



POLICY TITLE:	Permanency Practice		
 	CHILD AND FAMILY SERVICES AGENCY		
Approved By:	Date Approved:	Original Effective Date:	Last Revision:
Brenda Donald - Director	5/19/2020	May 25, 2011	April 29, 2020

I. AUTHORITY	The Director of the Child and Family Services Agency (CFSA or Agency) adopts this policy to be consistent with the Agency’s mission, and applicable federal and District of Columbia laws and regulations, including the provisions of Titles 4 and 16 of the D.C. Code, and the Exit and Sustainability Plan (ESP) in <i>LaShawn A. v. Bowser</i> . This policy supersedes the Permanency Planning policy dated May 25, 2011.
II. APPLICABILITY	This policy applies to all CFSA employees, contracted child placing agencies, and children and families served by CFSA.
III. RATIONALE	Clinical research has established the importance of safe, stable and nurturing environments for maintaining a child’s physical, emotional, psychological, and developmental well-being. In child welfare, ensuring that these family environments are lifelong – committed, continuous, with a future together – is called “permanency.” CFSA strives to achieve and/or maintain permanency for all children served, as quickly as possible, consistent with federal guidelines. This involves either supporting a child and family at home, or if the child is removed, through reunification with the caregiver from whom they were removed, or through adoption or guardianship. By engaging kin as the first option for out-of-home care; by ensuring that time in out-of-home care is short; or by securing alternative, lifelong resources if reunification cannot be achieved, permanency is a priority and responsibility of CFSA, and all of its staff and partners.
IV. POLICY	<p>It is CFSA’s policy to provide permanency-focused, child- and family-centered, culturally- responsive, community-connected, and strengths-based supports and services to all families involved with the Agency within alignment of CFSA’s Practice Model. Permanency broadly encompasses maintaining children safely in their home as well as focusing on achieving permanency through reunification, adoption, and guardianship. Permanency-focused supports and services vary based on how a child enters, and moves through, the system as described below.</p> <p>Front yard. If a family comes to the attention of CFSA due to an allegation of abuse and/or neglect and after a Child Protective Services (CPS) investigation is completed, the worker determines there is no substantiated finding of abuse or neglect, but there are issues of concern, CFSA shall refer these families to partner organizations in the community that will work to facilitate and maintain permanency for the child through stabilization of the family and resolution of the issues of concern.</p>

	<p>Front door. If a family comes to the attention of CFSA due to an allegation of abuse and/or neglect and after a CPS investigation results in a substantiated finding of abuse or neglect, resulting in the determination that the child(ren) can be maintained safely in the home with supportive services, the CFSA In-Home administration shall work to ensure permanency for the child through stabilization of the family and resolution of the issues of concern. CFSA shall engage the family around this goal while strengthening the family’s circle of informal and formal support. <i>(See the In-Home Services Policy and accompanying business processes for more information on In-Home Services. and the for more information.)</i> If there is a substantiated finding of abuse or neglect, and it is determined that the child(ren) cannot remain safely in the home, then CFSA shall remove and place the child into foster care, with the objective of securing kin as the first-choice placement resource.</p> <p>Temporary Safe Haven. When a child is placed in out-of-home care, CFSA shall provide on-going, permanency-focused supports and services to the child, birth and resource families until such time as the child exits the system. CFSA’s first objective is to reunify the child with the birth parents or caregiver from whom the child was removed. If reunification is not a viable option, CFSA will pursue a clinically appropriate alternative permanency option such as adoption or guardianship, with kin or the current resource parent, or initiate specific child recruitment if an adoptive resource was not established at the time of goal change. <i>(See the Placement and Matching policy for more information.)</i></p> <p>Under all circumstances, CFSA shall support families in achieving permanency consistent with federally recommended guidelines.</p> <p>In alignment with this policy establishes the critical elements of permanency practice that apply to all stages of child welfare system involvement, as well as those that apply at each particular stage.</p>
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<p>VI. ATTACHMENTS</p>	<p>Definitions</p>
<p>VII. SECTIONS</p>	<p>Section A: General Processes for Achieving Permanency Permanency Practice is always tailored to meet the child and family’s specified permanency goal (see Sections A1 and A2) and needs. All direct service staff, regardless of where they work in the Agency, have an important role to play in helping children to achieve permanency. Family support workers (FSWs), nurse care managers (NCM), education specialists, investigators, social workers, and private agency staff all must be permanency focused when they interact with children and families on a daily basis. Whether children are able to remain safely in their own home, or out-of-home care is necessary, CFSA’s Practice Model requires that all permanency efforts emphasize family engagement, teaming, comprehensive case planning and routine use of data (see Sections A3 - A5). Permanency practice also requires routine use of data and documents available for completing and tracking key milestones for permanency to occur expeditiously (see Section A6). Finally, CFSA’s organizational structure and chain of command is closely tied to effective permanency practice (see Section A7).</p>

