

Foster Care Services Permanency Planning

Service Chapter 624-05

**North Dakota Department of Human Services
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Foster Care Services Permanency Planning 624-05

Definitions 624-05-05

(Revised 12/1/15 ML #3461)

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1. "Abandon" means:
 - a. As to a parent of a child not in the custody of that parent, failure by the non-custodial parent significantly without justifiable cause:
 - i. To communicate with the child; or
 - ii. To provide for the care and support of the child as required by law; or
 - b. As to a parent of a child in that parent's custody:
 - i. To leave the child for an indefinite period of time without making firm and agreed plans, with the child's immediate caregiver, for the parent's resumption of physical custody;
 - ii. Following the child's birth or treatment at a hospital, to fail or arrange for the child's discharge within ten days after the child no longer requires hospital care; or
 - iii. To willfully fail to furnish food, shelter, clothing, or medical attention reasonably sufficient to meet the child's needs.
2. "Abandoned Infant" means a child who has been abandoned before reaching the age of one year.
3. "Administrative Review" means a review open to the participation of the parents of the child, conducted by a panel of appropriate persons at least one of whom is not responsible for the case management of or the delivery of services to, either the child or the parents who are the subject of the review.
4. "Age-Appropriate" means activities or events that are generally accepted as suitable for children of the same chronological age or level of maturity. Age appropriateness is based on the development of cognitive, emotions, physical, and behavioral capacity that is typical for an age group.
5. "Agency" means the North Dakota Department of Human Services, Children and Family Services Division or its designee, including any county social service board.
6. "Aggravated Circumstances" means circumstances in which a parent:
 - a. Abandons, tortures, chronically abuses, or sexually abuses a child;

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- b. Fails to make substantial, meaningful efforts to secure treatment for the parent's addiction, mental illness, behavior disorder, or any combination of those conditions for a period equal to the lesser of:
 - i. One year; or
 - ii. One-half of the child's lifetime, measured in days, as of the date a petition alleging aggravated circumstances is filed.
 - c. Engages in sex offenses in which a child is the victim or intended victim, including corruption or solicitation of a minor, use of a minor in a sexual performance, sexual exploitation or assault, or incest (prohibited under sections 12.1-20-01 through 12.1-20-08 or chapter 12.1-27.2);
 - d. Engages in conduct that constitutes one of the following crimes, or of an offense under the laws of another jurisdiction which requires proof of substantially similar elements;
 - i. Murder, manslaughter, or negligent homicide (violations of section 12.1-16-01, 12.1-16-02, or 12.1-16-03);
 - ii. Aiding, abetting, attempting, conspiring, or soliciting murder, manslaughter, or negligent homicide (violations of section 12.1-16-01, 12.1-16-02, or 12.1-16-03); or
 - iii. Aggravated assault in which the victim has suffered serious injury (violation of section 12.1-17-02).
 - e. Engages or attempts to engage in simple assault, aggravated assault, reckless endangerment or terrorizing in which a child is the victim or intended victim (prohibited under sections 12.1-17-01 through 12.1-17-04); or
 - f. Has been incarcerated under a sentence for which the latest release date is:
 - i. In the case of a child age nine or older, after the child's majority; or
 - ii. In the case of a child, after the child is twice the child's current age, measured in days.
7. "Child" means an individual who is:
- a. Under the age of eighteen years and is neither married and cohabiting with spouse nor in the military services of the United States; or
 - b. Under the age of twenty years with respect to a delinquent act committed while under the age of eighteen years.
8. "Deprived child" means a child who:
- a. Is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for the child's physical, mental, or emotional health, or morals, and the

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- deprivation is not due primarily to the lack of financial means of the child's parents, guardian, or other custodian;
- b. Has been placed for care or adoption in violation of law
 - c. Has been abandoned by the child's parents, guardian, or other custodian;
 - d. Is without proper parental care, control, or education as required by law, or other care and control necessary for the child's well-being because of the physical, mental, emotional, or other illness or disability of the child's parent or parents, and that such lack of care is not due to a willful act of commission or act of omission by the child's parents, and care is required by a parent; or
 - e. Is in need of treatment and whose parents, guardian, or other custodian have refused to participate in treatment as ordered by the juvenile court.
9. "Fit and willing relative or other appropriate individual" means a relative or other individual who has been determined, after consideration of an assessment that includes a criminal history record investigation under section 23 of this Act, to be a qualified person under Chapter 30.1-27, and who consents in writing to act as a legal guardian.
10. "Financially Responsible County" is the county where the child's parent has residence at the time of court intervention. The county of financial responsibility could change after a 60-day lapse in placement. If the parents do not have residence in North Dakota, then the financial responsibility exists in the county where the child resided at the time of court intervention. (Definition developed by county directors, 1997).
11. "Foster Care For Children" means the provision of substitute parental child care to those children described in Subsection vi of Section 50-09-01 of N.D.C.C. and includes the provision of food, shelter, security and safety, guidance and comfort on a 24-hour basis, to one or more children under 21 years of age to safeguard the child's growth and development and to minimize and counteract hazards to the child's emotional health inherent in the separation from the child's family. Foster care may be provided in a licensed family foster home, group home, or residential child care facility.
12. "Foster Family Home" means an occupied family residence in which foster care is regularly provided by the owner or leasee thereof to no more than four children, unless all of the children in foster care are related to each other by blood or marriage in which case such limitations shall not apply.

