for permanence, which includes the child’s need for stability and continuity of relationships with parent figures, siblings and other relatives;
- the uniqueness of every family and child;
- the risks of being in substitute care (out-of-home placement); and
- the preferences of the persons available to care for the child.

Minimum Parenting Standards

The “minimum parenting standards” are defined by policy and law as the parenting capacity birth parents must exhibit and maintain in order for their children to be returned to them. The “minimum parenting standards” mean that a parent or person responsible for the child’s welfare sees that the child is:

- Adequately fed,
- Clothed appropriately for weather conditions,
- Provided with adequate shelter,
- Protected from severe physical, mental and emotional harm, and
- Provided with necessary medical care and education as required by law.

Child and Family Teams

Purpose: To engage families in assessment and actions, which will assist them in caring safely and adequately for their children.

Members of the team include:

The parent(s)
The child (if age-appropriate)
The caseworker
The caseworker supervisor*
Other persons requested by the parents

The following persons may be included on the team with the parent's consent:
Other concerned family members who are not interested in seeking custody of the child(ren)
Foster parents/relative caregivers (if the child is in care)
Service providers

*After the initial meeting, the supervisor attends Family Meetings at his/her discretion.

The initial Family Meeting

The purpose of the first family meeting is to:

- Select a preferred and alternative permanency goal;
- Discuss the results of the assessment;
- Openly discuss concurrent planning;
- Prepare the initial service plan, identifying what needs to occur to achieve permanency for the children;
- Share pertinent information between all participants; and
- Advise parents of the appeal rights.

Subsequent Family Meetings

Family meetings after the first one consist of guided discussions with the family about strengths, needs, and problems, and the impact of those on the health, safety, permanency, and well-being of the children. Specific discussions that must occur at the family meeting are:

- Progress the family has made to correct conditions or conduct that threaten a child's health, safety, and well-being,
- Services the family or child continue to need to assist in correcting the conditions/conduct, and
- Review and evaluation of the current service plan and permanency goal.

With the consent of the parents, foster parents should be invited to family meetings unless there is reason to believe the biological parent may become violent. In no event shall the address and telephone number of the foster parents be disclosed prior to the initial family meeting.

Frequency of Family Meetings

Family meetings are to take place thirty days after case opening and once every three months thereafter, as long as the family case remains open for service. The caseworker or the family convenes the family meetings.

Outcome of the Meeting

The generally expected outcome is a new or updated service plan.

Principles of intervention for permanency

All efforts to achieve permanency must be founded on the following principles.

1 Decision-making based on the child's sense of time and urgency

To accomplish the key developmental tasks critical to long-term sense of self-worth and emotional security, children need stability. Therefore, we set time frames for families to resolve the issues that brought the child into care. (See *Resource 2-6* for more details on time frames.)

2. Respect for the family and valuing family connectedness regardless of the outcome of the case-

Children need continuity with parents, siblings, and extended family. It is important for families to think about resources available to them for support, and for placement if necessary. Non-custodial parents must be notified. Their interest in and ability to care for the child must be assessed. Permanent kinship care through adoption and guardianship may also be permanency options.

The birth family should have opportunities to continue in a parental role while the child is in care. Siblings should be placed together whenever possible, and the child's continuity with siblings must be maintained.

3. Ongoing, thorough and complete assessments of the child and family

The caseworker must:

- Identify the central problem that brought the child into care.
- Decide which factor(s) must change for the child to be safe.
- Thoroughly assess the child to determine the best possible placement.

4. Full disclosure

From the beginning of the agency's involvement, parents should know their alternatives and understand their rights and responsibilities. This is achieved through:

- Open, honest and complete two-way communication between parents and the caseworker;
- Insuring that parents understand how DCFS policy and the law apply to their family situation;
- Reviewing the parent's right to appeal services;
- Providing clear, candid information about the case prognosis and progress to the parent, caregiver, and the court; and
- Making parents aware that progress must be timely, or an alternative permanency plan will be pursued.

5. Family involvement in frequent reviews

The family meeting is a tool to engage the family in planning and in reviewing their progress toward the established goals. (*Resource 1-8* explained family meetings.) Family meetings and full disclosure together are powerful tools for change.

6. Intensive involvement of the caseworker as change agent.

For a permanency plan to be achieved, the caseworker must influence a family's desire to change. The caseworker also helps the team negotiate with the family regarding change.

7. Empowerment to make decisions with the family

The caseworker and supervisor make case decisions with information obtained through assessment, observation of visits, involvement with the child and family team, and supervisory conferences.

8. Foster parents as support for permanency

Foster parents and relative caregivers participate as active members of the child and family team. They may engage in shared parenting with the birth family by helping parents to understand a child's needs and how to successfully meet the stressful demands of parenting. If it is decided that a child will not return home, adoption by foster parents or relative caregivers may be appropriate, especially if the caregiving family has been involved in concurrent planning.

9. Family behavior affects safety decisions

The behavior changes parents make to safely parent their child determines the permanency outcome. Parents demonstrate progress toward reunification through:

- Frequent and regular visitation;
- Active engagement in the service plan; and
- Substantial and meaningful changes.

10. Reasonable efforts and substantial progress

Services to families must be appropriate, accessible, well-coordinated, of high quality, and immediately available. Parents must demonstrate immediate signs of progress.

11. One worker per family

The same worker is to be maintained throughout the life of a case to provide critical continuity.

12. Responsiveness to diversity

Workers must be culturally educated, remain culturally sensitive, use interpreters when necessary and find ways to enhance a child's sense of connectedness to his/her culture. Families must be responsible for assisting the worker to understand the uniqueness of the family's culture.