1. **Permanency Goals.** The permanency goals are as follows, and are generally pursued in this sequence:
 - a. **Family stabilization:** The In-Home Administration works with families in their homes to resolve issues of concern, and stabilize, support, and strengthen these families so that the child(ren) can remain safely in the home. (See the [In-Home Services policy](#) for more information.)
 - b. **Reunification:** The Permanency Administration, the Office of Youth Empowerment (OYE) and private providers under the contract with CFSA, work with the birth parent or caregiver from whom the child was removed, and their supports, to ameliorate conditions of neglect such that the child can safely return home. CFSA strives to meet the federally recommended guideline that reunification should be achieved within 12 months of removal.
 - c. **Adoption:** If safe reunification is not a viable option, the Permanency Administration, OYE, and private providers shall pursue adoption for the child with kin or the current resource provider based on whomever is most clinically appropriate, and if neither is an option, by recruiting a new adoptive resource. CFSA strives to meet the federally recommended guideline that adoption should be achieved within 24 months of removal.
 - d. **Guardianship:** If neither reunification nor adoption is a viable option, the Permanency Administration, OYE, and private providers shall pursue guardianship for the child with willing kin or, under certain circumstances, a non-kin resource. Guardianship may be pursued in lieu of adoption if, for example, a youth older than 14 years of age prefers a guardianship arrangement or kin has a strong preference for guardianship. Except in special circumstances, CFSA will not pursue a goal of guardianship for children younger than age 14, unless there are no other options available or there are other mitigating circumstances. CFSA strives to meet the federally recommended guideline that guardianship should be achieved within 18 months of removal.
 - e. **Legal custody:** Supporting legal custody to an individual who has demonstrated a commitment to assuming long-term responsibility for a child is pursued as a permanency goal only under rare and specific circumstances. These may include, for example, when the individual is unable to meet non-safety licensing requirements; does not want financial support from the Agency; is the non-offending parent without pre-existing legal custody; or is the parent and does not have custody based solely on a permanent disability. Under all circumstances, a permanency goal of legal custody must be approved by the Deputy Director for Program Operations.

f. **Alternative Planned Permanent Living Arrangement (APPLA):** If none of the above permanency options is viable, and a child is age 16 or older, the Agency, after holding a “Listening to Youth and Families as Experts” (LYFE) conference with the youth and with the approval of the Agency Director, will recommend establishing a goal of APPLA. The social worker shall work actively with youth with to build lifelong connections, re-engage family, and achieve a successful transition to adulthood by setting and accomplishing goals across a series of critical domains, such as housing, education, employment, and physical and mental health. A youth’s APPLA goal is to be reviewed every six months to determine if it is still the most appropriate goal for that youth. *(See the [APPLA policy](#) for more information.)*

2. **Case Review.** In-depth case review is on-going through supervision between social workers and supervisors (SSWs), SSWs and program managers (PMs) and PMs and program administrators (PAs).

- a. All of a social worker’s cases shall be reviewed at least monthly with his or her supervisory social worker; SSW-to-PM and PM-to-PA case review are undertaken as needed.
- b. The Permanency Tracker is a critical resource for supervisory practice at all levels, supporting real-time review and decision-making on priority action steps and on general caseload management. In addition to routine supervision, dedicated case review takes place through the Permanency Goal Review Meeting (PGRM).
- c. The PGRM convenes a multi-disciplinary team, to include the Office of Attorney General (OAG), PEER and Kinship Unit managers, as well as other program area representatives relevant to the case. The meetings are minimally held on all cases as they approach or exceed their federally recommended permanency timeline: at 9 and 15 months for reunification case; at 15 and 21 months for Guardianship cases, and at 21 and 27 months for adoption cases. PGRMs outside of these timeframes are scheduled as needed.

3. **Goal Changes.** If the child’s established permanency goal is determined not to be viable, CFSA works in partnership with the Office of the Attorney General (OAG) to pursue a goal change. This is a multi-faceted process undertaken through close collaboration between the assigned social worker, the clinical team, the family, parents’ attorneys, Guardian ad Litem (GAL) and the assigned Assistant Attorney General (AAG). While CFSA provides recommendations for permanency goals, the Family Court retains the legal authority to formally establish the permanency goal. *[See the [Permanency Goal Change business process](#) for more information.]*

4. **Engagement.** Permanency cannot be achieved without active, productive engagement of the children and families involved. Engagement is achieved through the following steps:

- a. Building relationships that are characterized by respect, empathy and equity.

