

Chapter 4 - Continuing Family Relationships

Those of you who became foster parents will be part of a team helping to reunite children and parents who have been separated typically because of the tragedies of abuse, neglect, maltreatment, or special medical circumstances. When reunification is not possible, you also may have a role in helping children transition to adoptive families.

As you saw in the video, some foster parents also help prepare older youths in care for young adult life in the community.

Those of you who become adoptive parents will be part of a team providing a continuing family relationship for children who cannot be reconnected with parents or relatives.

Permanence means having:

- A sense of one's past
- Legal or social status that comes from being part of a family
- Safe and nurturing relationship intended to last a lifetime

A child in foster care experiences parenting from at least 3 sources: their parents who gave birth to them, the agency/court that has legal custody of them and permanent custody if the parents' rights have been terminated. One of the most important parts of CPS is to make sure that the children are not torn between or among different parts of parenting. To the fullest extent possible

Types of Permanency

Family reunification - where the child is returned home after the parents/guardian completed services from CPS. Most of the children are reunified with families or relatives. Some possible reactions to reunification are happy but could also be fearful. A child also may show guilt about being removed from the foster family. Possible behaviors of children regarding reunification are: clinging, whining, anxiousness and acting out so they can test the parents.

Relative placement – a blood relative who is able to care for the children. CPS looks for these types of placement in and out of state.

Kinship placement – a person who is not a blood relative but knows the children such as a god child.

Adoption by a foster family – must be in the home 6 months before adoption can occur.

Adoption by a new family – the foster family is not interested in adoption of the child so other community approved adopted parents are chosen

Adoption is a serious and important step. It involves severing legal ties to one family.

Long term foster care -parents and relatives are not able/willing to care for the child so they remain in foster care until they are emancipated.

Independent living – the agency coordinates services to where a child learns independent living skills.

When children and parents are separated, the agency is responsible for making a plan to reunite them, or to connect the child with another family that intends to provide a lifetime relationship. In the video, you saw several examples of how the team worked together toward permanence for children in foster care. Permanence can mean several different things – family reunification, relative placement, adoption by foster family, adoption by another family, guardianship, long term foster care by plan, and preparation for independent living with foster family and community supports.

When children are separated from their parents and placed in foster care, a service plan is created to meet the service goals for the child and birth family. The goal should be selected based on a careful, culturally competent assessment of the strengths and needs of the child and family. This plan then should be fully supported so that the goal is reached.

Let's look again at some of the possible goals that can be selected.

Introduce ways the team can aid reunification.

Because the first permanency goal is reunification with parents, we feel that it is important to spend a few minutes now to identify ways the professional team can aid reunification. Be aware that these same techniques can be used to help children move to other placements, especially adoption placements.

Ask the participants to identify:

*What can the team do to aid reunification?

Acknowledge participants' ideas and cover the following points:

The Professional Team Can Aid Reunification by:

- Working collaboratively to achieve the goals of visiting.
- Understand how all the reactions the child, his or her parents, and foster parents may have to the reunification process, have the potential for disrupting a planned reunification if the team cannot see beyond the obvious behaviors contributing to the emotions.
- Talking with the child about his or her feelings related to reunification in a planned, supportive way.
- Working together on the child's Lifebook.
- Talking with the child about the positive experiences he or she may have enjoyed during placement in foster care, and helping to identify ways to repeat those experiences once her or she has been reunited with his or her family.

- Helping the child understand what, if any, future relationships and contact he or she can anticipate with the foster family.
- Agreeing, in advance, what role the foster parents will play after the child has been returned to his or her family.
- Discussing with the birth parents the stress which often accompanies the readjustment they are likely to experience when a child returns home, and encouraging parents to discuss their feelings with the case worker.
- Involving the parents in parenting the child.
- Helping the parents understand the child's behaviors and how to manage them.
- Talking with birth parents about the routines that foster families have established and seeing if they can be adapted to the birth family's home.
- Having a farewell ritual to let a child know that the transition is important, as shown in the video during the first session
- Letting a child know that the foster family and the case worker, too, may be sad that the child will be leaving the foster family, but happy that the child and family are being reunited.
- Providing services to the birth family after the child has returned home.