A Child's View of Reunification

When reunification is approaching, the child may—depending on age and developmental level—experience conflicting feelings and show them through behaviors which can confuse the adults in the child's life. Think of what a child might say and do as a result of the feelings in each example.

1. Loyalty to her mother and affection for her foster mother.

2. Anger at his father for not working harder to get him back sooner and anger at the foster parents for not fighting to keep him.

3. Fear that the behaviors that led to the foster home placement will occur again, while wanting to believe Mom when she says she has changed for good.

4. Leaving the organized, structured, home of the foster parent to return to the more casual, sometimes chaotic, household of the parent.

5. An infant, used to the routines and consistent responses of the foster mother compared to the weekly visits of the birth mother.

Understanding Reunification Feelings from the Perspective of Child, Parent and Foster Parent

Reunification is a process of transition. It requires that children, parents and foster parents all live with the prospect of impending change and uncertain outcomes. During the process of reunification, **children** may experience

- conflicting feelings,
- uncertainty and confusion about their place and role in both families,
- disappointment about their relationships with adults, and
- loss of familiar people and things, **again**.

Children of almost any age will experience reunification as renewal of the former parent-child conflicts. Hope will be tempered by apprehension, sadness countered with joy. Expect children to display strong emotions through often regressive behaviors.

Parents may feel mixed emotions as reunification approaches, including:

- ambivalence,
- fear,
- recurring difficulty accepting their role or responsibility for the child's problems,
- a need to reassert their role as parent, and
- dependence on the caseworker or foster parent.

The parents know that someone else has been doing what they were deemed unable to do—take care of their child. Anger and resentment can mask feelings of inadequacy and lack of self-confidence. Expect some birth parents to have difficulties just prior to the date for return home, in an unconscious effort to delay the reunification because of fear of failure, or to act out against the foster parents' role and importance in the child's life.

Foster parents, as reunification approaches, may feel:

- hope that the parents can succeed with the child;
- concern that the child's needs will not be met;
- satisfaction in helping the child make gains, or in their ability to gain the cooperation of the birth parents;
- anger at the caseworker and "the system" for returning the child to a questionable situation;
- distrust of the parents' commitment;
- grief at losing the child;
- unappreciated, "tossed out";
- that no one else really understands and can help the child; and
- concern for the confusion visitation seems to bring the child.

The feelings of foster parents correspond to the losses reunification can pose for them. When the attachment to the child is strong, there can be angry feelings associated with "losing" the child to the birth parents. Foster parents can feel sad or unappreciated if they believe the child's progress will be reversed, and regret their inability to alter a reunification decision with which they disagree.

Managing Feelings in Reunification

1. The mother has worked very hard to fulfill the Service Plan. She completed a drug treatment program and provided urine drops weekly which showed she has remained drug-free. The court date for Return Home is coming up. The mother confides in you that she doesn't know if she can maintain the progress she had made.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

2. The father has always been critical of your care of the child. He has encouraged the child to ignore your household rules and has tried to undermine your authority in other ways. The caseworker says weekly overnight visits are necessary now to prepare for reunification.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

3. The baby has been placed with you for six months and is beloved by the entire family. The mother has been visiting the baby twice a week during the day. In preparation for the baby's return to her, the daytime visits will be changed to overnight visits.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

4. The child has been placed with you for almost a year and has made a lot of progress in your home. The father never accepted that his behavior was abusive and has continued to challenge the agency's right to intervene in his family's life. Nevertheless, he has complied with the Service Plan and made the necessary changes. Just when the child is scheduled to return home, the father says you are forbidden to ever see his child again.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

5. The parents worked hard for six months to fulfill the tasks in their Service Plan. They have been faithful in visiting their children but they missed the last visit and seem to be ignoring other things in the Service Plan lately. The date for the children's return home is close.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

6. The mother never misses an opportunity to tell you how wonderful she thinks you are and how much she appreciates what you have done for her child. As the date for reunification approaches, she tells you repeatedly how glad she is that you will be available to help out if she has problems after the child is returned to her.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

7. You have a good relationship with the baby's young mother. She has made good progress. You see her as a "good kid" who made some poor decisions because of her youth and became overwhelmed. Now that it is time for the baby to return to her, you start noticing problems with her that you hadn't seen before. You bring them up to her.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

8. Each of the three children placed with you has special needs. The youngest is in special education; the middle child has asthma and other medical needs; and the oldest is becoming interested in the opposite sex. You can see that the children and the mother love each other but you fear that she will be overwhelmed and unable to meet the children's needs when they return home.

Parent's feelings:

Foster parent's feelings:

Reunification techniques:

Taking PRIDE Activity

Permanency planning begins with the selection of a Permanency Goal for each child entering foster care. To be a partners in permanency planning, foster parents must know the Permanency Goals for the children in their care.

Below, write the first name(s) of the children in your care now and their Permanency Goals. If you do not know their Permanency Goals, contact the caseworker to get the information. (If you do not have children in your care right now, complete the Taking PRIDE Activity for a child with Permanency Goal B: Short-term care with a continued goal to return home within a period not to exceed 1 year.)

Name(s):

Permanency Goal:

Using the Permanency Goals above, list some particular things you might do to help reunification go more smoothly.

1. _____

2. _____

3. _____

4. _____

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Module Eight, Session Two—Providing Children with Permanent Families Through the Goal of Adoption

Session Two Competencies and Objectives

Competencies

The foster parent:

- Understands the degree and desirability of the permanence offered by adoption for children.
- Understands the process and impact of a child's transition from a foster family to an adoptive family.
- Understands the process and impact of a family's conversion from providing family foster care for a child to becoming that child's adoptive family.
- Knows the techniques foster parents can use in supporting reunification.