	<ul style="list-style-type: none"> b. Providing the birth parent with information on how to navigate the child welfare system, the court process, and what to expect. (See the Information & Resource Guide for Birth Parents for more information.) c. Recognizing the impact of trauma, while focusing on strengths and being culturally responsive. d. Including families' voices and choices in all decision making, while supporting shared parenting, as appropriate. All social workers and supervisory staff should actively take steps to encourage respectful, nonjudgmental, and supportive relationships between resource parents and birth parents. e. Clearly and repeatedly communicating the expected, actionable steps to permanency by multiple means (e.g., in-person meetings, e-mails, telephone calls and messages) and in a manner that attempts to mitigate any barriers to understanding (e.g., language barriers, mental illness, intellectual disability), when necessary. f. Ensuring that staff have the training and supervisory support they need to fully engage with families in the above ways, and that they are required to do so through regular supervision and performance indicators. <p>5. <u>Teaming</u>. Teaming is instrumental to achieving timely permanency. At CFSA, teaming occurs both formally and informally. A Removal RED team meeting (agency-focused to support a seamless case transfer from CPS to the ongoing worker) or a Family Team Meeting (FTM) (family-focused and family-driven) are examples of formal team meetings. (See the FTM policy for more information.) A discussion between a social worker, birth and resource parent outside of a parent-child visit is an example of an informal team meeting. The assigned social worker has primary responsibility for building and supporting working relationships with team members while leading team formation, function and coordination. Whether formal or informal, effective teaming is achieved through:</p> <ul style="list-style-type: none"> a. Bringing together, in strategic combinations, the family and children, CFSA staff, internal and external service providers, the family's informal supporters, and the child's current caregivers and their legal representatives (i.e., GAL and parents' attorneys). b. Sharing information, plans, and action commitments with the team. c. Openly navigating disagreements and conflicts to build the consensus, collaboration, and coordination needed to move families to permanency. This includes ongoing clinical support for the shared parenting relationship between birth and resource parents. If a consensus cannot be achieved among the team after taking into account all perspectives, the social worker, as a leader of the team, shall make the decision, with support of management, that will advance the permanency goal. The social worker must provide the rationale to the team for the decision.
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6. **Comprehensive Case Planning.** The case plan is a written document, reviewed and updated at least every six (6) months, with parental input and signature. It is the blueprint for achieving permanency. As such, it guides all activity during every stage of a family's involvement with the child welfare system. *[See the Case Planning business process for more information.]*
- a. **Objectives.** All case plans have these overarching objectives:
- i. To maximize the family's voice.
 - ii. To describe the family's strengths and needs, directly aligned with the reasons they came to the attention of the child welfare system and factors keeping the case open.
 - iii. To chart an achievable path to timely permanence, including identifying concurrent plans, and the timeframes within which all plans will be activated.
 - iv. To specify plans for the mobilization of community supports, resources, and evidenced-based interventions that will help a family resolve their needs and achieve and maintain stable functioning and well-being.
 - v. To establish and monitor specific timeframes, roles, responsibilities and consequences for the family's engagement with identified, behaviorally based interventions, as well as the required results.
- b. **The role of [assessments](#).** When a family becomes involved with CFSA, either through in-home services or out-of-home care, a sequence of assessments, including formal assessments of the child (i.e., the Child Adolescent Functional Assessment Scale [CAFAS] or the Preschool Early Childhood Functional Assessment [PECFAS]) and the parents i.e., the Caregiver Strengths and Barriers Assessment [CSBA], for the Family Case Plan only) shall be completed. In addition, social workers conduct and document informal assessments of children and family members at every contact, including visits, phone conversations, meetings etc. All assessments help a family, and the team, recognize strengths, prioritize challenges, and shape the goals and strategies articulated in the case plan.
- c. **Concurrent planning.** In child welfare practice, "concurrent planning" refers to the active consideration of, and planning for, different permanency arrangements simultaneously (such as reunification and guardianship). Concurrent planning ensures multiple plans are in place in case the first plan does not work out so that children can achieve permanency timely, and not linger in foster care. Where clinically appropriate, concurrent planning with families begins immediately following removal of a child and the opening of an out-of-home case. Social workers thoroughly present and discuss the concept of concurrent planning with parents and the family team, including the recommend federal permanency guidelines driving the need to potentially move from the primary plan to a concurrent one. *[See the Case Planning business process for more information on concurrent planning.]*

7. Routine Use of Data and Documentation.

- a. Routine use of data. A vital element in achieving permanency is the effective tracking of information and use of data for decision-making and Continuous Quality Improvement (CQI). Examples of permanency progress measures in use by the clinical team include but are not limited to: the length of time in foster care; the length of time from removal to goal change; the number of parent-child visits held; and the number of placement changes. Data on these and many other measures are collected in FACES.NET and the Permanency Tracker and are made available to frontline staff and managers through FACES.NET Management Reports, the agency's selected data visualization tool, and the Permanency Tracker dashboards.
- b. Documentation. CFSA uses the Purpose, Content, Assessment and Plan (PCAP) approach to case note documentation. Key documentation of critical information facilitates permanency. (See [The Practice Guidance on PCAP documentation.](#))

8. Permanency Roles Through the Chain of Command. CFSA's and private agency's daily permanency work is undertaken by licensed social workers and other support staff who report up through a defined chain of command. At each level, staff play specified roles in supporting strong permanency practice and in meeting CFSA's permanency timeframes and objectives. Staff listed below use the data input and reporting resources described in subsection 6(a) above:

- a. **Social Workers (SWs).** The daily work of social workers is to help ensure the safety and well-being of children and families, and move cases to permanency, as expeditiously as possible. To accomplish this, social workers meet frequently with children, families, and everyone in the support system, to develop and support implementation of strategies for resolving barriers to achieving case goals. Social workers collaborate with the family and clinical team about challenges, consult with supervisors routinely, and with others in the chain of command or through a PRGM, as needed.
- b. **Supervisory Social Workers (SSWs).** SSWs work daily with individual front-line staff, and provide regularly scheduled supervision and as needed consultation, to: support productive engagement with the children and families on the caseload; troubleshoot challenges in achieving case goals; and ensure timely resolution of permanency barriers or movement to alternative permanency plans.
- c. **Program Managers (PMs).** PMs regularly supervise SSWs to: ensure productive working relationships with frontline staff; troubleshoot case permanency barriers SSWs are unable to resolve; and identify, monitor and resolve barriers to timely permanency at the caseload and unit levels.
- d. **Program Administrators (PAs).** PAs supervise PMs regularly to: ensure their productive working relationships with SSWs; and identify, monitor and resolve barriers to timely permanency at the unit, administration and systemic levels.

Section B: Permanency Practice at Each Stage of Child Welfare System Involvement

As described in the policy section above, children come to the attention of, enter, and move through the child welfare system in different ways. At each juncture, CFSA's principal focus is to assure safety, facilitate well-being and to support the family and child to maintain or achieve permanency. This section provides an overview of the primary tasks and requirements at the different junctures.

1. Permanency Practice During the Investigative Period: When CFSA has received, and is investigating, an allegation of child abuse or neglect, there are a series of practice steps undertaken, each of which should be focused on securing permanency as well as the safety for the child and family.
 - a. **At the Hotline.** Hotline workers follow an interviewing protocol that includes seeking (and documenting in FACES.NET) information about kin who can be called upon to support permanency for an in-home or out-of-home case. (See the [Hotline Policy](#) for more information.)
 - b. **Pre-removal efforts.** As an investigation is underway, [identifying, searching for, and involving kin](#) (to include the non-offending parent), early alert team meetings, and At-Risk FTMs are strategies used to identify and engage kin (See the [Kin Brochure](#)) and other possible permanency options, in order to either prevent a removal or to effectuate a non-emergency removal. (See the [Safety Plans](#) policy for more information)
 - c. **CPS practice.** During investigations, CPS social workers shall pursue strategies for positive engagement with the family and facilitate discussions about concurrent or [contingency planning](#). To expedite the path to permanency, CPS social workers are expected to forge strong working relationships between the family and the agency from the earliest contact.
 - d. **Case transfer.** The CPS-to-In-Home Services and Removal Red Team case transfer processes shall be focused on strategies and next steps aimed at identifying and supporting protective factors that either decrease the risk of entering foster care or reduce time in care if removal becomes necessary. (See the [In-Home Services policy](#) for more information.)
2. Permanency Practice for In-Home Cases. In-home practice is focused on identifying and supporting interventions that will enable a child to remain safely in the home.
 - a. **Case planning.** The in-home social worker shall convene a team meeting with the family members, family supports, and appropriate service providers within 30 days of the case opening to create a behaviorally based case plan that identifies service needs and develops action steps and interventions. The service plan is updated with the family every 90 days.

- b. **Levels of care.** The intensity, extent, and duration of permanency-focused case management services for in-home cases is determined by the assessment of the family and the level of care that the family has been assigned. The in-home social worker in consultation with their supervisor shall determine the level of care for each family, based on clinical factors and family need, within 30 days of case assignment. During the assessment period, weekly visits between a worker and the family are conducted. (See the [In Home](#) policy and accompanying documents for more information.)
- c. **Concurrent Kin Planning.** A concurrent kin plan (CKP) is to be developed within the first 30 days of the in-home case in conjunction with the completion of the initial case plan. The CKP will be updated every 90 days in conjunction with the service plans.
 - i. The CKP is completed per family and is to specifically document if there are different caretakers for different children.
 - ii. The CKP is to be documented in a FACES.NET contact note within the in-home case, selecting the purpose as Concurrent Kin Plan.

Note: If unable to develop CKP with family, document the FACES note as attempted. If the family has no or limited supports, strengthening the support system is to be included in the case and sustainability plan.