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13. "Group Home" means a licensed or approved residence in which foster care is regularly provided for more than four, but fewer than thirteen, unrelated children.
14. "Home" when used in the phrase "to return home" means the abode of the child's parent with whom the child formerly resided.
15. "Normalcy" means giving children in foster care the opportunity to engage in typical growth and development. This includes the participation in age- appropriate activities, responsibilities and life skills.
16. "Permanency hearing" means a (judicial or Division of Juvenile Services [DJS] administrative hearing pursuant to N.D.C.C. 27-20) hearing, conducted with respect to a child who is in foster care, to determine the permanency plan for the child which includes:
 - a. Whether and, if applicable, when the child will be returned to the parent;
 - b. Whether and, if applicable, when the child will be placed for adoption and the state will file a petition for termination of parental rights;
 - c. Whether and, if applicable, when a fit and willing relative or other appropriate individual will be appointed as a legal guardian;
 - d. Whether and, if applicable, to place siblings in the same foster care, relative, guardianship, or adoptive placement, unless it is determined that the joint placement would be contrary to the safety or well-being of any of the siblings;
 - e. Whether and, if applicable, in the case of siblings removed from their home who are not jointly placed, to provide for frequent visitation or other ongoing interaction between the siblings, unless it is determined to be contrary to the safety or well-being of any of the siblings;
 - f. In cases in which a compelling reason has been shown that it would not be in the child's best interests to return home, to have parental rights terminated, to be placed for adoption, to be placed with a fit and willing relative, or to be placed with a legal guardian, whether and, if applicable, when the child is age sixteen or greater and placed in another planned permanent living arrangement;
 - g. In the case of a child who has been placed in foster care outside the state in which the home of the parents is located, or if the parents maintain separate homes, outside the state in which the home of the parent who was the child's primary caregiver is located, whether the out-of-state placement have been considered. If the child is currently in an out-of-state placement,

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- the court shall determine whether the placement continues to be appropriate and in the child's best interests; and
- h. In the case of a child who has attained age fourteen, the services needed to assist the child to make the transition from foster care to successful adulthood.
17. "Protective supervision" means supervision ordered by the court of children found to be deprived or unruly.
18. "Reasonable and Prudent Parent Standard" means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child participating in extracurricular, enrichment, cultural, and social activities.
19. "Reasonable efforts" means the exercise of due diligence by the agency to use appropriate and available services to meet the needs of the child and the child's family in order to prevent removal of the child from the child's family, or, after removal, to use appropriate and available services to eliminate the need for removal and to reunite the child and the child's family and to maintain family connections. If the child cannot return home, the agency must make reasonable efforts to make and finalize an alternate permanent placement of the child, including identifying appropriate in-State and out-of-State options. In the case of siblings removed from their home and not jointly placed, frequent visitation or interaction must be provided, unless it is contrary to the safety or well-being of any sibling. In making reasonable efforts and in determining reasonable efforts, the child's health and safety must be the paramount concern.
20. "Relative" means:
- a. The child's grandparent, great-grandparent, sibling, half-sibling, aunt, great-aunt, uncle, great-uncle, nephew, niece, or first cousin;
 - b. An individual with a relationship to the child, derived through a current or former spouse of the child's parent, similar to a relationship described in subdivision a;
 - c. An individual recognized in the child's community as having a relationship with the child similar to a relationship described in subdivision a; or
 - d. The child's stepparent.
21. "Residential Child Care Facility (RCCF)" means a licensed or approved facility other than an occupied private residence providing foster care to

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thirteen or more unrelated children, except as may be otherwise provided by rule or regulation.