Objectives

Session Two will enable participants to:

- Describe why adoption is a preferred permanency outcome for children.
- Identify Termination of Parental Rights as a requirement for adoption to occur.
- Recognize the changes in permanency planning resulting from the Adoption and Safe Families Act of 1997.
- Describe the purpose of Concurrent Planning.
- Recognize the relationship between Expedited Termination of Parental Rights and the family foster care placement choices for children.
- Recognize the role that the feelings of birth parents, children and foster parents play in the transition process for adoption.
- Explain the techniques for managing the feelings of children, parents and foster parents during the reunification process.

Session Two Agenda

Part I: Welcome and Introductions

- A. Welcoming remarks and participant introductions
- B. Review of session objectives and agenda
- C. Connect Session One to Session Two

Part II: Providing Children with Permanent Families Through the Goal of Adoption

- A. Understanding adoption as a preferred permanency goal
- B. Termination of parental rights
- C. Understanding concurrent planning
- D. Understanding expedited termination of parental rights

Part III: Closing Remarks

- A. Summary
- B. Preview of next session
- C. Taking PRIDE Activity
- D. End session

Techniques for Managing the Feelings and the Process of Reunification

1. Know the child's permanency goal.

Fear, anxiety and anger can all flourish when expectations are not based on factual information. When we assume, we court disappointment. Everyone on the child welfare team, including children old enough to understand, can benefit from knowing the expectations for the duration and outcome of a child's placement. The Permanency Goal provides that information.

2. Discuss the Permanency Goal and Service Plan

Talking about reunification—the plan and the goal—should be part of daily conversation. Acknowledging the importance of parents to children, confirming in small ways that the parents are still part of the child's life, and doing so daily are ways of talking about reunification and addressing feelings.

- **With the caseworker**

The caseworker may not be able to share all information in the Service Plan, but foster parents have a right to know why children came into placement and the terms of the parent-child visitation plan.

Foster parents need—and are entitled to—information relating to their ability to properly care for a child. Being able to answer a child's questions about reunification, to discuss reunification, to prepare a child for visits, and to help a child with feelings after visits, are part of the foster parents' responsibilities.

The mutual sharing of information between the caseworker and foster parent supports teamwork and allows foster parents to be more knowledgeable and feel more positively about the reunification process and the eventual outcome.

- **With the children**

Even fairly young children can grasp the concept of a Service Plan as “work” the parents need to do before the child can return to them. With young children, the words used will have to be general and their “sense of time” considered.

Children who can understand can also benefit emotionally from knowing that there is a plan for them to visit with their parents and siblings. Older children can participate in developing the Service Plan.

- **With the parents**

Of course, the kind of conversations foster parents can have with birth parents about reunification will depend on the nature of the relationship. However, any opportunity to acknowledge the parents' desire to have their children returned is an opportunity to express goodwill.

Arranging a regular time for the parents to telephone the children during the week

(whether through the caseworker or directly) is another way to promote discussion about reunification. “Informed” older children will ask parents what everyone wants to know. “Will you be at the visit?” “Why didn’t you call?” “Are you going to your classes?”

3. Recognize that reunification is a process and time of transition

Transition means change. Dealing with change is difficult. Successful reunification means parents will have more time with their children and assume more parental responsibilities.

Children will feel the effects of the transition, having two sets of “parents” as visits become more frequent and last longer. Children will face adjusting to different household routines and rules, a different bed, different sleeping arrangements.

Foster parents, caseworkers and parents should share information that will help the child make a smooth transition. Foster parents can describe the routines they have established for a child. Maintaining schedules is particularly important for infants. The daily feeding and sleeping schedule should be written down in detail and go with the infant for visits. Familiar items or toys can bring comfort when a child takes them along on visits.

4. Support parent-child visits

We have already said that research shows frequent parent-child visiting, begun soon after the child’s out-of-home placement, is the single most important factor in successful family reunification.

Visits are therapeutic for children in foster care. They allow children to experience the range of feelings associated with separation from parents and siblings, and they support children’s ability to grieve their losses.

Children may feel sad or angry if their needs are not met during visits or if their parents fail to attend. But even “missed” or “disappointing” visits can have value, in helping children realize that family problems exist and in gauging the likelihood of reunification.

Visits pave the way for healing and resolving a child’s need for permanency by reunification. They can also be a way for a child to separate from the family and move on to establish a new, permanent relationship with another family.

5. Deal with the future

The future should not be left to chance. If children return home, the decision will be made by a judge in court on a date specified well in advance. Clarify with the caseworker and parents what will happen if the children return home.

If the judge decides the children are to return home, will they go home with the parents immediately after the court hearing? Will the foster parents have a chance to say a final goodbye? When and how will the children's clothing and toys be transported?

When children have been in foster care for a significant period of time, it is almost never best to have the contact between the child and the foster parent stop completely. Children can feel abandoned. Foster parents also have to avoid getting in the middle between children and parents.

Sometimes arrangements can be made for children and foster parents to visit after the return home. Sometimes visits with children and foster parents can be designated as "respite," or a break for parents, and be part of the aftercare plan. Other ways of maintaining contact include telephone calls, cards, e-mail, and social media such as Facebook.

The caseworker, parents and foster parents should work together to discuss and decide what might, could, or should be arranged for the children in the future.

6. Review and add to the child's Lifebook

The Lifebook goes with the child. The contents of the Lifebook mark the time spent with the foster family and bring continuity to the child's life and memories.

Adding to and reviewing the Lifebook with a child can be a way of discussing reunification over time. Reminding children that their Lifebook will accompany them when they return home helps prepare children when reunification is imminent.

Many foster parents find it helpful to add material to the Lifebook when the time to return home approaches. Include pictures of the foster family, the child, pets, the house, etc., and other memorabilia of the child's time with the family.