- 3. **Permanency Practice and Placement of Children in Out-of-Home Care.** If a child requires placement in out-of-home care, permanency is a key factor that shall drive decision-making.
 - a. **Assessment of the child/youth.** When children and youth enter out-of-home care, they should be brought to the Healthy Horizons Assessment Center (HHAC) for a medical screening prior to placement (to include physical, dental, mental/behavior, and developmental health care, unless indicated as not necessary. It is important that healthcare assessments occur upon entry into out-of-home care in order for the agency to identify the child's immediate healthcare needs and to gather information that can assist in identifying the most appropriate placement setting. (See the *Initial Evaluation of Children's Health* policy for more information.) Additional assessments shall take place including formal assessments of the child (CAFAS, PECFAS) and the parents (CSBA). (See *Procedure A(6)(b)* above for more information on informal assessments.)
 - b. **Placement priorities and matching.** In an effort to keep families together and expedite the permanency process, placement with kin is the first placement priority, with expedited, temporary licenses available in the District and Maryland for this purpose. If kin are not an option, a thoughtful match between child and a non-kin resource parent is critical to maintaining placement stability, which also is a primary factor in timely permanency. CFSA uses a

	<p>specified placement matching process to achieve these goals. See the Placement and Matching Policy for more information.</p>
	<p>c. Resource parent support: Because placement stability is a key determinant of permanency, intensive support for resource parents aimed at maintaining stability is critical. CFSA pursues several strategies for supporting resource parents (whether kin or non-kin). These include but are not limited to: regular contact between resource parents and designated resource parent support workers; providing clear expectations of the resource parent’s responsibilities and guidance on developing and maintaining shared parenting relationships; crisis intervention services; peer-to-peer support; family development plans and training aimed at increasing skills and competence in identified areas; and connection to the Ombuds office. (See the Placement and Matching Policy for more information.)</p> <p>4. <u>Trauma-Informed Transition Planning.</u> While changing placements to move towards permanency is a positive and necessary step, the transition of moving from one home to another must be thoughtfully planned to reduce potential trauma to the child. Information and support shall be provided to the resource parent, birth parent and child during the transition period.</p> <p>5. <u>Permanency Practice from Placement through Exit.</u> Following the placement of a child in foster care, CFSA and its contracted providers engage the family in a series of interventions aimed at achieving permanency through safe reunification. If reunification is not an option, CFSA pursues alternative permanency goals as established in the concurrent plan. Each stage of the process is described briefly below, with additional detail in the associated business processes.</p> <p>d. Reunification. Reunification practice is aimed at supporting parents or caregivers in ameliorating conditions of abuse and/or neglect; and ensuring stability for that child while he or she is in out-of-home care. Reunification practice relies on effective engagement and teaming with the birth family (see Sections A2 and A3); is guided by the case plan (see Section A4); and incorporates a series of strategies and interventions, including, but not limited to:</p> <ul style="list-style-type: none"> i. A Removal FTM and subsequent FTMs as needed; ii. A 1:1 orientation by, and potential on-going engagement with, the CFSA PEER (Parent, Engagement, Education and Resource) Support Unit; iii. Development of a visitation plan with regular, scheduled visits and case contacts (parent-to-child, social worker-to-parent, social worker-to-child, sibling-to-sibling). (See the Visitation policy for more information); iv. Engagement with the professional and community-based network needed to support parents in resolving the reasons for their children’s removal;

	<ul style="list-style-type: none"> v. Shared parenting with the resource family, including Icebreaker meetings; vi. A transition to unsupervised visitation;
	<ul style="list-style-type: none"> vii. A court-ordered period of oversight called “Protective Supervision”; viii. Support to resource parents and children to address grief and loss when reunification occurs; and ix. Various services to children and youth in care; including but not limited to therapy, daycare, tutoring, mentoring and respite. <p>e. Ta.L. Evidentiary Hearings Requirements. When transitioning from reunification to another permanency goal, a 2017 appellate court ruling (In re Ta.L.), requires that parents have the opportunity for an evidentiary hearing on the matter, called a Ta.L. Evidentiary Hearing. At the hearing, the Court assesses, using evidence, whether the case plan the Agency developed is reasonable, whether the Agency made reasonable efforts to achieve the plan for each parent, and whether each parent made adequate progress to achieve the tasks set out in the case plan.</p> <p>f. Adoption. Adoption practice is aimed at supporting the relationship between children and their adoptive resource and securing the Family Court’s approval and finalization of the adoptive arrangement. This includes, but is not limited to:</p> <ul style="list-style-type: none"> i. Pursuing kinship adoption resources; ii. Launching child-specific recruitment if there is no identified adoptive resource; iii. Adequately preparing a child or youth to transition to an adoptive home. iv. Adequately preparing the adoptive caregiver to meet the immediate and long-term needs of the child