Family reunification results from our belief that permanence does not just happen, but rather it is something that requires a set of activities and tasks that are planned and assessed for progress on a regular basis.

How might a birth parents feel about having their legal rights to their children terminated?

How might the children feel?

How might a child feel during the reunification process? How might they behave?

How might the birth parents feel during reunification?

How might foster parents feel during reunification?

Stages of Disruption

Diminishing Pleasure	The honeymoon is wearing off. It is perceived that the child's negatives begin to outweigh the positive
Problems is the child	Child is viewed as the cause of all problems
Going Public	Speaking to family and friends about the problems which increase bad feelings
Turning Point	A situation or crisis that occurs that results in parent formulating ideals of ending the relationship
Ultimatum and Timeframe	Another situation or crisis occurs which results in the parent setting a timeframe for improvement and issues threats such as "if you do that one time"
Decision to Disrupt	Parents decide to end placement when the child does not meet their set time frame or does not meet their expectations.

Introduce the discussion of the term "unplanned changes."

In the video, we saw examples of children successfully achieving permanence through teamwork. Vernon was adopted by another family, Nathan was reunited with his father, a medically fragile infant was adopted by his foster family, and a young adult was prepared to live independently by Ann Kowalski's family.

Unfortunately, sometimes children and youths leave foster or adoptive families under unusual circumstances, and advance planning just isn't possible.

Ask the participants to identify:

*what are the reasons why children or youths leave foster or adoptive families without a plan, or advance planning?

Acknowledge the group's ideas and make sure to cover the following information:

Children or Youths Sometimes Leave Foster Families Because:

- They decide to run away
- There is a court order
- There is abuse of the child in the foster family
- There is a need for the child's immediate psychiatric hospitalization
- There is illness or some other emergency in the foster family
- The foster family requests that the child be moved immediately because of the child's behavior

Children or Youth Sometimes leave Adoptive Placement Prior to Consummation Because:

- Children run away
- There is abuse of the child in the placement
- Adoptive family request the child be moved immediately because of child's behavior
- There is a need for the child's immediate psychiatric hospitalization

Is there a stage at which there is no turning back?

When an adoption has consummated and it does not work out we refer to this as a Dissolution.

Introduce the discussion of teamwork in preventing and managing unplanned changes (disruptions).

Certainly there can be illnesses, emergencies, and unusual circumstances that are unavoidable. But, there also can be ways that both foster families and adoptive families can work as part of a team to prevent unplanned changes. These unplanned changes are referred to as disruptions.

Ask the participants to identify:

What are some of the ways that foster parents, and the agency could work together to prevent and manage unplanned changes and placement disruptions?

Foster Families, and the Agency can Prevent Unplanned Changes Disruption by:

- Making an informed decision about working together.
- Making an informed decision about placing and accepting a child into a family.
- Being realistic and honest about expectations of children, themselves, and each other.
- Informing each other when there are unmet expectations.
- Providing immediate support when problems are identified, no matter how small.

- Assessing and planning for the ongoing relationship between the child and family.
- Planning for how to support the child in transition.
- Planning for how to inform and involve the birth family appropriately.
- Planning for the ongoing working relationship between the agency and the foster family or the adoptive family.

Conclude the discussion on unplanned changes by asking for, and responding to, participants' questions.

Are there any questions regarding unplanned changes?

Challenges of Teamwork

Child protective services team consist of the family, the child, the case manager, the guardian ad litem, CASA worker, education and medical representatives. All of these people must work together to help the permanency goal for the child.

Teamwork is definitely challenging, yet there are some guidelines to help the team achieve this goal. Team members need to share the same values and respect each other. When team members value the child's relationships, then it is easier for the team to work together toward supporting those relationships. In issues as emotionally charged as attachment, separation and loss there will not always be shared values but each team member.

Team members need to respect one another's complementary roles and value one's perspective. Different team members have different expertise to offer. The value of complementary skills is one of the greatest assets of teamwork. But members, by virtue of their various roles and skills also bring different perspectives to the team.

Team members need to understand goals and objectives clearly and ensure that these are shared. When you are a team member, you cannot base your actions on your own assessments of a situation. The team needs to share information and ensure a common understanding of the goal.

