

	<b>GEORGIA DIVISION OF FAMILY AND CHILDREN SERVICES CHILD WELFARE POLICY MANUAL</b>		
	<b>Chapter:</b> (10) Foster Care	<b>Effective Date:</b> October 2021	
	<b>Policy Title:</b> Case Planning		
<b>Policy Number:</b> 10.23	<b>Previous Policy #:</b> N/A		

**CODES/REFERENCES**

O.C.G.A. § 15-11-2 Definitions  
 O.C.G.A. § 15-11-200 DFCS Report; Case Plan  
 O.C.G.A. § 15-11-201 DFCS Case Plan; Contents  
 O.C.G.A. § 15-11-202 Reasonable Efforts by DFCS to Preserve or Reunify Families  
 O.C.G.A. § 15-11-203 When Reasonable Efforts by DFCS Not Required  
 O.C.G.A. § 39-4-4 Enactment and Text of Compact  
 Title IV-E of the Social Security Act Sections 471(a) (16); 475(1); 475 (1) (A), (B), (C), (D), (E), (F) and (G); 475A, 475A (a) (1), 475(5) (A), (D) and (H)  
 Title IV-E of the Social Security Act Sections 475(A) (i) and (ii)  
 45 CFR Parts 1356.21(g), 1356.21(g) (1), (2), (3), (4) and (5)  
 Preventing Sex Trafficking and Strengthening Families Act (Public Law 113-183)  
 Every Student Succeeds Act of 2015 (Public Law 114-95)

**REQUIREMENTS**

- The Division of Family and Children Services (DFCS) shall:
1. *Establish and disseminate policy and procedures for staff to determine the appropriateness and necessity for placement of a child into foster care, to meet case plan requirements under Title IV-E.*
  2. Assist the family in constructing a way to think about the problem that promotes real change.
  3. *Work collaboratively with the identified family, children, providers and family supports to develop a written case plan to address the issues, including the everyday life tasks the family is struggling with that caused a child to enter foster care and identify what behaviors need to occur or the necessary skills a family must demonstrate to ensure child safety.*
  4. Engage any federally recognized tribe to initiate their involvement in the case planning process for any child who is a member or claims eligibility for membership of a federally recognized Indian tribe.
  5. Utilize the case assessments to begin developing a quality case plan focused on solutions and include the following:
    - a. Outcomes
    - b. Tasks
  6. *Ensure the written case plan:*
    - a. *Is a discreet part of the case record in a format determined by DFCS, which is developed jointly with the parent(s) or guardian(s) of the child in foster care and has a projected date of completion.* This includes custodial and non-custodial parents and any incarcerated parents unless it has been determined by the court not to be

in the best interest of the child (see Practice Guidance: Case Planning with Non-Custodial Parents and Case Planning with Incarcerated Parents).

- b. *Is developed within 30 days of the child's entry into foster care.*
- c. Includes a description of the circumstances that resulted in the child being placed under the jurisdiction of the court and in foster care (e.g., reasons for removal).
- d. *Includes a description of the services offered and provided to prevent removal of the child from the home and to reunify the family.*
- e. Includes an assessment of the strengths and needs of the child and family and the type of placement best equipped to meet those needs.
- f. *Includes a description of the type of home or institution in which the child is placed.*
- g. *Includes a discussion of the safety and appropriateness of the placement and how DFCS plans to carry out the judicial determination made with respect to the child.*
- h. Includes specific time-limited outcomes and related tasks designed to address the everyday life tasks the family is struggling with and enable the safe return of the child to his or her home, or, if return to his or her home is not possible, activities designed to result in permanent placement or emancipation.
- i. Includes assignment of specific responsibility for accomplishing the planned activities and the projected date of completion of the case plan objectives.
- j. *Includes a plan for assuring the child receives safe and proper care, and services are provided to the parent(s), guardian or legal custodian, child, and placement provider in order to improve the conditions in the parents', guardian's or legal custodian's home to facilitate the child's safe return to his/her own home or the permanent placement of the child, including a discussion of services that have been investigated and considered and are not available or likely to become available within a reasonable time to meet the needs of the child or, if available, why such services are not safe or appropriate.*
- k. *Includes a plan for assuring services are provided to the child and placement provider to address the needs of the child while in foster care.*
- l. *Includes a discussion of the appropriateness of the services provided to the child under the plan and the date time-limited services will be terminated.*
- m. Includes a schedule for visitation between the child and his/her parents, siblings and any other appropriate kin (relatives and fictive kin) and an explanation if no visits are scheduled.
- n. *For a child who has attained 14 years of age, includes a written description of the programs and services that will help such child prepare for the transition from foster care to a successful adulthood.*
- o. *For children age 14 and older, must:*
  - i. *Include a document that describes the child's education, health, visitation and court participation rights, the right to receive a credit report annually, the right to stay safe and avoid exploitation and a signed acknowledgement by the child that the child was provided these rights and that they were explained in an age appropriate way.*
  - ii. *Be developed in consultation with the child and, at the option of the child, two members of the permanency planning team who are selected by the child and who are not the Social Services Case Manager (SSCM) or foster parent except that DFCS may reject an individual selected if there is good cause to believe the individual would not act in the best interests of the child.*

**NOTE:** One individual selected by the child may be designated to be the child's

advisor and as necessary, advocate with respect to the application of the reasonable and prudent standard to the child.

- p. In the case of any child for whom Another Planned Permanent Living Arrangement (APPLA) is the permanency plan (the child must be at least 16 years of age), DFCS shall document in the case plan to be presented at each review and permanency plan hearing:
- i. The intensive, ongoing and, as of the date of the hearing, unsuccessful efforts made to return the child home or secure a placement for the child with a fit and willing relative (including adult siblings), a legal guardian or an adoptive parent, including thorough efforts that use search technology (such as social media) to find biological family members.
  - ii. The tasks DFCS is undertaking to ensure the child's foster family home or child caring institution is following the reasonable and prudent parent standard.
  - iii. The tasks DFCS is undertaking to ensure the child has regular, ongoing opportunities to engage in age and developmentally appropriate activities (including by consulting with the child in an age-appropriate manner about the opportunities of the child to participate in the activities).
- q. During the 90-day period immediately prior to the date on which the child will attain 18 years of age or prior to the child's planned exit from foster care, a DFCS case manager and, as appropriate, other representatives of the child will provide the child with assistance and support in developing a transition plan that is personalized at the direction of the child, includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services, includes information about the importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under state law to make such decisions, and provides the child with the option to execute a health care power of attorney, health care proxy, or similar document recognized under state law, and is as detailed as the child may elect.
- r. Documents the tasks to finalize a placement when the case plan outcome is or becomes adoption or placement in another permanent home. When the case plan outcome is adoption, at a minimum, such documentation shall include child-specific recruitment efforts such as the use of tribal, state, regional, and national adoption exchanges including electronic exchange systems to facilitate orderly and timely in-state/tribal service area and inter-State/Tribal service area placements.
- NOTE:** Georgia has opted out of the Title IV-E Kinship Guardianship Assistance Program requirement.
- s. Includes a discussion of how the case plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available that is in close proximity to the parent(s), guardian or legal custodian when the case plan outcome is reunification and a discussion of how the placement is consistent with the best interests and special needs of the child.
- t. If the child has been placed in a foster family home or child-care institution a substantial distance from the home of the parent(s), guardian or legal custodian in a different state, or outside of the Tribal service area, sets forth the reasons why such a placement is in the best interest of the child.
- u. If the child has been placed in foster care in a state or tribal service area outside of