Members of the foster family can write a letter to the child about what the child has meant to them. Children in the family can draw a picture and sign it for the Lifebook.

7. Have a "Leaving Ceremony"

Foster parents can gather the child, the caseworker, and the parents together for an event to mark the child's transition from the foster home to the parents' home, such as the candle-lighting ceremony the Hanson foster family had for Vernon in the "Making a Difference" video seen in the preservice training.

Who attends and what kind of event is planned can be as individual as the foster family. It may involve giving a child a special gift or keepsake, lighting candles, reading letters or poetry, or serving the child's favorite dish or meal.

Permanence Offered by Adoption

The definition of adoption has changed over the years and now focuses on finding families for children, not children for couples.

Adoption offers a greater degree of societal, emotional and legal permanence than a foster care placement. A child who is adopted into a well-functioning family—a family like your family—gains the full level of permanence.

Societal:

- Adoption is seen as permanent by others.
- Adoption is an accepted way of forming a family.
- There is no expectation that the child will leave the family.

Emotional:

- The adoptive family is committed to the child.
- Adoption is voluntary; it is the family's choice.
- Adoption is voluntary; for older children, it is also their choice.
- The child recognizes the family's commitment to him or her.
- The child has an opportunity to attach to the family and become a part of the family history, routines and traditions.
- The parent or parents accept full responsibility for parenting the child.

Legal:

- Adoption is an act of the court.
- The child's name can be changed, if desired.
- The child inherits through the family, as any other offspring.
- Adoptive parents have all the same rights and responsibilities for the care of the child as those belonging to birth parents.

Feelings and Behaviors in Concurrent Planning

You are the parent of a 3-year-old child recently placed in foster care. The caseworker has explained to you that a decision about whether your child can return home will have to be made within 9 months after adjudication. The caseworker also said that Concurrent Planning would be used to make an alternate plan for your child's adoption by the foster family, if you fail to make enough progress in completing the tasks in your Service Plan to allow your child to return home. You understand that in order for your child to be adopted by another family, your parental rights would have to be terminated.

Describe some feelings you may have:

Describe some of your possible behaviors:

You are the foster parent for this child.

Describe some feelings you may have:

Describe some of your possible behaviors:

You are the child.

Describe some feelings you may have:

Describe some of your possible behaviors:

Concurrent planning

Concurrent Planning is a part of the permanency planning process for children in foster care. It involves simultaneously establishing two different permanency plans for children in foster care who have the Permanency Goal of Return Home. In Concurrent Planning, the agency provides family reunification services while also arranging for another permanency plan to be put in place should reunification efforts fail. The alternate plan for permanency is usually adoption.

Participating in the process of Concurrent Planning may sound very difficult for foster parents, and it can be. Supporting family reunification efforts is difficult work in and of itself. “Waiting in the wings” as a potential adoptive family at the same time requires emotional stamina.

Initially, Concurrent Planning was used with “high risk” families—those with a poor prospect for achieving reunification because of a history of poor parenting, chronic family dysfunction and failure to respond to the interventions and services provided by the agency. Concurrent Planning was instituted for these families as a “last chance” for family reunification.

The use of Concurrent Planning is no longer limited to children from “high risk” families. Concurrent Planning for *all* children in foster care with a Permanency Goal of Return Home is now the policy of DCFS. The use of Concurrent Planning was expanded because it promotes permanency and corresponds to the decision-making factors for permanency.

For example, “a child’s sense of time” is a significant aspect of Concurrent Planning in that an alternate permanency plan is made *during* the time family reunification efforts are being made. Should those efforts fail, the alternate plan already is in place and can be implemented without delay.

Concurrent Planning also corresponds to the “best interest of the child” in permanency decision-making. Because family reunification is being pursued, Concurrent Planning respects the significance of the child’s background, ties and former attachments. By preserving the security and familiarity of the existing foster family placement through adoption, Concurrent Planning offers the least disruptive placement for the child if family reunification does not take place.

With “high risk” families, Concurrent Planning will probably result in implementing an alternative permanency plan. Usually, reunification efforts fail and the agency seeks termination of parental rights and moves to establish “Adoption” as the child’s Permanency Goal. The possibility of adoption should be raised prior to, or early in, the placement of children from families identified as “high risk” because the potential need for a foster family who will consider adoption is more pronounced.

The parents know from the beginning that Concurrent Planning is being used; it is not a secret. The parents know the alternate plan and what the consequences will be if reunification does not occur.

The family has nine months after adjudication to correct the conditions that led to the child's maltreatment. The agency provides intensive services during these months to support family reunification, and the family must attend family meetings with the caseworker at least every three months to review the progress being made towards reunification.

Foster parents must be willing to actively work with the agency and birth parents to support reunification during these nine months. In practical terms, this means enabling parent-child visits, and supporting other parent-child contacts by including the parents in the child's life and daily routine to the extent possible. For example, encouraging parents to accompany the child to a doctor's appointment or to attend a school event supports parent-child contact and allows parents to fulfill their responsibilities while working toward reunification.

Since the alternate permanency plan is usually is adoption, Concurrent Planning requires emotional stamina on the part of foster parents. The agency seeks to place children with foster parents who are willing to actively support family reunification and who also express a willingness to consider adoption should reunification not occur.

Most children in foster care do, indeed, return home. When parents are making good progress toward reunification, the possibility of adoption may be raised by the caseworker more as an exploration of the foster parents' feelings than as a request to consider adoption. However, no one can predict the future. DCFS policy is to apply Concurrent Planning in providing permanency to *all* children. That means we will consider the potential of *all* foster parents to become adoptive parents for children who cannot return home.