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Authority References 624-05-10

(Revised 12/1/15 ML #3461)

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1. Chapter 50-11 of the North Dakota Century Code
2. Chapter 50-09 of the North Dakota Century Code
3. Chapter 27-20 of the North Dakota Century Code
4. Chapter 50-06 of the North Dakota Century Code and NDDHS Manual Chapter 110-01 (Confidentiality)
5. Title IV-B of the Social Security Act (SSA)
6. Title IV-A/E of the Social Security Act
7. Public Law 103-432 (SSA Amendments)
8. Adoption and Safe Families Act of 1997 (ASFA), P.L. 105-89.
9. N.D.A.C. 75-03-14-06. Permanency Planning.
10. Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351)
11. Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183)

Permanency Planning Philosophy 624-05-15-10

(Revised 2/10/07 ML #3053)

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Planning for the permanency of children in North Dakota is based on the concept that every child is entitled to live in a permanent home, in which the child's health, mental wellness, and safety are the paramount concern. This is normally the home of the child's parents, and it is the State policy that reasonable efforts must be made to assure the child's health and safety in that home, or to return a child removed from the home as soon as that can be done consistent with the child's health and safety. However, if this is not feasible, then reasonable and timely efforts are made to place the child with a fit and willing relative, an adoptive home, a legal guardian, or other appropriate permanent solution which will avoid the unnecessary movement of the child between caretakers. The longer the child is in an unsettled status, the more difficult it will be for the child, and other caretakers to participate positively in the replacement plans. In making decisions related to the child, her/his health, safety, and well being are the paramount concerns. The Foster Care Child and Family Team meeting/Wraparound philosophy is the cornerstone for the delivery of permanency services in the Foster Care for Children Program in North Dakota.

(See Wraparound Manual Chapter 641.)

Reasonable Efforts - Requirements 624-05-15-15

(Revised 1/15/10 ML #3206)

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Federal law requires that reasonable efforts be made:

- To prevent the unnecessary removal of a child from home (unless it is a situation where reasonable efforts are not required such as due to aggravated circumstances);
- To make and finalize a permanency plan for the child (whether it is reunification, adoption, legal guardianship, with a fit and willing relative or placement in another planned permanent living arrangement);
- To place siblings in the same foster care, relative, guardianship, or adoptive placement, unless it is determined to be contrary to the safety or well-being of any of the siblings; and
- In the case of siblings not placed together, reasonable efforts must be made to provide for frequent visitation or interaction, unless this would be harmful to any of the siblings.

Removal of a child from the child's home for placement in foster care must be based on judicial findings stated in the court order, and determined on a case-by-case basis in a manner that complies with the requirements of Titles IV-B and IV-E of the Social Security Act [42 U.S.C. 620, et seq., and 42 U.S.C. 6701, et seq.], as amended, and federal regulations adopted thereunder. These regulations require that the original court order and subsequent court reviews document the agency's reasonable efforts at the points described above.

Reasonable efforts to place a child for adoption, with a fit and willing relative or other appropriate individual as a legal guardian including in-State and out-of-state placements, or in another planned permanent living arrangement, may be made concurrently with reasonable efforts to return the child safely to the child's home. In fact, sometimes timely permanent placement cannot be achieved unless concurrent planning occurs, and only concurrent planning can avoid inappropriate extension of the child's unsettled status. In these situations, concurrent planning is not an option, but a mandate for the agency.

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Interstate Placement Considerations

The Safe and Timely Interstate Placement of Foster Children Act of 2006 (Public Law (P.L.) 109-239, effective 10/1/06) modifies the existing Title IV-E State plan provisions related to reasonable efforts to specifically require a State to:

- Consider interstate placements in permanency planning/Foster Care Child & Family Team Meeting decisions when appropriate;
- Consider in-State and out-of-State permanent placement options at permanency hearings; and
- Identify appropriate in-State and out-of-State placements when using concurrent planning.

Reasonable Efforts - Exceptions to Requirements
624-05-15-15-05

(Revised 1/15/10 ML #3206)

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Reasonable efforts to prevent removal, or return a child home, are not required if:

1. A court of competent jurisdiction has determined that a parent has subjected the child to aggravated circumstances; or
2. The parental rights of the parent, with respect to another child of the parent, have been involuntarily terminated.

Reasonable Efforts - Preventing Placement

624-05-15-15-10

(Revised 2/10/07 ML #3053)

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Part of the permanency planning/wraparound philosophy includes the premise that every effort will be made to prevent the placement as well as developing and maintaining safe, adequate plans once the child is in care. The decision to place a child outside their home is a monumental one which should be made only with the greatest care and deliberation and considering the child's safety in the home. The removal damages whatever continuity the child has experienced and introduces new emotional risks.