It is important to work together because:

- Everyone concerned with the child has a different perspective
- No one has sole responsibility for decisions when a child is in foster care
- Permanency can be delayed when adults disagree about what is best for a child.
- Planning and implementing lifetime connection plans can be emotionally draining – it helps to have support

Planning for Visits

Location of visits

When a child is placed in your home most of them will have court order visitation. Usually this visitation will be held at the CPS office and will be supervised by a CPS worker. As a foster parent you will be told about the visits when the child is placed in your home. Usually the place of the visit is already scheduled.

Frequency

Most of the time a child will have weekly visitation. The visit is conducted during the daytime. Visitation will only happen on the weekend if the child has approved unsupervised visitation with parents or relatives. Some children do have visits on a monthly basis.

Duration

Most children's visits will be at least an hour long.

Who will be present?

CPS will approve who can visit the children.

Transportation for child

As a foster parent you might have to help out with transporting a child to a visit or picking them up.

Child's Reactions to Visits

How a child might feel inside...

<p>When first taken away from parents:</p> <p>Shock, anger, fear, depression</p>	<p>When they first see their parents on a visit:</p> <p>Elation, fear, sadness, anger</p>	<p>When they must say Good-bye at the end of a visit:</p> <p>Fear, sadness, anger, relief, anxiety</p>
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How a child might behave if feeling this way:

<p>Listless, Withdrawn, Distracted, Hostile, Aggressive, Tearful, inconsolable</p>	<p>Hyperactive, Hostile, scared Aggressive, Talking too much, Cowering, Avoiding parent, Clinging to parent, clinging to other caregiver, ignoring parent</p>	<p>Crying, angry, hostile to parent, whining, leaving without saying goodbye, clinging</p>
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POLICY - Policy on Family Contact, Mail, telephone, gifts and possessions

It shall be the policy of Agape Manor Home CPA to establish guidelines for quality contact between children in substitute care, their families, and other people with whom they have a significant connection which:

1. Supports and develops the child's relationships with significant others, including parents, siblings, other family members and friends: and
2. Reduces the potential harm to the child associated with separation from primary attachment figures.
3. Assures that the paramount concern in developing a child-family contact plan is in the child's health, safety, and best interest.
4. Assures that foster families shall provide transportation to child for family visits.

PROCEDURE

1. Agape Manor Home CPA requires that foster parents support and allow children in care the opportunity for family and sibling visits and contact when a sibling group is not placed in the same home or facility.
 - (a) Children, their parent(s), and their sibling(s) have a right to visit as is reasonably necessary to maintain and enhance their attachment to each other; and
 - (b) Facts considered in determining scope and effect of visits include, but are not limited to the child's health, safety, developmental, and attachment needs.
2. Unless parental rights have been terminated or relinquished, or unless contacts are not in the child's best interest, Agape Manor Home CPA requires that foster parent's support and allow contacts between children and their parents according to the agency's policies.
 - (a) Unless the child's best interest or a court order necessitates restrictions, children must be allowed to send and receive mail and to have telephone conversations with family members or managing conservators.
 - (b) When either the child or his family requests contact, but that contact is not in the child's best interest, the Child-placing management Staff (CPMS) must determine the communication restrictions. Reasons for the restrictions must be explained to the child and family and documented in his record.
 - (c) If restrictions continue longer than one month and the child or his family continues to request contact, Child-placing management Staff (CPMS) must evaluate these restrictions at least monthly. Reasons for the continued restrictions must be explained to the child and documented in his record.
 - (d) If communications or visits are limited for practical reasons (such as expense), the limits must be determined with the child and his parents or managing conservator. The limits must be documented in the child's record.
3. A parent's acts or omissions that are unrelated to the child shall not constitute a ground for prohibiting or canceling visits, unless there is reason to believe that the visit would jeopardize the child's emotional or physical safety.
4. When Agape Manor Home CPA resources alone cannot meet the child's family contact needs; the case manager should solicit help from family and community resources.
5. Agape Manor Home CPA Child-Placing Management Staff shall prohibit a visit if:
 - (a) There is reason to believe that the visit would jeopardize the child's emotional or physical safety; or
 - (b) A court order prohibits visits.
6. If a parent objects to a visitation limitation that Agape Manor Home CPA staff imposes, Agape Manor Home CPA Child-Placing Staff will first detail the reason for the limitation of visitation. Should the parent continue to object to the visitation limitation the Agape

Manor Home CPA Child-Placing Staff shall refer the parent to the DFPS case worker where the parent(s) may seek the managing conservator's review of the visitation limitation.