	<ul style="list-style-type: none"> v. Supporting the pre-adoptive resource to secure an attorney and file an adoption petition in a timely manner; vi. Serving birth parents with notice of the agency's intent to pursue adoption and either securing their consent, or a waiver or termination of their parental rights; vii. Updating the home study and all clearances; viii. Negotiating a subsidy agreement (see the Adoption Subsidy and Guardianship Subsidy policies for more information); ix. Managing competing adoption petitions; x. Obtaining Interstate Compact on the Placement of Children (ICPC) clearances if the adoptive resource lives outside the District of Columbia; xi. Completing and submitting all required court reports; xii. Aiding children and their birth families in maintaining connections, when appropriate; and xiii. Providing pre-and-post adoption support for the adoptive family through available CFSA and community resources (see item 6 below for more information.)
	<p>d. Guardianship. Like adoption practice, guardianship practice is aimed at supporting the relationship between a child and the prospective guardian and securing the Family Court's approval and finalization of the guardianship arrangement. This includes, but is not limited to:</p> <ul style="list-style-type: none"> i. Pursuing kin (actual and fictive) if there is no identified guardianship resource; ii. Supporting the potential guardian to obtain party status, secure an attorney and file a guardianship motion in a timely manner; iii. Adequately preparing a child or youth to transition to guardianship. iv. Adequately preparing the guardianship caregiver to meet the immediate and long-term needs of the child v. Updating the home study and all clearances; vi. Negotiating a subsidy agreement; vii. Obtaining ICPC clearances if the prospective guardian lives outside the District of Columbia; viii. Completing and submitting all required court reports; and ix. Aiding children and their birth families in maintaining connections, when appropriate. x. Providing pre- and post-guardianship supports to the child and family <p>e. Youth with a Goal of APPLA. OYE and private providers work actively with older youth who may remain in CFSA's care until they reach age 21. The objectives of these efforts include, but are not</p>

	<p>limited to: developing and tracking youth transition plans; building lifelong connections, including with birth families, if applicable; building personal networks; achieving educational and vocational goals; developing independent living skills; and obtaining employment success and financial independence. OYE also implements the Youth Villages Life Set (YVLifeSet) program, which aims to empower youth in reaching their independent living goals.</p> <p>f. Legal Custody. When legal custody is granted by the Court to an individual who is not the child's parent, the child's parents retain residual parental rights and the right to make major decisions affecting their child. An order of legal custody entitles the custodian to determine where and with whom the child lives. The legal custodian is responsible for providing the child with day-to-day care, (food, clothing, shelter, education and routine medical care). The parents remain obligated to provide financial support for the child even when the child is in the legal custody of another person or institution</p>
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	<p>g. Well-Being Support. Following the placement of a child in foster care, and while any or all of the above work is underway, CFSA provides or refers children and families with an array of well-being supports that also support expediting and maintaining permanency. These include, but are not limited to: medical and behavioral health, helping children and youth manage transitions; addressing the effects of trauma exposure; and improving their overall functioning and stability at home and in school.</p> <p>7. <u>Permanency Practice After Exit.</u> When a child exits the child welfare system (whether through reunification, legal custody, a finalized adoption or guardianship or, for a youth with a goal of APPLA, upon turning 21), CFSA provides support to help sustain safety, permanency and well-being.</p> <p>a. Post Permanency. CFSA's Post-Permanency Unit works with families that have achieved permanency with a former CFSA ward child (either through adoption or guardianship) and no longer have an open case or assigned social worker. Among an array of services and supports, the Post Permanency Unit is responsible for assisting families with the replacement of children when the adoptive parents or guardians pass away, are unable to care for the child or youth or when placements disrupt; providing direct support to families who require assistance in managing adjustment or behavior issues in order to prevent disruptions; and connecting families with interpersonal resources and supports.</p> <ul style="list-style-type: none">• Additionally, under CFSA's Family First program, the development of a prevention plan in FACES.net may assist in preventing re-entry into care. If a child or family is in need of continued support after case closure, a referral for community services through a Collaborative or an Evidence Based Program (EBP) can be completed. The goal is to maintain family cohesiveness and family well-being. <p>b. After Care. The CFSA Office of Youth Empowerment provides support services to former foster youth (up to age 23, including but not limited to the YVLifeset program) aimed at increasing stability and building adult competencies. These services include consultation and assistance with housing, employment, finances, physical health and behavioral health, community connections, parenting and other areas of need.</p>
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Definitions