The custodian agency/designee shall provide a range of services and commit resources to preserve the child's family and prevent inappropriate placements. The agency shall ensure that placement is arranged only after services to ameliorate conditions that may necessitate placement have been provided and failed, or offered and refused; and when there is a clear danger to the physical and emotional well being of the child. These requirements are based upon federal law found in Parts IV-B and IV-E of the Social Security Act.

**Reasonable Efforts - Preventing Placement - Services
624-05-15-15-15****(Revised 10/15/12 ML #3341)**[View Archives](#)

Reasonable efforts to prevent placement as described in the Wraparound case management process. Wraparound case management is a strengths-based definable process involving the child and family that results in a unique set of community services and supports individualized for that child and family. Wraparound is a team driven process that focuses on least restrictive methods of care and uses the family's strengths, preferences, and choices in the process whenever possible. This process includes an assessment of risk, needs, strengths, and safety for the child and family. A behaviorally specific treatment plan, with defined goals and tasks for team members is the result.

Reasonable efforts to prevent placement could include: Family Preservation Services designed to help families alleviate crises that might lead to out-of-home placement of children while maintaining the health and safety of children in their own homes. These services focus on family strengths and competencies. They are intense and time-limited. The child and family team process will guide which family preservation services can best meet the needs of the child and family. Reasonable efforts requires offering appropriate services to meet the needs of the family with professional judgment and due diligence.

Family Preservation Services include the following:

- Parent Aide Services (Service Chapter 627-01)
- Intensive In-Home Family Services (Service Chapter 627-02)
- Respite Care Services (Service Chapter 627-03)
- Safety/Permanency Funds (Service Chapter 627-04)
- Prime Time Child Care (Service Chapter 627-05)
- Wraparound Case Management (Service Chapter 641-01)
- Crossroads Service (Service Chapter 620-15).

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Other services may be provided to the child or parent(s) to prevent placement of the child as recommended by the Child and Family Team. These services may include:

- Child Protective Services
- Mental Health Services
- Drug and Alcohol Addiction Evaluation and Treatment Services
- Psychological/Psychiatric Evaluation and Services
- Child Care Services and Crossroad Program for Minor Parents
- Sexual Abuse Treatment
- Case Management for children with severe emotional disturbances
- Safety Permanency Funds
- Family group decision making conference

**Reasonable Efforts - Preventing Placement -
Documentation 624-05-15-15-20**

(Revised 10/15/12 ML #3341)

[View Archives](#)

Whenever a child is removed from the home, federal regulations require a judicial determination whether reasonable efforts to prevent placement were made. This reasonable effort determination must appear in the court's removal order.

To support this judicial determination and to document reasonable efforts to prevent placement, the agency must organize and maintain its documentation of such reasonable efforts in the permanency plan. This documentation includes:

1. Any case plan, treatment plan, or permanency plan which describes efforts to prevent placement.
2. Any other evidence of Family Preservation Services planned and/or provided, including:
 - Parent Aide Services
 - Intensive In-Home Family Services
 - Respite Care Service Family Agreement (SFN 151)
 - Safety/Permanency Funds ([SFN 307](#))
 - Prime Time Child Care Agreement (County form)
 - Crossroads Program Evaluation Form (SFN 878)
3. Authorizations or reports of other services provided to the parent or child. Also refer to Wraparound Case Management, NDDHS 641-25, Case Recording/Documentation.

The agency must provide the evidence of reasonable efforts to prevent placement to the court for the first placement hearing, and

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must seek to assure that the court record reflects the judicial finding with respect to such reasonable efforts.

Reasonable efforts to prevent placement may not be required for certain cases as described in section 05-15-15-05. If there are “aggravated circumstances” or if the rights of the parent have previously been involuntarily terminated for another child, the agency must bring these points to the court’s attention at the first placement hearing, and must seek to assure that the court record document the judicial finding that reasonable efforts to prevent placement are not required for these reasons.

Note that when the court makes a finding that reasonable efforts are not required, a permanency hearing in court must be held within 30 days of this determination, unless the requirements of the permanency hearing are fulfilled at the hearing in which the reasonable efforts determination was made.