*the State or Tribal service area in which the child's parent(s), guardian or legal custodian are located, assures that an agency case manager on the staff of the state or tribal service area in which the home of the parents, guardian or legal custodian of the child is located, of the state or tribal service area in which the child has been placed, or of a private agency under contract with either such state/tribal agency, visits the child in such foster home or institution no less frequently than every six months and submits a report on the visit to the State or Tribal agency of the State or Tribal service area where the home of the child's parent(s), guardian or legal custodian is located.*

- v. *Complies with the Interstate Compact on the Placement of Children (ICPC) when an out-of-state group home placement is recommended or made. In addition, documentation of the recommendation of the multidisciplinary team and the rationale for such particular placement shall be included. The case plan shall also address what in-state services or facilities were used or considered and why they were not recommended.*
- w. *If applicable, includes a statement that reasonable efforts have been made and a requirement that reasonable efforts shall be made for so long as the child remains in the custody of DFCS:*
  - i. *To place siblings removed from their home in the same foster care, kinship care, guardianship or adoptive placement unless DFCS documents that such a joint placement would be contrary to the safety or well-being of any of the siblings;*
  - ii. *In the case of siblings removed from their home who are not placed together, for frequent visitation or other ongoing interaction between the siblings unless DFCS has information and documents that such frequent visitation or other ongoing interaction would be contrary to the safety or well-being of any of the siblings; and*
  - iii. *To continue to assess and overcome barriers to joint placement and/or visitation when it has been previously determined that contact is contrary to the safety or well-being of any of the siblings or document why such efforts are not appropriate.*
- x. *Includes a plan for ensuring the educational stability of the child while in foster care (see policy 10.13 Foster Care: Educational Needs), including:*
  - i. *Assurances that each placement of the child takes into account the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the time of placement; and*
  - ii. *An assurance that DFCS has coordinated with appropriate local educational agencies (as defined under section 9101 of the Elementary and Secondary Education Act of 1965) to ensure the child remains in the school in which the child is enrolled at the time of each placement; or*
  - iii. *If remaining in such school is not in the best interests of the child, assurances by DFCS and the local educational agencies to provide immediate and appropriate enrollment in a new school, with all of the educational records of the child provided to the school.*
- y. *Incorporates the health and education records of the child including the most recent information available regarding:*
  - i. *The names and addresses of the child's health and educational providers.*
  - ii. *The child's grade level performance.*

- iii. *The child's school record.*
  - iv. *A record of the child's immunizations.*
  - v. *The child's known medical problems.*
  - vi. *The child's medications.*
  - vii. *Any other relevant health and education information concerning the child determined to be appropriate by DFCS.*
- z. Includes a recommendation for a permanency plan for the child. If, after considering reunification, adoption or permanent guardianship DFCS recommends permanent placement in another planned permanent living arrangement, the case plan shall include documentation of a compelling reason (see practice guidance in policy 17.11 Legal: Termination of Parental Rights for the exceptions to filing for TPR) or reasons why reunification, termination of parental rights (TPR), adoptive placement or permanent guardianship are not in the child's best interests and when such child shall be placed in APPLA.
- aa. Includes a statement that the parent, guardian or legal custodian of the child and the child have had an opportunity to participate in the development of the case plan, to review the case plan, to sign the case plan and to receive a copy of the plan or an explanation about why such persons were not able to participate or sign the case plan.
- bb. Identifies the person within DFCS who is directly responsible for ensuring the case plan is implemented.
- cc. Includes all components of the written report (see Practice Guidance in policy 17.2 Legal: Case Review/Permanency Plan Hearings for components of a written report).
- NOTE:** Georgia has not implemented qualified residential treatment programs (QRTP). Therefore, provisions for case planning for children placed in a QRTP will be updated upon implementation.
7. Notify the Guardian Ad Litem (GAL) of the development of any case plan of the child for which he/she was appointed and provide an opportunity for him/her to be involved in the development of the plan.
  8. Develop the initial case plan in partnership with the family during a Family Team Meeting (FTM) meeting within 25 calendar days of the child entering foster care.
  9. Provide written notification of the FTM to develop the case plan to the parent, guardian or legal custodian, the child (if 14 years of age or older), the child's attorney, the Guardian Ad Litem (GAL), and court appointed special advocate (CASA) at least five business days in advance of the meeting.
  10. Ensure any Plan of Safe Care is incorporated into the case plan when an infant identified as being affected by substances or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder enters care (see policy 19.27 Case Management: Plan of Safe Care for Infants Prenatally Exposed to Substances or a Fetal Alcohol Spectrum Disorder (FASD)).
  11. Submit a supervisor-approved case plan to the juvenile court for incorporation into a court order within 30 calendar days of a child entering foster care and at each subsequent review of the disposition order.
  12. Submit to the court, in conjunction with the case plan, a Written Transitional Living Plan (WTLP) for all youth ages 14 years and older, when applicable (see policy 13.3 Independent Living Program: Written Transitional Living Plan).
  13. Expect, anticipate and assess a reoccurrence of high-risk behavior or behavior that would suggest that a caregiver is reverting to the problem behavior (relapse/setback).