Of course, foster parents have the right to decide whether adoption is a good choice for their family. For many, the question of adoption will relate specifically to the strengths and needs of their family and of the child currently in their care. Not every foster family will be willing or able to adopt and not every foster family will be asked to adopt. But knowing that Concurrent Planning requires establishing an alternate permanency plan which is usually adoption, foster parents should consider their role as "permanency families" for children.

Expedited Termination of Parental Rights

The child's case must be assessed to determine if grounds for parental unfitness exist or if any factors identify the possibility of adoption for the child. If such grounds or factors are found, the goal will be to free the child for adoption within six months.

The assessment can be done any time from the date of the case opening to 14 days before adjudication (about 90 to 120 days after Temporary Custody is awarded to DCFS.) This assessment, called a "legal screening," is held when the caseworker notes the following grounds for unfitness. The legal screening involves the caseworker. If the legal screening determines that the case qualifies for expedited termination of parental rights, the DCFS attorney forwards a letter to the appropriate State Attorney requesting that a petition be filed to terminate parental rights based on the grounds of unfitness.

The caseworker *must seek* expedited termination of parental rights if the following grounds for unfitness are present:

1. Extreme and repeated cruelty to the child.
2. A finding of physical abuse and criminal conviction.
3. Conviction of ANY of the following crimes:
 - First or second degree murder of a parent of this particular child.
 - First or second degree murder of any child.
 - Attempt or conspiracy to commit first or second degree murder of any child.
 - Solicitation to commit murder of any child; solicitation to commit murder of any child for hire; or solicitation to commit second degree murder of any child.
 - Accountability for the first or second degree murder of any child.
 - Aggravated criminal sexual assault.
4. Abandonment of a newborn infant in a hospital.
5. Abandonment of a newborn infant in a setting where the evidence suggests that the parent intended to relinquish parental rights.
6. Incarceration of a parent due to a criminal conviction if prior to incarceration, the parent had little or no contact with the child or provided little or no child support, and the parent's incarceration will prevent him or her from discharging parental responsibilities for a period of two years after the filing of the petition or motion for termination of parental rights.

The caseworker *must consider* expedited termination of parental rights if these grounds are present:

- Abandonment of the child (other than a newborn infant);
- Desertion;
- Inability to discharge parental responsibility due to mental illness, mental impairment or developmental disability;
- A substance-exposed infant is born after the mother had the opportunity to participate in a drug counseling, treatment, and rehabilitation program.

Permanency Goals

Children have Permanency Goals. Parents have Service Plans—written plans developed by the caseworker and family, which specify the services the agency will provide and the actions the parents/family will take to correct the conditions that led to the child’s neglect or abuse. Service Plans must always support the Permanency Goal. During the first twelve months of a case, the agency assigned to work with the family may use a recommended Permanency Goal, based on the facts of the case. At the 12-month Permanency Hearing, if the child has not been returned home, the judge selects one of the following Permanency Goals based on the evidence presented and the recommendation of the caseworker. Once the court has set the Permanency Goal for a child, only the court can change it.

- A. The minor will be *returned home* by a specific date *within 5 months*.
- B. The minor will be in *short-term care* with a continued goal to *return home within 1 year or less*, where the progress of the parent(s) is substantial, and considering the age and individual needs of the minor.
 - B-1:** The minor will be in *short-term care* with a continued goal to *return home pending a status hearing*. When the court finds that a parent has not made reasonable efforts or progress to date, the court will identify what actions the parent and DCFS must take to justify a finding of reasonable efforts or reasonable progress. The court will set a status hearing to be held between 9 and 11 months from the date of adjudication, during which the parent’s progress will again be reviewed.
- C. The minor will be in *substitute care* pending court *determination on termination of parental rights*.
- D. *Adoption*, provided that parental rights have been terminated or relinquished.
- E. The *guardianship* of the minor will be permanently transferred to an individual or a couple, if *goals A through D have been ruled out*.
- F. The minor over age 12 will be in *substitute care* pending independence.
- G. The minor over age 12 will be in *substitute care* because he/she cannot be provided for in a home environment due to developmental disabilities or mental illness or because he/she is a danger to self or others, if *goals A through D have been ruled out*.

Taking PRIDE Activity

For every foster family, the question of adoption is a personal one. Not every foster family will be faced with the decision of whether or not to adopt, but as “permanency families,” every foster parent has a critical role to play when adoption becomes the child’s Permanency Goal. The point of the activity is to examine your personal strengths and needs in relation to adoption—in whatever role you choose for you and your family. Complete the following with your first thoughts.

Think about the characteristics of children you have fostered. Would you have been willing to adopt any of them? Do not be concerned about the real Permanency Goal for the child, just *think about the child* and the *feelings* that made you consider adopting that child.

1. Children’s characteristics and foster parent’s feelings about adopting children:

For those children you did not want to consider for adoption, think about what characteristics of *that child* made the foster care relationship more comfortable than an adoptive commitment for you and your family.

2. Characteristics of the child, and characteristics of my family, that made the foster care relationship feel more comfortable than an adoptive commitment.

3. The best reason I can think of for adopting a child in my care is:

4. The best reason I can think of for NOT adopting a child in my care is:

FOSTER

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Module Eight, Session Three—

Providing Children with Permanency Through Guardianship and Independence

Session Three Competencies and Objectives

Competencies

The foster parent:

- Knows how to prepare and support a child for the transition from foster care to adoption.
- Understands the process and impact of a child's transition from family foster care to guardianship.
- Understands the process and impact of a child's transition from family foster care to independence.
- Understands the process for selecting Permanency Goals and implementing permanency planning.