**Child & Family Team Meeting Process and Purpose
624-05-15-20****(Revised 12/1/15 ML #3461)**[View Archives](#)

The permanency planning process including concurrent planning begins at the time the child is considered to have entered foster care and continues through case closure. This process is intended to assure the safety and well-being of the child and a permanent home in their future. Key benchmarks in the Permanency Planning process are as follows:

1. Child enters foster care
2. Initial Child & Family Team Meeting
3. Quarterly Child & Family Team Meetings
4. Permanency Hearing (judicial or DJS administrative hearing pursuant to N.D.C.C. 27-21)
5. Case closure

Purpose

The purpose of the Child & Family Team Meeting is to insure that children are receiving appropriate care consistent with permanency planning/Wraparound philosophy and rules. N.D.A.C. 75-03-14-06. In addition, the team serves as an administrative review body and fulfills the requirements of federal law. Although the review participants input is very helpful in the decision making process, final decisions rest with the custodian pursuant to the authority and responsibility conferred on the custodian through N.D.C.C. 27-20-38.

The Child & Family Team Meetings are a key ingredient in the implementation of permanency planning in foster care. The Child & Family Team Meetings are mandatory and are multi-agency and multidisciplinary and serve on an area wide or county basis to review foster care placements of children. Reference N.D.A.C 75-03-14-06.

Function

The Child & Family Team has, at a minimum, the following functions:

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1. Periodically review the initial case plan and case review documents for every child in care.
2. The regional foster care supervisor determines if a specialized level of foster care payment is needed, and the appropriate level and duration of payment. Discussion regarding the specialized payment and the regional supervisor approval must be documented in the child's foster care case plan.
3. The regional foster care supervisor approves the foster care placement into therapeutic family foster care or group or residential child care facility in FRAME.
4. To ensure and document that parents/guardian, child (when appropriate) and foster parent(s) are invited to attend the Child & Family Team meetings.
5. To develop, in writing, the permanency plan for the child, parent, agency, and foster parents with specified goals, tasks, and dates of the completion.
6. To develop local policies in accordance with federal and state law, regulation and policy related to foster care.

A Child & Family Team Meeting Outline has been created as a tool to assist the Child & Family Team in addressing the various items specific to the case. This outline can be downloaded from FRAME under Reports/Forms.

Notifications

The Safe and Timely Interstate Placement of Foster Children Act of 2006, mandated that foster parents of a child and any pre-adoptive parent or relative providing care for the child must be provided with notice of, and a right to be heard in, any proceeding with respect to the child. This is a Title IV-E requirement at 475(5)(G).

The custodial agency must notify the foster parent, pre-adoptive parent, or relative caregiver in writing. A copy of the written notification should be kept in the child's case file.

FRAME

Frame does allow concurrent goals to be entered on both the Initial Permanency Plan and the Permanency Planning Progress Report, completed at the Child & Family Team Meetings. In the goals/tasks section, a case manager may enter "see FRAME" for tasks areas.

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Date Child Enters Foster Care 624-05-15-20-05

(Revised 2/10/07 ML #3053)

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The date the child enters foster care is explained in Section 05-15-35-05 of Service Chapter 624-05.

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Child & Family Team Membership 624-05-15-20-08 (New 12/1/15 ML #3461)

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Pursuant to N.D.A.C. 75-03-14-06, the Regional Supervisor serves as the chairperson, and the county director as vice-chairperson of the Child & Family Team Meeting. In that role as chairperson of the Child & Family Team Meeting, the Regional Supervisor may appoint a co-chair as circumstances warrant. The Regional Supervisor and county social service board director shall select the permanent and case situational members of the committee.

Permanent members include:

1. Regional foster care supervisor
2. County social service board director or designee
3. Custodian/designee
4. Regional DD coordinator or designee must be included on the Child & Family Team when any case being reviewed involves a child who is mentally retarded or developmentally disabled or if there is reason to believe the child may be mentally retarded or developmentally disabled.

Recommended permanent members may include, but are not limited to:

1. A treatment or therapy person (should have strong diagnostic skills)
2. Juvenile court supervisor or other court representative
3. Tribal Government personnel (where appropriate)
4. Case manager (includes therapeutic foster care or Division of Juvenile Services representative)

Required members of the team on a case specific basis: Parent, foster parents, and custodians must be invited. Adequate advance notice of Child & Family Team meetings must be provided to all participants.

1. Parents or legal guardian
2. Foster parent

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3. Foster child (when appropriate)
 - a. When a child is age 14 or greater they also have the opportunity to personally invite two additional members to join the Child & Family Team with them (see 624-05-15-50).

Other members of the team could include:

1. School official
2. County or city health nurse
3. Others having an appropriate interest in the child or family
4. Group home or residential child care facility (where appropriate)
5. Chafee Independent Living Coordinator (where appropriate)
6. Identified team members by the family; natural and formal supports

Local circumstances must be considered in selecting the Child & Family Team. Cooperation between the members is essential. The common goal must always be to arrive at a joint decision and provide the regional supervisor and the child's a legal custodian a recommendation which is in the "best interests of the child."