14. Submit a new case plan to the court within 10 calendar days of the court determining the current plan is no longer appropriate for the child's needs and/or directing DFCS to develop a new plan.
15. Provide the placement resource with a copy of those portions of the court approved plan that involve the permanency plan and the services to be provided to the child.  
**NOTE:** The placement resource (foster parent or kinship caregiver) is entitled by law to receive these portions of the case plan.
16. Request a hearing to modify the case plan whenever significant changes occur to the plan.
17. Make diligent efforts to reunify the child and family through the provision of intensive, time-limited reunification services until otherwise directed by the court. If the court adopts a case plan of reunification, it shall be in effect until modified by the court.  
**NOTE:** There are instances when the court may determine it is reasonable to make no efforts to reunify the child and family (see policy 9.5 Eligibility: Reasonable Efforts).
18. Review the court order to determine parental requirements regarding treatment and random drug screens prior to reunification, whenever a child is adjudicated dependent as a result of parental alcohol or substance abuse (see policy 19.25 Case Management: Drug Screens and 19.26 Case Management: Case Management Involving Caregiver Substance Abuse or Use, whenever substance abuse is suspected or alleged).
19. Engage collateral contacts monthly during the continued assessment of child safety and well-being, caregiver protective capacity, family conditions and case planning progress in Permanency cases.
20. Ensure the case plan and status of the child is reviewed no less frequently than once every six months by the court or by an administrative review (see policy 17.2 Legal: Case Review/Permanency Plan Hearings).
21. Consider recommendations of the family team members in any changes to the court ordered case plan including changes to the permanency plan. An FTM shall be held prior to any changes to the permanency plan.
22. Adhere to confidentiality and Health Insurance Portability and Accountability Act (HIPAA) provisions outlined in policies 2.6 Information Management: Confidentiality/Safeguarding Information and 2.5 Information Management: Health Insurance Portability and Accountability Act. Obtain a signed Authorization for Release of Information (ROI), when applicable.

## PROCEDURES

To develop the initial case plan, the SSCM will:

1. Participate in the transfer staffing (see policy 19.4 Case Management: Case Transfer).
2. Review and analyze DFCS history, Family Functioning Assessment (FFA), Comprehensive Child and Family Assessment (CCFA), other assessments completed on the child or family and any other background information in preparation for the Family Team Meeting to develop the case plan.
3. Engage the parents, guardians or legal custodians in a discussion to prepare for case planning during the joint visit with the Child Protective Services (CPS) SSCM to include:
  - a. A review of the FFA, genogram, and other CPS findings.
  - b. Any possible Native American Heritage and implications of the Indian Child Welfare Act (ICWA) (see policy 1.6 Administration: Indian Child Welfare Act (ICWA) and Transfer of Responsibility for Placement and Care to a Tribal Agency).
  - c. The reasons for removal from the home.

- d. Permanency plan options as outlined in policy 10.22 Foster Care: Permanency Planning, including:
    - i. The strict timeframes for achieving permanency as outlined on the Permanency Timeline.
    - ii. The parents, guardians or legal custodians input and feelings regarding the possible permanency plans.
    - iii. The reasons timely permanency for the child is important.
  - e. Provide a completed copy of the Permanency Timeline to the parents, guardians or legal custodians as a tool to remind them of the timeframes.
  - f. Identify with the family what behaviors need to occur or the necessary skills a family must have to predict safety more accurately (consensus) and establish a partnership with the family focused on change.
  - g. Identifying family members, formal and informal supports to include in the Family Team Meeting (FTM) and case plan development.
  - h. Obtaining the signature of the parents, guardian or legal custodian on any needed Authorization for Release of Information forms and the Consent to Receive Targeted Case Management Services (see policy 19.18 Case Management: Target Case Management).
4. When applicable, engage the Indian tribe in the case plan development for any child who claims eligibility or membership in a federally recognized Indian tribe or a Georgia tribe.
  5. Schedule a FTM to develop the case plan and Educational Stability Plan (ESP) (see policy 10.13 Foster Care: Educational Needs) within 25 calendar days of the child's entry into foster care.
  6. Provide written notification of the FTM to the parent, guardian or legal custodian, the child, the child's attorney and the Guardian Ad Litem (GAL) at least five business days in advance of the meeting. The written notification should include:
    - a. The date, time and location of the meeting.
    - b. An explanation that the case plan developed at the meeting will be submitted to the court for consideration to become an order of the court.
    - c. Notification that the proposed case plan shall be in effect until incorporated into an order of the court. And
    - d. An explanation that once adopted by the court, the case plan remains in effect until modified by the court.
  7. Provide written or verbal notice of the FTM to any of the following persons who may have significant input into the development of the case plan, ESP or placement of the child:
    - a. Extended family of the child.
    - b. The current caregiver of the child (i.e., kin, foster parent, Room Board and Watchful Oversight (RBWO) provider).
    - c. Service providers.
    - d. Court Appointed Special Advocate (CASA).
    - e. Education Support Monitor (ESM).
    - f. Staff from the local educational agency, and
    - g. Any other persons identified as a member of the family's support team.
  8. Conduct and/or participate in the FTM with the parents, guardian or legal custodian, child (when age and developmentally appropriate) and family team members (see policy 19.3. Case Management: Solution-Focused Family Team Meetings). At the meeting:

- a. Review any CASA reports, court orders and assessments, including the CCFA and the Concurrent Planning Assessment Guide, with the parents, guardian or legal custodian.
- b. Openly and honestly discuss:
  - i. The CPS history of the family including any previous foster care episodes for the child.
  - ii. The reasonable efforts made to prevent removal and the reason(s) the child was removed from the home, including the consensus built around the challenging developmental tasks that pose a safety threat.
  - iii. Findings and recommendations from the CCFA.
  - iv. Recommendations from the CASA, GAL, child attorney and court.  
**NOTE:** Recommendations should be included even if individuals are not required or do not attend the FTM.
  - v. Any possible Native American heritage and implications of ICWA.
  - vi. The family and individual level outcomes needed to ensure the child can safely return to the home and what DFCS can do to assist.
  - vii. The potentially detrimental effects that prolonged foster care placement can have on a child and strategies to minimize trauma to the child.
  - viii. The rights and options of the parents, guardians or legal custodians, including the option of surrendering parental rights as a means for the child to attain permanency.
  - ix. Caregiver protective capacities including whether their issues are chronic or unable to be resolved (e.g. aggravated circumstances), family strengths, child vulnerabilities, well-being concerns, the child's wishes regarding permanency, service needs and family supports.
  - x. The identity and contact information of absent parents and possible kin or other committed individuals who may be a placement option or support to the child or family.  
**NOTE:** If a relative entitled to notice fails to demonstrate an interest in and willingness to provide a permanent home for the child within six months of receiving the required notice, the court may excuse DFCS from considering the relative as a placement (see policy 19.20 Case Management: Diligent Search).
  - xi. The appropriateness and stability of the current placement of the child.
  - xii. Independent living services that are available to the youth (age 14 years of age and older) and the outcomes and tasks the youth and family would like to have incorporated into the Written Transitional Living Plan (WTLP) (see policy 13.3 Independent Living Program: Written Transitional Living Plan).
  - xiii. The need to determine a permanency plan for the child, including, but not limited to:
    1. Permanency options available.
    2. The reasons for the recommended permanency plan and case plan outcomes identified.
    3. The limited timeframe for achieving reunification, if a reunification plan is developed, and the possible outcomes of not achieving it in a timely manner.
    4. The need to utilize concurrent planning (if appropriate) so that if permanency cannot be achieved through reunification, it may be achieved