Orientation of the policy

Prior to the first contact and when changes in the child-family contact plan occurs, the case manager shall explain to the child's family and foster family (and the child when appropriate) the rights and expectations regarding child-family contact, including its importance to the child. The case manager shall explain supervised and structured visitation to the involved parties.

Contact plans

Every child in substitute care shall have written contact plans, which will address the child's need for safety and attachment. This plan will address plans for all visits including family sibling visits and contacts with friends. An Individual Child-Family Contact Plan will be developed in consultation with the managing conservator/ DFPS case worker as part of the initial and subsequent service plan and will be discussed with the child, foster parent and all other related parties. Foster parent will be informed of their responsibility of providing transportation to such visits.

Supervision of visitation

(1) If supervision is necessary to protect the child from emotional or physical harm, CPS shall notify the foster parent or Agape case manager.

(2) Agape Manor Home CPA shall coordinate with the foster family and the DFPS worker the supervision of the visitation. In the event that a DFPS Case worker cannot provide supervision for the visit, the Foster Parent shall provide supervision for the visit. The Agape Manor Home CPA Child-Placing Staff will contact the Foster families for coordination and assistance. When delegating supervision to others, Agape Manor Home CPA will ensure that the supervising person understands the individual family's dynamics, the objectives of supervision, the circumstances requiring intervention, and documentation of expectations.

(3) Supervision of visits shall be conducted with the full knowledge of the participants and should be culturally relevant and language appropriate.

Documentation of the contact

(1) When a foster parent, Agape Manor Home CPA staff or Child-Placing Staff supervise visitation, they shall complete and place in the case file a daily progress note that must include:

(a) The location of the visit, who attended and the length of the visit;

(b) Any missed visits and the reasons for the missed visits;

(c) Any interrupted and/or terminated visits and reasons for the interruptions and/or terminations.

(d) Activities that occur during supervised visits or structured family contacts.

Mail

Children's mail (including email) will not be opened or read unless at the child's request to assist the child with reading or writing or stipulated by DFPS. Reasons for the restrictions will be informed to the child and documented in the child's record. A listing of the mail or telephone calls that you restrict will be placed in the record. If the restrictions continue, they will be re-evaluated at least monthly by the Child-placing Management staff. Reasons for the continued restriction will be explained to the child and documented in the child's record.

Phone calls

Children's telephone calls will not be monitored unless such restrictions are found to be in the child's best interest as outlined above. Foster parents shall not listen to or screen the child's telephone calls unless the child needs assistance with using the telephone. Reasons for the restrictions will be documented in the child's record. If the restrictions continue, they will be re-evaluated at least monthly by the CPMS. Reasons for the continued restriction will be explained to the child and documented in the child's record.

Telephone calls shall be allowed in 15-minute increments on scheduled telephone days with persons on the pre-approved CPS family contact list. This procedure excludes CPS caseworker or Agape case manager contact. The children are also allowed to make telephone contact with their friends that should be treated as a privilege and can be revoked as a part of the treatment process. Permission must be obtained from the foster parent before making any telephone calls. All contact persons must be on the approved contact list.

Gifts and Possessions

Children have the right to own and have access to personal possessions, including but not limited to toilet and hygiene items, toys, pictures, jewelry, letters, books, religious material and audio and video equipment. These items shall be of the same quality and diversity available to all children. If it is necessary to label these possessions, all markings will be inconspicuous. All personal possessions must be age appropriate. For example, a cell phone for a 6-year-old child is not appropriate. Personal possessions that endanger the safety of others in the home such as pocket knife, BB guns, and paint guns shall be restricted in a foster home.

Family members and managing conservators may give the children gifts that can be considered safe for children. The child's developmental level should be considered in making gift decisions. Staff of Agape Manor Home CPA is not to give children presents, except as representatives of the agency.