AASK should be invited to meetings for children whose parental rights are in the process of being terminated or where there is concurrent plan that includes adoption. If the child has a concurrent plan involving adoption as an alternate plan, the AASK* Agency must be invited to the first Child & Family Team meeting following the change in the goal to adoption. Prior to inviting AASK, parents should be informed about concurrent planning and the roles and responsibilities of AASK. The adoption worker will have information regarding the potential for the child to be adopted and the availability of a potential adoptive family for the child. *Adoption Agency: Adults Adopting Special Kids (AASK)

It is appropriate for a representative from AASK to be at the Child & Family Team meeting when the child's parental rights have not yet been terminated nor are they in the process of being terminated if there is some thought being given to seeking termination of parental rights for the child. The child placing agency could provide information to aid in the case planning for the child. This gives teams another opportunity to explore every avenue possible in developing permanency plans for children in foster care.

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The regional foster care supervisor is responsible to assure that the intent of permanency planning and the requirements of this chapter are carried out.

Initial Child & Family Team Meeting 624-05-15-20-10 (Revised 12/1/15 ML #3461)

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The Child & Family Team Meeting, co-chaired by the regional supervisor, and the county director or designee, must meet within 30 days of the child's placement into foster care.

It is the responsibility of the chairperson to call the meeting and set the meeting dates. Child & Family Team Meetings may be conducted in group face to face, telephone conference calls, or a combination of the two.

It is the responsibility of the case manager to get the case on the schedule for team meetings. Cases to be reviewed are determined in advance of the team meeting. Any member of the team may request that a case be reviewed.

Information regarding the team, its purpose, function, membership, process, initial meeting, legal authority, and responsibility are reviewed. Co-chairs are encouraged to follow the [Child & Family Team Meeting outline](#). The Child & Family Team Meeting report is to be completed in FRAME.

The case manager has the responsibility for presenting the case to the team. The demographic information including the health, educational requirements, and independent living plan (when 14 years of age and older) must be completed by the case manager in FRAME prior to the meeting.

In order to function effectively, the team must have pertinent information about the child, the parents, the extended family, and the foster family when appropriate. This will include information, as recorded in the Strengths Discovery, on the incidents and safety issue that may have precipitated the need to consider placement, what services have been provided to prevent the placement and also information on how each

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parent and child has been functioning. The case manager for the child has the responsibility for insuring that a Strengths Discovery is completed and is available for use by the team. The case manager should be prepared to discuss any of the items in the case plan. The team provides input for case planning by identifying strengths, needs, and risk factors. It is the responsibility of the case manager to complete case plan documentation and distribute as required.

The signed signature sheet from the Child & Family Team Meetings (FRAME generated) must be maintained as a hard copy in the child's foster care case file. Any FRAME documents generated must also be maintained as a hard copy in the child's foster care case file.

There may be limited situations where permanency plan preprinted forms, created outside of FRAME, are allowed. The created document (plan) must be signed and maintained as a hard copy in the child's foster care case file.

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Child & Family Team Case Review 624-05-15-20-15 (Revised 12/1/15 ML #3461)

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The Child & Family Team, co-chaired by the regional supervisor and the county director or designee, serves as the ongoing gatekeeper and provides oversight in the administration of the foster care program.

At a minimum, the team must meet at least every three months (quarterly) with the key people in the child's life to review the child's situation and progress toward safety, permanency, and well-being. The quarterly team meetings focus on case progress towards the established goal with specific dates for completion and ongoing evaluation of the treatment plan to fulfill the stated goals. The team has the responsibility to provide planning input. At the conclusion of the meeting, the case manager is responsible for completion and distribution of the completed case plan review.

The signed signature sheet from Child & Family Team Meeting must be maintained as a hard copy in the child's foster care case file.

There may be limited situations where permanency plan preprinted forms, created outside of FRAME, are allowed. The created document (plan) must be signed and maintained as a hard copy in the child's foster care case file.

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Documentation of the Child & Family Team Meeting 624-05-15-20-16

(New 12/1/15 ML #3461)

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The Child & Family Team Meeting reports in FRAME are required for case plan and case review. All case plan and permanency planning review requirements are built into screens in the FRAME system. This is designed to ensure that federal mandates related to foster care have been met.

The eligibility specialist has on-line review access to foster care cases in FRAME, to assure that AFDC-Foster Care eligibility requirements and compliance issues are met. If the case is not on-line, hard copies of the reports must be sent to the eligibility specialist in the county of financial responsibility.