- through adoption or guardianship to support timely permanency for the child.
5. Finalization of the permanency plan and case plan with the court.
  6. The Critical Actions in Managing the Permanency Case and the Permanency Timeline (see Forms and Tools).
- xiv. The role of the SSCM in partnering with the parents, guardian or legal custodian to achieve reunification while at the same time, monitoring and reporting progress to the court.
- c. Identify services/supports required to address the needs of the parents, child and placement resource.
  - d. Develop individual and family level outcomes and action plans that include the five relapse prevention skills (see policy 19.14 Case Management: Action Planning).
  - e. Establish purposeful contact standards (see policy 19.15 Case Management: Developing Contact Standards for Purposeful Contacts and Collateral Contacts).
  - f. Develop a visitation plan, including a sibling visitation plan when siblings are not placed together (see policy 10.19 Foster Care: Visitation and policy 10.20 Foster Care: Preserving Sibling Connections).
  - g. Incorporate the Plan of Safe Care into the initial case plan.
  - h. Develop an ESP for the child (see policy 10.13 Foster Care: Educational Needs).
  - i. Celebrate positive changes already achieved by the family towards reunification of the child.
9. Enter all required information for the case plan (Child Plan Detail page and Family Plan Detail page) into Georgia SHINES no later than 72 hours from the FTM to develop the initial case plan. In addition to completing the foster care case plan, thoroughly complete the pages that pre-populate into the case plan including the:
    - a. Person Detail page with demographic information for each child, parent, caregiver, kin, etc.
    - b. Custody page with removal information.
    - c. Legal Status Detail page and Legal Action Outcome Detail Page with legal status, petitions/complaints filed, court hearings held, court orders received, etc.
    - d. Diligent Search tab.
    - e. Needs and Outcomes page with information from the CCFA.
    - f. Placement Information Page with all placements documented.
    - g. Health Detail page with up-to-date medical, dental and psychological appointments, diagnoses, etc.
    - h. Education Detail page with up-to-date educational and school information.
    - i. Visitation Plan page.
  10. Submit the case plan to the Social Services Supervisor (SSS) via Georgia SHINES for approval.
  11. Obtain all appropriate signatures on the case plan, including the SSS.
  12. Immediately provide a copy of the proposed case plan to the parents, guardian or legal custodian prior to the conclusion of the meeting. If not possible, a copy must be delivered by United States Postal Service (mail), email or hand delivery at the same time the plan is transmitted to the court.
  13. Notify the parents, guardian or legal custodian of their right to contest the case plan by requesting a hearing before the juvenile court within five days of receiving the proposed case plan. Notify the parents that if the initial case plan is not for reunification but for adoption or guardianship. The court shall hold a permanency plan hearing within 30

days of the filing of the case plan (see policy 17.2 Legal: Case Review/Permanency Plan Hearings).

14. Immediately submit a copy of the supervisor-approved signed case plan and CCFA to the court for approval and incorporation into an order of the court.  
**NOTE:** If counties participate in the Case Plan Reporting System (CPRS) interface, the proposed case plan should be submitted via the CPRS interface.
15. Notify the Special Assistant Attorney General (SAAG) of the submission of a case plan to ensure the court schedules a permanency plan hearing within 30 days. If a hearing is not requested or scheduled by the court and the time to request a hearing has expired, the court shall:
  - a. Review the proposed case plan; and
  - b. Enter a disposition order or supplemental order incorporating all elements of the case plan for reunification services the court finds essential to reunification, specifying what shall be accomplished by all parties before reunification of the family can be achieved.
16. Update the Legal Action page when the supplemental order incorporating the initial case plan is received.
17. Submit an updated case plan to the court five days prior to any case review or permanency plan hearing (see policy 17.2 Legal: Case Review/Permanency Plan Hearings).

**If the court approved case plan is for reunification, the SSCM will:**

1. Provide the placement resource with a copy of those portions of the court approved plan that involve the permanency plan and the services to be provided to the child.
2. Immediately, initiate all referrals for services needed to address the issues that prevent the child from being able to return home safely.
3. Ensure frequent quality visits occur between the child and parents, guardian or legal custodian in accordance with policy 10.19 Foster Care: Visitation.
4. Conduct monthly purposeful contacts with the parents, guardian or legal custodian, child and placement provider to monitor the quality of services, their participation and to assess any behavioral changes observed as a result of the services in accordance with policy 10.18 Foster Care: Purposeful Contacts in Foster Care.
5. Conduct collateral contacts with service providers, kin and others with knowledge about the family to assess behavioral changes/progress in the child and/or parents, guardian or legal custodian they have observed.
6. Carefully and accurately document the services offered and provided and the family's response to the services, including level of cooperation and specific behavioral changes achieved/observed that reduce safety threats to child(ren) and progress in the Case Plan in Georgia SHINES.
7. Manage any setbacks.
  - a. Assess how the setback affects safety.
  - b. Gather information surrounding the setback to determine the relapse prevention skills that were not utilized.
  - c. Utilize the family's action plan in discussions around what went wrong to help pinpoint where the problem occurred.
  - d. Staff with the SSS to determine next steps.
8. Update the case plan to reflect outcome and task completion prior to any case review or permanency plan hearing, or as often as necessary.

9. Re-assess the case plan with the parents, guardian or legal custodian and child during each purposeful contact and, more formally, every 90 days from the date the child entered care if the plan is a concurrent plan.