Objectives

- Recognize the transition tasks in adoption.
- Describe the role of foster families as "permanency families."
- Recognize each of the Alternative Permanency Goals.
- Describe Subsidized Guardianship as a Permanency Goal.
- Describe the difference between Subsidized Guardianship and Adoption.
- Identify the Residual Rights of Parents.
- Describe Independence as a Permanency Goal.
- Recognize the life skills required for Independence as a Permanency Goal.
- Participate in the process of selecting a Permanency Goal.
- Outline the tasks for implementing permanency planning.

Session Three Agenda

Part I: Welcome

- A. Welcoming remarks
- B. Review of teamwork agreements
- C. Purpose of the session, competencies and objectives, and agenda
- D. Connect Session Two to Session Three

Part II: Permanency Families

- A. Transition tasks in adoption
- B. Permanency families

Part III: Providing Children with Permanency Through Guardianship and Independence

- A. Additional information on permanency planning.
- B. Identifying alternative permanency goals.
- C. Understanding Subsidized Guardianship as a Permanency Goal.
- D. Understanding Independence as a Permanency Goal.
- E. Defining substitute care and when it is used.
- F. Participating in selecting a Permanency Goal and implementing Permanency Planning

Part IV: Closing Remarks

- A. Summary of session.
- B. Review of Foster PRIDE Modules.
- C. Evaluation.
- D. End session.

Permanency Goals

Children have Permanency Goals. Parents have Service Plans—written plans developed by the caseworker and family, which specify the services the agency will provide and the actions the parents/family will take to correct the conditions that led to the child’s neglect or abuse. Service Plans must always support the Permanency Goal. During the first twelve months of a case, the agency assigned to work with the family may use a recommended Permanency Goal, based on the facts of the case. At the 12-month Permanency Hearing, if the child has not been returned home, the judge selects one of the following Permanency Goals based on the evidence presented and the recommendation of the caseworker. Once the court has set the Permanency Goal, it can be changed only by the court.

- A. The minor will be *returned home* by a specific date *within 5 months*.
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- C. The minor will be in *substitute care* pending court *determination on termination of parental rights*.
- D. *Adoption*, provided that parental rights have been terminated or relinquished.
- E. The *guardianship* of the minor will be permanently transferred to an individual or a couple, if *goals A through D have been ruled out*.
- F. The minor over age 12 will be in *substitute care* pending independence.
- G. The minor over age 12 will be in *substitute care* because he/she cannot be provided for in a home environment due to developmental disabilities or mental illness or because he/she is a danger to self or others, if *goals A through D have been ruled out*.

Transition Tasks in Adoption for Foster Parents Who Choose to Adopt

1. Who do you need to tell about the change to adoption in the child's relationship to your family?
2. Who might the child want to know or tell about the adoption?
3. What records or documents may need to be changed as a result of the child's adoption?
4. What information or services might you need from the agency before the adoption is finalized?
5. Who might attend the court hearing for finalizing the adoption?
6. Might there be contact with the birth parents or the child's siblings after the adoption is finalized?

Transition Tasks in Adoption for Foster Parents Who Choose Not to Adopt

1. What information could you share with the child about your decision not to adopt?
2. What could you *do* to show that your decision was not a rejection of the child?
3. What documents in your possession need to accompany the child to the new adoptive home?
4. What other kinds of information can you provide that would be helpful to the new adoptive family?
5. What kind of future contacts might you have with the child?
6. What supports would you need once your decision is made?

Tasks Related to Adoption Planning

The **foster parents** and **caseworker** discuss the child's Permanency Goal early in placement.

Through the **caseworker**, the **foster parents** stay informed about the birth parents' lack of progress toward reunification.

The **foster parents** and **caseworker** discuss the plan for making the children legally free for adoption, including the plan and process for terminating parental rights.

The **caseworker** prepares documents for the **court** recommending adoption. (The **court** makes the final decision.)

The **foster parents** are asked to consider adopting the child. (If the child has been placed with them for one year or more, the **foster parents** must be given the first opportunity to adopt the child.)

The **foster parents** decide whether to adopt the child.

Either the **birth parents** voluntarily relinquish their parental rights or the agency's **attorneys** prepare a petition asking the court for a determination of involuntary termination of parental rights.

When Foster Parents Adopt

Foster parents participate in the assessment and preparation process for adoption.

Foster parents sign the adoption placement agreement and information disclosure form.

The **caseworker** continues contact with the **foster family** before the adoption is finalized, to work on any adoption-related issues and help the family make the transition to being an adoptive family.

The **foster parents** and the **caseworker** identify and seek needed services for the child or family.

The **foster parents** and the **caseworker** plan for the time the agency will no longer be involved.

The **foster parents** and the **caseworker** discuss adoption assistance.

The **foster parents** contact a **lawyer** to file the adoption petition in circuit court.

The **foster parents** complete the application for adoption assistance.

The adoption is finalized. The **foster parents** get the new birth certificate for the child and the final decree from the **lawyer**.

The **adoptive parents** seek services, as needed, for the child or themselves following the adoption.

The **adoptive parents** complete the Adoption Assistance Application every two years.

When Foster Parents Do Not Adopt

If the **foster parents** are unable or unwilling to adopt the child, a new adoptive family will be sought.

The **caseworker** and other **agency staff** will identify potential adoptive families for the child through state and national adoption resource centers, such as the Adoption Information Center of Illinois (AICI), or by recruiting an adoptive family.

Foster parents will need to share as much information as they can about the child with the **caseworker** and potential adoptive parents.

Foster parents assist in the assessment and preparation process for adoption.

Foster parents may be asked to make the child available for recruitment materials (for example, photographs for the AICI Adoption Listing Service) or to attend adoption recruitment events.

Foster parents help prepare the child for adoption and help the child make the transition from the foster family to placement with the adoptive family.