Permanency Hearing 624-05-15-20-20

(Revised 12/1/15 ML #3461)

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Every child in foster care must have a “permanency hearing” within 12 months of the child's entry to foster care or continuing in foster care following a previous permanency hearing. The hearing must be held in a juvenile court or tribal court of competent jurisdiction (these replace the former dispositional hearings), or as an option, by the Division of Juvenile Services (DJS) for youth under its custody as a placement hearing under N.D.C.C. 27-21.

Agencies must obtain a judicial determination that it made reasonable efforts to finalize the permanency plan that is in effect (whether the plan is reunification, adoption, legal guardianship, placement with a fit and willing relative, or placement in another planned permanent living arrangement) within twelve months of the date the child is considered to have entered foster care, and at least once every twelve months thereafter while the child is in foster care. The requirement for subsequent permanency hearings applies to all children, including children placed in a permanent foster home or a pre-adoptive home.

In addition, a permanency hearing in the court or DJS must be conducted within thirty (30) days after a court determines that reasonable efforts are not required because:

1. A parent has subjected the child to aggravated circumstances; or
2. The parental rights of the parent, with respect to another child of the parent, have been involuntarily terminated.

The hearing shall determine the court-approved permanency plan for the child that determines, if applicable, when:

1. The child will be returned to the parent;
2. The child will be placed with a relative;
3. The child will be placed with a legal guardian;

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4. To place siblings in the same foster care, relative, guardianship, or adoptive placement, if appropriate;
5. In the case of siblings removed from their home and not jointly placed, to provide frequent visitation, or ongoing interaction, if appropriate;
6. The legal custodian (or State) will petition for termination of parental rights;
7. The child will be placed for adoption; or
8. The child age 16 or greater will be placed in another planned permanent living arrangement (APPLA). This applies in cases where the legal custodian has documented to the court a compelling reason for determining that it would not be in the best interests of the child to return home, be referred for termination of parental rights, or be placed for adoption with a fit and willing relative or with a legal guardian. See 624-05-15-115-30-10 for judicial determination requirements.

The hearing shall also:

1. Consider in-State and out-of-State placement options in permanency hearings, and if a child is already in an out-of-State placement, the hearing must determine if the placement continues to be appropriate and in the child's best interests; and
2. In the case of a child who has reached age 16, the services needed to assist the child to make the transition from foster care to independent living.

All of the information gathered at the Child & Family Team meetings, initial and quarterly case reviews, must be available to the court or DJS for a permanency hearing.

Foster parents of the child and any pre-adoptive parent or relative providing care for the child must be provided with written notice of, and a right to be heard in, any proceeding with respect to the child. Email or letter notice constitutes written notice, if there is documentation of the letter or email on file.

A full hearing is required. Paper reviews, *ex parte* hearings, agreed orders, or other actions or hearings which are not open to the participation of the

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parents of the child, the child (if age appropriate), and foster parents or pre-adoptive parents (if any) are not permanency hearings.

Reasonable Efforts - Reunifying the Child and Family 624-05-15-25

(Revised 10/15/12 ML #3341)

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“Reasonable efforts” means the exercise of due diligence by the agency granted authority over the child by the court, to use appropriate and available services to meet the needs of the child and the child’s family so as to assure the child’s safety, permanency, and well-being.

Under both Federal and State law, reasonable efforts to reunify the child and family must be made and documented throughout a child’s placement. In making reasonable efforts, the child’s health and safety and well-being shall be the paramount concern. Wraparound case management will be used to assess the needs and strengths of the child and family. A child and family team will be developed. Through the committee/team process, services and supports will be designed to assist the family with reunification of the child. Services comprise a set of Family Preservation Services, as well as reunification and other services designed to help families alleviate the problems which occasioned the removal of the child, to support families preparing to reunify, and to assist families in obtaining services and other supports necessary to address their multiple needs in a culturally sensitive manner. These services focus on family strengths and competencies. They are intense and time-limited. Not all-available services are appropriate for all families, depending on need. Reasonable efforts require applying appropriate services with professional judgment and due diligence, not assuring that every family receive every possible service. Application of Family Preservation Services, reunification, and other services involves establishing appropriate treatment goals and treatment tasks as part of the permanency plan.

Refer to Wraparound Case Management Service Chapter 641-05 and 641-10.

**Reasonable Efforts - To Finalize a Permanency Plan -
Documentation 624-05-15-25-05**

(Revised 2/10/07 ML #3053)

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Whenever a child is removed from the home, federal regulations require a judicial determination that the agency has made reasonable efforts to finalize the permanency plan that is in effect (whether the plan is reunification, adoption, legal guardianship, placement with a fit and willing relative, or placement in another planned permanent living arrangement) within twelve months of the date the child entered foster care, and at least once every twelve months thereafter while the child is in foster care.