**If the court approved case plan is for adoption, the SSCM will:**

1. Document on the case plan in Georgia SHINES and/or the Adoption Information page:
  - a. All the reasons reunification would be detrimental to the child and that reunification services; and specifics as to the grounds for TPR.
  - b. The tasks to be completed by DFCS to secure an adoptive home for the child, including child-specific recruitment efforts to be taken (or already taken) to finalize a permanent placement.
2. Notify the foster parents of the petition for TPR via the Notification to Foster Parent(s) of Filing of Petition to Terminate Parental Rights.
3. File a TPR petition in accordance with policy 17.11 Legal: Termination of Parental Rights (TPR).  
**NOTE:** The TPR petition should be filed far enough in advance for an adoption to be finalized within 24 months of a child's entry into foster care.
4. Complete all adoption preparation activities in accordance with policy 11.1 Adoption: Adoption Preparation.
5. Conduct monthly purposeful contacts with the parents, guardian or legal custodian (if required), child and placement provider to monitor the quality of services, their participation and to assess any behavioral changes observed as a result of the services in accordance with policy 10.18 Foster Care: Purposeful Contacts in Foster Care.
6. Conduct collateral contacts with service providers, school or medical professionals, or any other individual with knowledge about the child or family to assess the safety and well-being of the child and the progress towards permanency.
7. Manage any setbacks/relapses to finalizing the adoption.
8. Update the case plan to reflect outcome and task completion as often as necessary.
9. Re-assess the case plan during each purposeful contact with the parents, guardian or legal custodian, child, kin and/or placement resource.

**If the court approved plan is for permanent guardianship with a kinship caregiver, the SSCM will:**

1. Ensure the parents, guardian or legal custodian has received reunification services unless a non-reunification order has been granted.
2. Ensure an exhaustive diligent search for kin is conducted and documented in the Diligent Search tab in Georgia SHINES and the reason(s) why placement with each person identified is or is not in the child's best interest with a focus on safety, permanency and well-being.
3. Conduct paternity testing on putative fathers to expand the pool of possible resources to paternal relatives.
4. Conduct pre-placement visits if the child is not already in the home.
5. Conduct monthly purposeful contacts with the potential guardian and child to assess and supervise the child's placement in accordance with policy 10.18 Foster Care: Purposeful Contacts in Foster Care.  
**NOTE:** A minimum of six months of purposeful contacts must be documented prior to recommending a transfer of guardianship.

6. Provide support services to ensure the safety and well-being of the child including, but not limited to, a transitional plan regarding the child's educational, behavioral and/or medical needs.
7. Engage collateral contacts including service providers, school or medical professionals, or any other individual with knowledge about the child or family to assess the safety and well-being of the child and the progress towards permanency in accordance with policy 19.16 Case Management: Collateral Contacts.
8. Document the following on the Case Plan in Georgia SHINES:
  - a. The compelling reasons reunification would be detrimental to the child and that reunification services; therefore, should not be provided, including specifics as to whether any grounds for TPR exist.
  - b. All reasons TPR and adoption are not in the best interest of the child.
  - c. The tasks to be completed (or already completed) to finalize a permanent placement.
  - d. The presence of an existing, positive relationship or bond between the child and the potential guardian.
  - e. A discussion with the guardian regarding the financial and non-financial supports available to the kinship caregiver if they are granted guardianship of the child (see policy 22.8 Kinship: Financial and Non-Financial Supports for Children in Foster Care or Who Have Achieved Permanency).
9. Update the case plan to reflect outcome and task completion as often as necessary.
10. Re-assess the case plan during each purposeful contact with the parents, guardian or legal custodian, child, prospective guardian and/or placement resource.
11. Prior to transferring guardianship to a caregiver, refer the SSCM shall ensure:
  - a. An approved Kinship Assessment is on file (see policy 22.3 Kinship: Kinship Assessment).
  - b. The occurrence of at least six months of purposeful contacts in the home of the prospective guardian.
  - c. A non-reunification order is in place.
  - d. The kinship caregiver is aware of all financial and non-financial supports available once guardianship is transferred.
  - e. Referral and/or linkage to community agencies (i.e. Department of Behavioral Health and Developmental Disabilities (DBHDD), Promoting Safe and Stable Families (PSSF), etc.) as needed.
  - f. If a kinship caregiver is to receive a subsidy payment, all eligibility requirements have been met (see policy 22.8 Kinship: Financial and Non-Financial Supports for Children in Foster Care or Who Have Achieved Permanency).
  - g. Medical history, copies of educational records, birth certificate, social security card, etc., are provided to the kinship caregiver.
12. Petition the court to be relieved of custody and transfer guardianship to the kinship caregiver.

**NOTE:** Non-reunification must be granted prior to a transfer of guardianship.
13. If the caregiver wishes to receive a guardianship subsidy, ensure the appropriate agreement is executed (see policy 22.8 Kinship: Financial and Non-Financial Supports for Children in Foster Care or Who Have Achieved Permanency).

**If the court approved case plan is for Another Planned Permanent Living Arrangement (APPLA), the SSCM will:**

1. Develop a WTLP with the youth outlining the outcomes and tasks necessary while the youth is in foster care to assist with the transition to successful adulthood.
2. If Long-Term Foster Care (LTFC) is the APPLA option, ensure a LTFC agreement is signed and the court order includes the name of the LTFC placement resource.
3. Initiate services for the child and/or placement resource to ensure that the child's safety and well-being needs are met.
4. Conduct collateral contacts with service providers, school or medical professionals, or any other individual with knowledge about the child or family to assess the safety and well-being of the child and the progress towards permanency.
5. Document the following on the case plan in Georgia SHINES:
  - a. Compelling reasons why reunification, TPR/adoption or guardianship are not appropriate or in the best interest of the child and ensure these reasons are documented in the court order incorporating APPLA as the permanency plan.
  - b. The current placement resources willingness to maintain the child in the placement until the child reaches 18 years of age.
  - c. Supports/services provided to prepare the child for successful adulthood, including any Independent Living Program (ILP) workshops, community workshops and any independent living skills instruction provided by the foster parent.
  - d. Efforts made to assist youth with resources/services after emancipation, including Independent Living (IL) services, Extended Youth Support Services (EYSS), etc.).
6. Continuously explore and/or re-explore a more permanent placement option for the child, including ongoing exploration of kin and others with a committed relationship to the child.
7. Update the case plan to reflect outcome and task completion as often as necessary.
8. Re-assess the case plan during each purposeful contact with the parents, guardian or legal custodian, child, kin and/or placement resource.

**If the court approved case plan is a concurrent plan, the SSCM will:**

1. Ensure the parents have a clear understanding of the following:
  - a. The alternate plan is a secondary plan to prevent their child from lingering in foster care and not an attempt to undermine their efforts towards reunification.
  - b. The status of their reunification efforts throughout the case.
2. Implement the visitation plan and ensure:
  - a. The parents, guardians or legal custodians and resource parents/other permanency resource are knowledgeable regarding the expectations with visitation.
  - b. Any barriers to visitation have been discussed and resolved (i.e. location, schedule, transportation, etc.).
3. Provide intensive services and/or refer the family/caregiver for appropriate services based on the case plan outcomes, recommendations from the CCFA, and other assessed/emerging needs.
4. Ensure referrals for service provision are made timely (see policy 19.17 Case Management: Service Provision):
  - a. Emergency needs require a referral for services within 24 hours of discovery.
  - b. Non-emergency needs require a referral for services within five business days of discovery.