The **foster parents, caseworker** and the **adoptive parents** decide if—or how—the foster parents will stay involved with the child after adoption.

Key Points: The Transition to Adoption

Before a child can be adopted, the rights of the parents must have been voluntarily relinquished or involuntarily terminated by the court to make the child “legally free” for adoption. Adoption may be the best decision for the child and the best outcome for the parents. Still, the prospect of adoption and the finality of the loss of parental rights can generate strong feelings for everyone involved. Like family reunification, adoption is a time of transition and change.

Birth parents may be angry at anyone and everyone. They may feel like running away. They may have deep feelings of pain and regret about their choices. They may feel numb and be unresponsive to events. They might make one last attempt to lure the allegiance of their children or try to make them feel guilty about wanting the affection of other adults.

Foster parents may have been asked to consider adopting the child before a new family was sought. There may be a variety of reasons why foster parents are unable or unwilling to adopt, but whatever the reasons, the transition to adoption can also be a difficult time for the foster parents and the child.

Foster parents may feel guilt because they decided not to adopt this child, particularly if they have adopted other children who were fostered in their home. Foster parents might feel uncertain about the ability of the adoptive parents to meet the child’s needs. They may feel anger at the systems involved in the child’s adoption and at being faced with the discomfort of making a decision about adoption.

The child may react strongly to the foster parents’ decision not to adopt, seeing it as another rejection by the important adults in his or her life. The birth parents’ behaviors can be confusing and disturbing to children. Children are notoriously good at picking up on the feelings of those around them and responding to them, even when words are not spoken. For older children, the transition to adoption has the potential to put the child in the middle of an emotional triangle, caught among the competing pulls of birth parents, foster parents and prospective adoptive parents.

New adoptive parents may feel unsure of their status and role in the child’s life. In response to their feelings of insecurity, they may demand too much, too soon from the child. They may be critical of the foster parents’ care of the child or their child-rearing practices. They may envy or regret the time spent in the foster home as time they did not have with the child.

Foster parents play a critical role in helping children manage the transition from foster care to adoption. They must give clear messages to the child that he or she is entitled to a permanent family. The child’s feelings are the priority. The child needs to feel assured that the foster parents’ decision about adoption is not related to the child’s worth but to the foster parent’s age, health, the number of children already in the family, etc.

For foster parents who choose to adopt, the transition from foster care to adoption may not seem like much of a change. The same child is living in your home, going to the same school, getting up at the same time, displaying the same strengths and needs you have come to know.

Actually, significant changes do occur over time because adoption is a lifetime process as well as a lifetime commitment. Accepting a child's history and its significance to the child's identity is part of truly accepting the child as a permanent part of your family. Total acceptance does not take place automatically by legally finalizing the adoption. Severing all legal ties to the birth parents does not sever all of the child's emotional ties as well. Managing these feelings as you and the child move through the predictable stages of childhood can call for patience and a revival in your acceptance of the child.

Foster parents may be involved in the transition process for adoption by preparing the child to live with a new, permanent family, or, by converting from the child's foster parents to the child's adoptive parents. In either case, the role of the foster parent is critical to the child's successful transition from foster care to the permanency of adoption.

Residual Rights of Parents

The parents of children in foster care, for whom DCFS hold guardianship, retain certain residual rights, unless or until Termination of Parental Rights occurs, or; the court enters specific orders prohibiting any of the rights listed below.

The Residual Rights of Parents are to:

- Provide support to the child;
- Have reasonable visitation with the child;
- Consent to the child's adoption;
- Determine the child's religious affiliation (including the right to allow baptism);
- Know information about the child;
- Participate in making decisions about the child; and
- Correct the conditions that led to the child's out-of-home placement to regain custody of the child.

Requirements for Subsidized Guardianship

A child can have permanency, without the direct supervision of DCFS or another agency, in three ways: Return Home to the birth family; Adoption; or Subsidized Guardianship. Adoption is only possible when the birth parents' rights have been terminated by the court or given up by them voluntarily. In Subsidized Guardianship, the birth parents retain their residual rights. We select Subsidized Guardianship as the Permanency Goal for a child only when **both** Return Home and Adoption have been ruled out as not in the child's best interest.

Subsidized Guardianship provides legal permanency. It allows the guardian to care for the child and manage the child's affairs without intrusion by the child welfare system. Children who are appointed a subsidized guardian are no longer wards of the State. Subsidized guardians receive ongoing monthly financial assistance (calculated in the same way as adoption assistance payments) and a medical card to meet the child's needs. The guardian's rights remain in effect until the child reaches the age of 18 (or 21, in some special circumstances), or until the Guardianship status is vacated by the court. Subsidized guardians may receive a one-time payment as reimbursement for the legal expense of transferring guardianship from DCFS.

The requirements for selecting Subsidized Guardianship as a child's Permanency Goal are:

- The child must have been in the custody of the State of Illinois for two years and be likely to remain in State custody.
- The child must have been living in the home of the caregiver for at least one year.
- If living in the home of an unrelated caregiver, the child must be at least 12 years of age.
- The caregiver must consistently demonstrate the ability to meet the child's physical and emotional needs.
- Any child 14 or older must consent to the guardianship.
- The proposed guardian has no felony convictions.
- The child's birth parents have consented to the arrangement, or if the birth parents will not consent, they are provided notice of the guardianship and given an opportunity to object.

Adoption v. Subsidized Guardianship Fact Sheet

Many caregivers will need the caseworker to help them better understand the differences between subsidized guardianship and adoption. The following chart outlines the major differences between the two permanency goals. Please make sure that these issues have been discussed with the caregiver, and with the biological parent when possible.