1. **Adoption:** Adoption is a social and legal process in which the Family Court establishes a new legal relationship of parent and child and the biological parents' rights are terminated. A financial subsidy may or may not be involved.
2. **Adoption and Safe Families Act (ASFA):** Federal legislation enacted to promote the adoption of children in foster care, including increasing accountability of child welfare agencies for promoting adoption and reducing the amount of time a child remains in foster care
3. **Alternative Planned Permanent Living Arrangement (APPLA):** A phrase coined by Congress during the writing of the Adoption and Safe Families Act (ASFA) and based on a federal concern for youth who were languishing indefinitely in the foster care system. APPLA is only a viable permanency option if CFSA documents compelling reasons why it would not be in the interests of the youth to reunify with caregivers, be adopted, or have a legal guardian.
4. **Assigned Social Worker:** CFSA social worker or social worker employed by a private agency under contract who is primarily responsible for providing case management service to a family or child.
5. **Case Plan:** A Case Plan is a record of the goals or objectives in the lives of children, youth, and their families or caregivers in the child welfare system. The Case Plan records all the important decisions and tasks that are necessary to achieve the goals and objectives agreed on by all parties. The Case Plan is completed in FACES.NET using established content modules. The case plan should be developed with the family and signed by the parent/family and social worker with a copy placed in the case file.
6. **Concurrent Planning:** Concurrent planning involves considering all reasonable options for permanency at the earliest possible point following a child's entry into foster care and simultaneously, rather than sequentially, pursuing those options in order to quickly move children from the uncertainty of foster care to the security of a safe and stable permanent family.
7. **Concurrent Kin Plan:** A concurrent kin plan (CKP) is a plan developed with the family and the in-home social worker that designates other capable adults to provide care to children if the parent is unable to do so, due to an unforeseen family emergency or a child welfare/protection issue leading to a removal.
8. **Concurrent Kin Planning:** A process of working toward family stability with in-home families while at the same time establishing an alternative or contingency back-up plan for children's care/placement in the event of a family emergency or removal due to ongoing child neglect and abuse. A Concurrent Kin Plan is developed which is the documentation of the back-up plan.
9. **Contingency Planning:** The process of identifying and engaging family supports agency-wide from the beginning and throughout the life of the family's involvement with the Agency. Information gathered is to include how the kin has or can be of support to the family in meeting case plan goals, or as a kinship provider in the event that a removal occurs.
10. **Data Visualization Tool:** A system that utilizes FACES.NET data to provide real-time dashboards on key case progress metrics such as case plan updates, court reports and visitation. Social workers and their supervisors use this tool on a regular basis to track and monitor efforts against required completion timeframes.
11. **Early Alert Team Meetings:** A meeting held to create a placement plan for families in the likelihood of a removal, with the goal of kin as the first placement option. Joint coordination occurs to minimize trauma and maximize successful placement matching. This meeting should discuss any potential barriers for kinship licensure and any proposed waiver activities for the Director's approval that would allow relatives to safely care for children and maintain important family connections. Efforts should examine foster care licensing requirements, supports, and services for kin, and approaches to complex family dynamics that affect kin and their ability to care for children.\

12. **Evidence Based Program (EBP):** A services process in which well-researched interventions, clinical experience, ethics, and client preferences and culture are combined to guide and inform the delivery of treatments and services.
13. **Family Case Plan:** While a child's permanency goal is reunification, the objectives, plans and interventions for all family members comprise the Family Case Plan.
14. **Family First Prevention Services Act** - This law allows for federal funding for preventive services for children and families who are potential candidates of foster care placements. The overall goal is to provide enhanced support to children and families and prevent foster care placements through the provision of mental health and substance abuse prevention and treatment services, in home-parent skill-based programs, and kinship navigator services.
15. **Family Team Meeting (FTM):** Scheduled meeting to engage families, members of the family support network including extended family members, fictive kin, and public and private agency partners, among others, in planning for the safety, care and placement of the child. Trained staff facilitate these meetings which take place, prior to a removal, at removal, and then whenever it is deemed important to moving forward with permanency.
16. **FACES.NET:** CFSA's Statewide Automated Child Welfare Information System (SACWIS), called FACES.NET, is the primary, shared database for case information. The management reports and analyses derived from FACES.NET are key sources for moving a case to permanency.
17. **Guardianship:** A social and legal process in which the Family Court establishes a new legal relationship between the guardian and child without terminating parental rights where the guardian has physical custody of the child and certain rights and responsibilities concerning the child remain with the parent.
18. **Interstate Compact on the Placement of Children (ICPC):** A statutory agreement between the states and the District of Columbia which permits states to cooperate in the placement of children across jurisdictional lines. Although not a state, the District of Columbia holds the same state-responsibilities as any other state that is a party to ICPC. As a result, the District and its employees are responsible for full compliance with its terms. All children placed in foster care or for adoption in another jurisdiction must be processed through CFSA's Office of the Compact Administrator.
19. **Kin:** An individual who is at least 21 years of age; and either (1) A relative of the foster child by blood, marriage, or adoption; or (2) Identified by a relative of the foster child by blood, marriage, or adoption, in a sworn affidavit, to have close personal or emotional ties with the foster child or the foster child's family, which pre-dated the foster child's placement with the individual.
20. **Legal Custody:** a legal status created by Court order which grants a custodian the responsibility for the custody of a minor which includes- (1) physical custody and the determination of where and with whom the minor shall live; (2) the right and duty to protect, train, and discipline the minor; and (3) responsibility to provide the minor with food, shelter, education, and ordinary medical care. A Division order of "legal custody" is subordinate to the rights and responsibilities of the guardian of the person of the minor and any residual parental rights and responsibilities.
21. **Listening to Youth and Families as Experts (LYFE) Conference:** Youth Transition Planning Meeting assembled for the purpose of exploring permanency options.
22. **Ombudsman Office:** CFSA has established the Office of the Ombudsman to serve as CFSA's impartial liaison for constituents (i.e., children, youth, birth parents, foster parents, kinship caregivers, guardians, adoptive parents, mandated reporters, concerned citizens, contractors) who are seeking internal resolutions to issues, and to promote child safety and well-being. The Ombudsman reviews concerns and prepares recommendations and responses when necessary.
23. **1:1 Parent Engagement, Education and Resource (PEER) Orientation:** A PEER Unit specialist has a one-to-one orientation with the birth parents/caregivers whose children have entered foster care, ideally within 7 days of the child's removal. The Orientation is an opportunity for caregivers to

connect with CFSA staff members who have first-hand experience with the child welfare system; to learn critical information about CFSA and gain a better understanding of what will be happening in the coming weeks and months.