5. Engage the parents, guardians or legal custodians, child and placement resource during monthly purposeful contacts to assess their progress on the case plan outcomes and tasks, perception of services and whether services are meeting their needs (see policy 10.18 Foster Care: Purposeful Contacts In Foster Care).
6. Review provider notes and engage service providers monthly.
  - a. Assess the family's progress with services.
  - b. Ensure services are appropriate, sufficient and effective in implementing positive change.
  - c. Assess the provision and quality of services being provided to ensure the appropriateness of the service provider.
  - d. Invite service providers to case reviews, Permanency Roundtables, etc.
7. Fully implement the alternative plan while the family is working towards reunification, which includes:
  - a. Identification and placement of child with the resource parents or other permanency resource (see policy 10.22 Foster Care: Permanency Planning).
  - b. Ongoing discussion with resource parents or other permanency resource regarding the alternative permanency plan selected and commitment to permanency for the child if reunification fails.
  - c. Progress on specific outcomes and tasks identified in the case plan relating to the alternative permanency plan for the family.
8. Participate in a monthly staffing with the SSS and discuss:
  - a. Progress of the parents, resource parents or other permanency resource and the child.
  - b. The quality and effectiveness of services and/or service providers.
  - c. The need for additional services or a change in the current services.
9. Inform the parents, guardians or legal custodians and placement resource of the case status and the agency's plan to seek TPR if reunification efforts are not successful and the concurrent plan is adoption.
  - a. Collect the required information for the adoption process, including building the legal case for TPR.
  - b. Create the Life Book for the children (see Creating and Using a Life Book).
10. Ensure the parents, guardians or legal custodians and possible permanent resource are knowledgeable of the following should reunification efforts fail, and guardianship is the concurrent plan:
  - a. Tasks for filing a guardianship petition.
  - b. Supports and subsidies available to the potential guardian.
11. Document the following in Georgia SHINES:
  - a. Intensive efforts towards reunification and the parents, guardians or legal custodians progress with case plan outcomes.
  - b. All referrals and services to accomplish both the primary and alternative plans under the Services and Referrals tab.
  - c. A summary of the findings from the review of provider notes in the Narrative of the Contact Detail.
  - d. All purposeful contacts under the Narrative of the Contact Detail.
12. Update the case plan to reflect outcome and task completion as often as necessary.
13. Utilize a structured process (i.e. Permanency Roundtable, Family Team Meeting, etc.) to re-assess the case plan and parental progress with the parents, guardian, or legal custodian and the support team every 90 days (see policy 17.2 Legal:

## Case Review/Permanency Plan Hearings).

The SSS will:

1. Review case documentation including DFCS history and the current assessment to ensure all information is considered when making decisions related to case planning.
2. Participate in FTMs conducted with the family to develop the case plan and address any concerns with the achievement of case plan outcomes.
3. Ensure contact standards (purposeful and collateral) are set at a level to sufficiently assess progress toward case plan outcomes to ensure safety and improve family functioning.
4. Ensure the development and incorporation of the ESP into the case plan.
5. Review and approve case plans. Ensure the case plan:
  - a. Is initially developed and submitted to the court within 30 days of the child's removal.
  - b. Addresses the identified safety threats (reasons for removal).
  - c. Focuses on the everyday life tasks that are challenging for the family.
6. Through documentation review, evaluate the quality and effectiveness of services being provided to the child and family to progress them toward the achievement of case plan outcomes.
7. Utilize the following Georgia SHINES reports to monitor case planning activities:
  - a. The Financial Exception Report which is a user defined report.
  - b. APPLA Exception Cases.
  - c. APPLA Summary.
  - d. Children w/o Involvement (CP) List.
  - e. Children w/o Involvement (CP) Status.
  - f. Parents w/o Involvement (CP) List.
  - g. Parents w/o Involvement (CP) Status.
  - h. Cases without 6 Month Review.
  - i. Children with Overdue Foster Care Case Plan.
8. Ensure case plans are updated to reflect outcome and task completion as often as necessary, but at a minimum, prior to each case review (see policy 17.2 Case Review/Permanency Plan Hearings).
9. Conduct a supervisory staffing with the SSCM to:
  - a. Ensure the SSCM updates the case plan and submits it to the court at least five days prior to any case review or permanency plan hearing.
  - b. Assist the SSCM with evaluating and managing setbacks/relapses.
  - c. Evaluate the sufficiency of the case plan and progress towards case plan outcomes.
  - d. Discuss the need to change the permanency plan and/or case plan.

### **Changes in the Court-Ordered Plan**

To make any changes to the court approved case plan or permanency plan, the following must occur:

1. Review and consider recommendations of the CASA, GAL, child attorney and court in any changes to the court ordered case plan including changes to the permanency plan.
2. Conduct an FTM prior to recommending changes to the case plan or permanency plan to the court (see policy 19.3 Case Management: Solution-Focused Family Team Meetings and policy 10.22 Foster Care: Permanency Planning).

3. DFCS shall request a hearing for the court to consider the recommended changes to the plan.
4. The court shall:
  - a. Provide timely notification to all relevant parties of the hearing.
  - b. Conduct a hearing.
  - c. Make all required findings and determinations as required by law.
  - d. Accept or reject the modifications to the case plan, in full or in part. And
  - e. Enter a supplemental order incorporating any changes to the case plan.

## **PRACTICE GUIDANCE**

### **Case Planning**

A case plan is a plan that is designed to ensure that a child receives protection, proper care and case management and may include services for a child, parents, guardian or legal custodian. A complete review of the investigation as well as all other DFCS history is fundamental to begin case planning. The case plan is a deliberate, reasonable and mutually agreed upon strategy to enhance caregiver protective capacities, which will eliminate or mitigate present danger situations and/or impending danger safety threats. The case plan must provide a clear understanding of the reason for removal from the home (consensus around family issues), changes which would constitute successful intervention [family level outcomes (FLOs) and individual level outcomes (ILOs)] and the method for facilitating change (action plans). Because of the tight timeframes to achieve permanency, it is critical for the initial case plan to be well executed. The likelihood of securing a safe and permanent home, either via reunification, adoption or guardianship, for the child in a timely manner is directly related to the appropriateness of the case plan.