	ADOPTION	SUBSIDIZED GUARDIANSHIP
LEGAL STATUS	<ul style="list-style-type: none"> • Biological parents' rights are terminated. • The adoptive parent(s) exercises all the rights and responsibilities that once belonged to the parents. • A permanent legal relationship. 	<ul style="list-style-type: none"> • Biological parents' rights are not terminated. • The guardian exercises all rights and responsibilities that had belonged to DCFS. • Subsidized guardianship lasts until the child is 18 (21 under special circumstances) or until the caregiver can no longer care for the child. • The court makes all decisions regarding the transfer of guardianship; however, the parents can request that guardianship be taken from the caregiver and the child returned to their care.
DECISION-MAKING	All major decisions made by the adoptive parents(s) (e.g., school, medical treatment, religion, etc.)	Most major decisions made by the guardian, but parent retains several rights including the right to visitation with the child and consent to adoption.
FINANCIAL RESPONSIBILITY	<p>In many cases adoption assistance is available, which includes a cash payment, a medical card, and payments for nonrecurring expenses up to \$1,500 related to the adoption.</p> <p>Note: subsidies for adoption and subsidized guardianship are calculated using the same formula.</p>	A subsidy is available which includes a cash payment, a medical card, and payments for nonrecurring expenses up to \$500 related to the transfer of guardianship.
RELATIONSHIP WITH BIRTH PARENTS	<p>The adoptive parents have the right to determine the type of relationship the child will have with the birth parent(s).</p> <p>This is not the right of the adoptive parent until the adoption is finalized.</p>	The biological parent has the right to visit the child. The guardian will have input into how the visits are structured, but cannot prevent visits from occurring. If the guardian and the parents cannot work out visitation, the court may order that visits take place on certain days, times, etc.
CHILD'S LEGAL NAME	The adoptive parents and the child can decide whether they would like to change the child's last name.	Generally, the child retains his/her legal name.
INHERITANCE	The child has all the same rights as a child born to the adoptive family including right to survivor's benefits and life insurance.	The child has no rights of inheritance from the subsidized guardian unless he/she is included in the guardian's will.

REMINDER: Any child 14 years of age or older must consent to a guardianship or adoption. The amount of the subsidy for adoption or guardianship will be determined using the same formula.

Agency Services for Youth with the Permanency Goal of Independence

When a youth reaches age 14, the caseworker will complete a “life skills” assessment with him or her. This assessment reviews the youth’s knowledge and skills in areas related to independence, such as education, money management, nutrition, health, job-seeking, job retention and housing. Based on this assessment, a plan is developed with the youth and the foster parents which identifies how to provide any skills that are lacking. This plan becomes the child’s client Service Plan and is reviewed routinely during Administrative Case Reviews. DCFS provides services directly or makes referrals to community resources.

“Life skills” classes teach practical skills to youth age 16 and over. DCFS also sponsors the programs listed below.

- **Youth in Transition Program**

Youth age 17, but not yet 21, can receive monthly cash benefits (up to \$250.00 monthly) under certain conditions, including full-time employment, or part-time employment while a full- or part-time student in specific academic or vocational programs.

- **Youth in College**

The same eligibility requirements and monthly case benefits as above, except that the youth must be enrolled as a full-time student in college or other post-high school education program, and maintain a “C” average to remain eligible.

- **Supervised Independent Living Program**

This program provides supportive services and living maintenance to youth age 18 and older but not yet 21, who are under the guardianship of DCFS, able to live in the community without continuous adult supervision, and willing and able to cooperate with the supervising agency.

- **DCFS Scholarships**

DCFS provides supplemental services, maintenance payments, and tuition waivers at Illinois universities and colleges. Over 40 scholarships are awarded on a competitive basis annually.

Youth who were under DCFS guardianship and now have a Subsidized Guardian remain eligible for these services.

Permanency Planning and Implementation

1. Jesse is 12 years old. He has been in your care for 2 years. His parents have been unsuccessful in correcting the conditions that led to his maltreatment and Jesse has been unable to return home. Jesse has participated in permanency planning and has declared to the caseworker and to the judge that he does not want to be adopted.

What Permanency Goal would you select for Jesse?

What are your reasons for selecting this Permanency Goal?

As Jesse's foster parents, what tasks would fall to you in implementing the permanency plan for achieving this Permanency Goal?

2. Marta, the youngest of 4 children, is 3 years old and has been placed with you for almost a year and a half. The 3 older children were returned to the mother 7 months ago and are still living with her. The mother visits Marta but less frequently than called for in the Service Plan.

What Permanency Goal would you select for Marta?

What are your reasons for selecting this Permanency Goal?

As Marta's foster parents, what tasks would fall to you in implementing the permanency plan for achieving this Permanency Goal?

3. Kiki is 15. She has had several other foster home placements and has been placed with you for 5 months. Her parents' rights were terminated years ago. She has no contact with them but does occasionally see a sibling who is also in foster care. Kiki is a smart girl and has been a good student, but lately she seems uninterested in school and her grades have been dropping.

What Permanency Goal would you select for Kiki?

What are your reasons for selecting this Permanency Goal?

As Kiki's foster parents, what tasks would fall to you in implementing the permanency plan for achieving this Permanency Goal?

4. Amber just had her first birthday. She has been in your foster home since she was 8 weeks old. Her mother is on drugs. She completed a drug treatment program a few months ago but relapsed, and is now homeless and using drugs regularly. She recently gave birth to Annette, who was born drug-exposed. DCFS has guardianship of both children. You have agreed to accept Annette for placement.

What Permanency Goals would you select for Amber and Annette?

What are your reasons for selecting this Permanency Goal/s?

As Amber's and Annette's foster parents, what tasks would fall to you in implementing the permanency plan for achieving this Permanency Goal/s?