24. **Permanency:** A permanent living arrangement for a child. Also, the process by which a child/youth in CFSA foster care, and his/her family, benefit from case planning, periodic reviews, and other procedural safeguards and interventions to ensure that the child/youth enters out-of-home care only when necessary; is appropriately placed and maintains placement stability; and is returned home or to a permanent living situation in time frames aligned with the Federal Adoptions and Safe Families Act (AFSA) requirements.
25. **Permanency Goal:** Permanency goals include the three priority goals of reunification, adoption, or permanent guardianship. If reunification is not possible, kin shall be considered as the priority resource for adoption or guardianship, and non-kin only after kin resources have been exhausted. The permanency goal Alternative Planned Permanent Living Arrangement (APPLA) will be approved only after the other permanency goals have been explored in collaboration with the family team and have been deemed to be not in the best interests of the child. Legal Custody is the least desired goal. All permanency goals are legally established by the court based on the thoughtful recommendations of the family's team and social worker.
26. **Permanency Tracker:** The automated Permanency Tracker system is a shared database that aggregates key FACES-based permanency milestones with those that are not held in (or readily available through) FACES.NET, such as information regarding Ta.L. evidentiary hearings; progress toward guardianship; or the status of a subsidy negotiation. The Permanency Tracker is a supervisory support tool as well as a vehicle for CQI on timely permanency. Non-FACES data are entered into the Permanency Tracker at least monthly by a supervisor or designated staff.
27. **Placement:** General term used for a child's initial (or subsequent) out-of-home living arrangement that meets the specific needs of the child, either in a licensed kinship or foster home, or a licensed congregate care program (e.g., traditional group home, or if necessary, a residential treatment center to address medical or emotional needs). Pursuant to CFSA policy, placement is considered a temporary or short-term intervention during which social workers diligently team with the family to address barriers to reunification or to pursue adoption guardianship or legal custody). Whenever possible, placement decisions consider a child's established relationships with biological or fictive kin who may be willing and able to serve as caregivers. Most importantly, placement decisions are carefully tailored to the child's current functioning and behaviors; medical, educational, and developmental needs; past experiences; religion and culture; connection with the community; school; hobbies; and extracurricular interests. For purposes of the Interstate Compact on the Placement of Children (ICPC), "placement" means the act by a public or private child placing agency intended to arrange for the care or custody of a child in another state.
28. **Prevention Plan:** Once it appears that preventative community services are needed to prevent out-of-home placement, the Social Worker should assess the parent and child's (ren) needs to determine appropriate community resources as well as determine candidacy for Family First through the development of a Prevention Plan in FACES.net.
29. **Removal R.E.D. Meeting:** A type of R.E.D. Team led by CFSA that occurs within 24 hours of a child's or youth's removal and placement into foster care with agency and contract staff. Information about the child, youth, family and placement is exchanged and needs identified and planned for to provide a smooth transition of the child or youth into the foster care system.
30. **Removal FTM:** led by the FTM facilitator and usually held within 72-hours of a removal. The Removal FTM is used to: further introduce the family to the agency; clarify the reasons for removal; continue to engage and explore kin placement options; initiate discussion about visitation; and begin developing a plan for securing the resources and interventions that will support reunification. Removal FTMs include family members, their identified supporters (e.g. friends, clergy, and caregivers), resource parents, service providers, and the guardian ad litem (GAL).

31. **Residual Parental Rights:** Rights and responsibilities remaining with the parent after transfer of legal custody or guardianship of the person, including (but not limited to) the right of visitation, consent to adoption, and determination of religious affiliation and the responsibility for support.
32. **Reunification:** A positive permanency outcome for children, youth, and families in foster care, in which children/youth return to the birth parents or caregiver from whom they were removed.
33. **Shared Parenting:** When birth and resource parents are communicating and collaborating on the experiences and duties of raising a child.
34. **Youth Village LifeSet (YVLifeSet):** The YVLifeSet program is based on intensive supports to help youth transition from foster care to successful independence. The program is for youth ages 17-21 who demonstrate a positive willingness to commit. The goal is to have highly individualized services in the youth's natural environment, including the home, place of employment, and community. Programmatic services include assessments related to successful outcomes in vocation, education, parenting, transportation, community living, supports, and sexual health. The program assists youth with the identification and development of individual strengths with a goal to maximize outcomes and promote life-long self-sufficiency.