The case plan provides the road map for meeting the safety, permanency and well-being needs of the child and family. The case plan must be developed collaboratively with the family and providers based on a thorough understanding of the strengths and needs unique to a family. Family Team Meetings (FTM) and Multi-Disciplinary Team (MDT) meetings are effective ways to engage natural and formal supports to enhance case plan development. The case plan should address what changes must be observed in families for children to be safely returned home. Case plans are unlikely to result in desired outcomes if the family is not invested in them; therefore, the family must be actively involved in the case planning process. The most critical aspect of case planning involves establishing a partnership with caregivers and obtaining consensus regarding the family and individual level outcomes. Although case plan outcomes should be established after gaining consensus with the family, there are situations where a consensus may not occur prior to the development of the case plan. Therefore, the SSCM must make every effort to achieve consensus as soon as possible to ensure buy-in in case plan development and implementation.

If reunification is appropriate, the agency proposes a reunification case plan outlining the outcomes and tasks required for the child to be safely returned to the family. If reunification is not appropriate, the agency proposes a case plan outlining the outcomes and tasks required to secure a permanent living arrangement for the child via other available adoption, guardianship or another planned permanent living arrangement. In some instances, the agency may propose a concurrent case plan, which incorporates both a reunification and adoption or guardianship. In a concurrent case plan, reunification is the primary permanency



plan and an alternate permanency plan is selected (adoption or permanent guardianship). The case plan outlines tasks to simultaneously support achieving the prescribed outcomes of both permanency plans.

### **Common Components of Case Plans**

The common components to any case plan include outcomes, tasks and action plans. Each case plan must include one FLO and one ILO. FLOs describe what the family will be doing each day to successfully handle the challenges with everyday life tasks and ensure the safety and well-being of the child. It is recommended that a family manage no more than two FLOs per case plan to prevent the family from becoming overwhelmed and help them focus on the most pressing issues impacting child safety and well-being. Additional safety outcomes can be incorporated into the case plan at re-assessment if initial outcomes are achieved. With each established FLO there must be a correlating ILO. ILOs outline the new behaviors to be demonstrated by the individual to successfully participate in the family level outcome and shall be specifically related to addressing a caregiver's underlying issues that create an unsafe home environment for the child. These personal self-management issues may be related to:

1. Anger or control
2. Substance abuse
3. Sexual behaviors
4. Emotional stability
5. Criminal behavior

When developing FLOs and ILOs, consideration should be given to desired outcomes identified during earlier stages of the case. Outcomes developed during investigations or Family Preservation Services (FPS) may remain relevant in foster care and provide a sense of continuity for the parent or guardian. Outcomes should be individualized based on the assessed strengths and needs of the family and must be:

1. Relevant to the reasons for removal.
2. Positively stated.
3. Written in clear and simple language.
4. Behaviorally specific.
5. Measurable.
6. Attainable. And
7. Time-limited.

Each FLO and ILO must have an associated action plan which is a personalized plan targeting the most high-risk situations. For example, DFCS involvement is related to inadequate supervision and educational neglect with identified caregiver substance abuse issues. Two FLOs will be developed with the family, one around ensuring adequate supervision of the child(ren) and the other around ensuring the educational needs of the children are being met. Only one ILO will be developed with the caregiver addressing their underlying issue of substance abuse which is contributing to the maltreatment. An action plan will be established for each FLO and ILO, consisting of tasks and step-by-step instructions of who will do what, when it will be done and how it will be measured (see policy 19.14 Case Management: Action Planning).

Outcomes that the family would like to address that are not related to safety are considered secondary level outcomes. Secondary level outcomes may be discussed with the family and

resources may be provided to assist the family with meeting these outcomes. However, secondary level outcomes should not hinder the achievement of outcomes that impact child safety. Secondary level outcomes may be noted on the case plan, however, there is no associated action plan.

Realistic timeframes for achievement of case plan outcomes and tasks help direct and motivate parents, guardians or legal custodians and children. However, the time needed by a parent, guardian or legal custodian to make the necessary behavioral changes must be balanced with the child's developmental needs and need for permanency. How to document and celebrate the achievement of established outcomes and tasks should be determined during case plan development.

### **Case Planning in Domestic Violence (DV)/Intimate Partner Violence (IPV) and Sexual Abuse Cases**

Case planning involving domestic violence (DV), intimate partner violence (IPV) and sexual abuse must be managed differently than those that do not contain these elements. The primary focus of these types of cases is basic safety rather than the challenges with everyday life tasks. Therefore, the first FLO will address basic safety on how the family will prevent the child from being physically (DV/IPV cases) or sexually (sexual abuse cases) harmed. The family's plan may include the perpetrator leaving the home and not having contact until recommended by the treatment/batterer program provider. Other family members or supports may have tasks on the plan to assist the non-offending caregiver in enforcing a "no contact" plan. An individual level outcome for the perpetrator around sexual offending or DV/IPV will be established; and if the assessment reveals the non-offending parent has failed to protect, an ILO will be developed for the non-offending parent addressing his/her underlying issue around protecting the children.

Although the primary focus in these types of cases is keeping children free from physical or sexual harm, a second family level outcome (FLO) can be established around managing the developmental stage of everyday life the family finds challenging. However, the perpetrator cannot participate in the second family level outcome until he/she has received treatment and demonstrated substantial progress related to their underlying issues (sexual abuse/DV/IPV).

It is important to remember that service provision will be key in helping the family move forward with ensuring safety in the home as well as assessing behavioral changes that impact safety. SSCMs must work in partnership with community-based service providers to:

1. Identify treatment approaches for the perpetrator of child abuse and neglect that have demonstrated effectiveness regarding future abusive or neglectful behavior.
2. Identify treatment approaches for the child victim that have been proven effective in reducing the impact of abuse and neglect on the child and assist in the child's resiliency.  
And
3. Identify treatment approaches that will assist the non-offending caregiver in creating and maintaining positive outcomes that impact the family and the child(ren) in the home.

### **Court Approval of the Case Plan**

Georgia's CPRS is an interface between Georgia SHINES and the juvenile court that allows the juvenile court to review the supervisor-approved case plan in Georgia SHINES. Upon receipt of the case plan from DFCS, the juvenile court will conduct a review of the plan. The

court will make a determination regarding the appropriateness of the child's permanency plan and placement. If the court rejects the permanency plan or any other component of the case plan, DFCS must submit a new/modified case plan within 10 calendar days for court approval. Once the court adopts the case plan, the court issues a disposition or supplemental order incorporating the case plan, which remains in effect until modified by the court. DFCS must ensure it receives copies of these supplemental orders and uploads these documents into External Documentation in Georgia SHINES as they are important to establish and retain eligibility for Title IV-E.

If DFCS submits an initial case plan to the court that does not recommend reunification as the permanency plan, supporting information is required. The court shall hold a permanency plan hearing no later than 30 days following the filing of the case plan to review the proposed case plan. If the court finds that reasonable efforts to reunify a child with his or her family will be detrimental to the child, then it enters an order stipulating "reasonable efforts to reunify the child and family are not required" or should be terminated. If the court finds that reunification efforts would not be detrimental to the child, it will order DFCS to submit a case plan for reunification within 10 calendar days for court approval. The adopted permanency plan will be incorporated into an order. If a hearing is requested by the parent, guardian or legal custodian after the development of the case plan, the court will conduct a hearing. After hearing the evidence, the court will enter an order which may:

1. Accept or reject the DFCS recommended permanency plan and case plan (all or part).
2. Order an additional evaluation.
3. Appoint a Guardian ad Litem (GAL).
4. Outline other reviews, as it deems necessary to determine the disposition that is in the child's best interest.
5. Include findings of fact that reflect the court's consideration of the oral and written testimony offered by the parents, the guardian, the custodian of the child, the foster parents, kin providing care for the child, and DFCS. And/or
6. Make a disposition only if the court finds that such disposition is in the best interest of the child.

Once the case plan is court-approved, the court will provide a copy of the order and court approved plan to the parties. DFCS will be held responsible for providing copies of the case plan to the parents, guardian or legal custodian, placement resource and GAL/CASA. The parents, guardian or legal custodian may provide written consent for DFCS to provide a copy of the case plan to other significant parties.

### **Documenting and Celebrating Case Plan Progress**

Documenting and celebrating progress is vital in case plan evaluation. The family's progress and completion with specific tasks on each action plan throughout the life of the case should be documented and celebrated. This documentation is critical in capturing change within a case and a family. During the development of the action plan, the SSCM may include suggestions for celebrating specific task completion. Action plans should include how each task will be measured allowing for the SSCM to review what has been documented by the family and discuss with the family the best way to celebrate progress. SSCMs can be creative with their families in the celebrating process by discussing different ways the family would like to celebrate.

Some examples of ways the SSCM can recognize and celebrate change include:

1. Verbally acknowledging the progress the family is making in working their action plans which can encourage the family and help them feel supported by the SSCM.
2. Using T-charts to compare the old unsafe and unproductive behaviors with safe and productive new ones.
3. Convening an FTM focusing on the significant and meaningful changes the family has made.
4. Conducting a celebration party planned with the family and treatment providers to highlight their progress. Food, balloons and certificates to celebrate the families' achievements may be included.
5. Mailing the family a card detailing their progress and acknowledging their efforts and commitment to reaching their outcomes.

### **Managing Setbacks**

Setbacks can be defined as the reoccurrence of a problem behavior that is considered high risk. Setbacks are a normal occurrence in case management and can be managed to prevent case stagnation and to continue case progression. A SSCM's and SSS's ability to manage their emotions around a family's set back can assist in their ability to help move the family forward and assist them in utilizing newly learned skills. Preparing ahead of time for setbacks can help SSCMs respond appropriately to them.

### **Engaging Non-Custodial Parents in Case Planning**

Engaging and assessing non-custodial parents in the case planning process is crucial. Research indicates a correlation between engagement with non-custodial parents and fewer subsequent allegations of child maltreatment, as well as faster achievement of permanency. Engagement of non-custodial parents can help with safety planning, improving the relationship between the child and the non-custodial parents and placement with the non-custodial parents and/or their kin. Engagement of non-custodial parents is more than contacting the parents and inquiring about whether they have any interest in being involved with the child. It requires trying to understand their situation and why they may feel the way they do. It is important to be aware of certain dynamics that may come into play in this process. For example, if the non-custodial parent appears disinterested, it could be something other than a lack of interest. The parent's behavior may be in response to previous negative experiences he/she has had with the custodial parent, preconceived notions about how he/she is perceived by others regarding the status of his/her parental involvement, or the parent may be reluctant because of his/her views about the child welfare system.

Contacts with the non-custodial parents should be used to educate them on the case planning process and explore with them what their role might be. It is important to show empathy toward the non-custodial parent's situation and interest in the non-custodial parent as a potential resource. Discussions with the custodial parents surrounding the involvement of the non-custodial parents need to occur during the development of the case plan.

### **Case Planning with Incarcerated Parents**

Case Planning with incarcerated parents may pose some challenges due to the complexities of navigating the criminal justice system. This includes but, is not limited to; locating a parent who is incarcerated, once located, ensuring fluid and consistent communication with the parent, the amount of services that can be provided, facility rules that may prohibit or limit

service provision to the parent, etc.

Despite these challenges, unless a court order mandates otherwise, the SSCM shall engage incarcerated parents in case planning for their children and encourage their participation in case planning activities. This includes:

1. Working in collaboration with the court to ensure the parent is transported to court or can participate virtually when transportation is unavailable or not possible;
2. Facilitating the parent's participation in case planning activities;
3. Collaborating with the parent's assigned case manager or facility staff to assess the parent's needs;
4. Build consensus with the parent and assisting in the facilitation of appropriate services upon the parent's re-entry into the community;
5. Identification of appropriate services that may be available in the correctional setting; and
6. Ensuring the parent has a signed copy of the case plan

Because timing can be a factor with incarcerated parents when determining permanency, the parent's unique situation should be discussed with him/her to come up with a collaborative plan to ensure they can maintain their parental rights when safety is not a factor. Prior to pursuing TPR or non-reunification (for the selection of guardianship) for the children of an incarcerated parent, the SSCM has to provide evidence to the court that the parents were provided with the opportunity to be involved in the permanency planning and have made reasonable efforts to support the parents in completing their case plan. When this is not possible, the Division has an obligation to inform the parent of its decision to move forward with an alternative plan to ensure safety and permanency of the child.

## **FORMS AND TOOLS**

Authorization for Release of Information

Authorization for Release of Information - Spanish

Birth Family Background Information of Child

Case Plan Addendum

Legal Services Request/Report

Notification to Foster Parent(s) of Filing of Petition to Terminate Parental Rights

Notification to Foster Parent(s) of Filing of Petition to Terminate Parental Rights - Instructions

Permanency Timeline

Rights & Responsibilities of Youth in Foster Care