To reunify:

To support this judicial determination and to document reasonable efforts to reunify the child and family, the agency must organize and maintain its documentation of such reasonable efforts. This documentation includes:

1. Authorization or reports of other services provided to help in reunification of the child and family.
2. Any case plan, treatment plan, or permanency plan which describes efforts to reunify the child and family.
3. Any other evidence of Family Preservation Services planned and/or provided including the service outcome.

The agency must provide to the court evidence of reasonable efforts to reunify the child and family for every Permanency Hearing and must provide the court adequate information to assure that the court record reflects the judicial finding with respect to such reasonable efforts to reunify the child and family.

Reasonable efforts to reunify the child and family may not be required for certain cases as described in Section 05-05-15-05. "Aggravated circumstance" previous involuntarily termination of parental rights for another child, etc. must be brought to the court's attention at the next

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Permanency Hearing. The agency must seek to assure that the court record documents the judicial finding that reasonable efforts to prevent placement are not required for these reasons.

NOTE: that whenever the court makes a determination that reasonable efforts to reunify are not (or no longer) required, a Permanency Hearing in court must be held within 30 days of such determination, unless the requirements of the Permanency Hearing are fulfilled at the hearing in which the reasonable efforts determination was made.

NOTE: that federal funding for Title IV-E [42 USC 671] placements is lost whenever timely court documentation of reasonable efforts is not achieved.

Permanent Placement Other than Reunification:

Under both Federal and State law, the agency must make and document in the case plan, reasonable efforts to make and finalize a child's permanent placement, (adoption, placement with a relative or legal guardian, or some other appropriate planned permanent living arrangement). At least every 12 months from the time this goal is established, federal regulations require a judicial determination whether reasonable efforts to make and finalize this permanent placement have been made. This reasonable effort determination must appear in the record of the court's permanency hearings whenever these are conducted.

To support this judicial determination and to document reasonable efforts, the agency must organize and maintain its documentation of such reasonable efforts. This documentation should include evidence of efforts to recruit, locate, train, approve, or license the alternate placement, work with the child and/or placement principals to prepare for or accomplish the placement, and expected time frame for completion of the permanent placement.

NOTE: that federal funding for Title IV-E placements is lost whenever timely court documentation of reasonable efforts is not achieved.

Reasonable Efforts - Maintain Family Connections
624-05-15-25-10**(Revised 1/15/10 ML #3206)**[View Archives](#)

Whenever a child is removed from the home, a judicial determination must be made regarding reasonable efforts to place siblings together. Also, in the case of siblings not placed together, a judicial determination must be made that reasonable efforts will be made to provide for frequent visitation or other ongoing interaction. An exception to maintaining connections is permissible only if such joint placement or contact would be contrary to the safety or well-being of one or more of the children. Sibling connections are significant to a foster child's emotional and social development since siblings often provide the connection and stability that is no longer available from the child's parents. Individual circumstances will vary and what is 'reasonable' in one situation may not be in another.

If at all possible, siblings who come into care must be placed together in the same home. It is also necessary to identify whether a child entering foster care already has siblings in care. If a sibling enters foster care, the case manager must determine if it is appropriate for the child to be placed in the same foster care setting as the sibling currently in foster care; or, if a different relative or foster family could provide care for both. When a child already in care is being moved to a new foster home, consideration should be made whether or not placement with a sibling would be safe and consistent with the child's well-being.

Agencies must make efforts to locate relative and non-relative foster families who are willing to care for a sibling group. At the same time, it is important to keep in mind the unique challenges associated with caring for multiple children, particularly when children may need special attention.

As part of due diligence in identifying and notifying relatives that children have been removed from their parents' custody, agencies should inquire about whether relatives can care for a group of siblings. Services and supports should also be identified that would make it possible for these

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relatives (or caregivers) to care for the siblings together. Since greater assistance is often available to licensed foster parents, agencies should consider how they can help relative caregivers become licensed foster parents. The federal “Fostering Connections” law allows non-safety related licensing standards to be waived, on a case-by-case basis, for individual children in relative foster family homes. This authority can be used to prevent certain licensing standards from hindering sibling placement.

“Frequent visitation and ongoing interaction” can be defined differently, depending on the individual needs of the siblings. The age and development of the child, for example, might dictate how frequent the contact should be, as well as the nature of that contact. The nature of the relationship before placement should also be a factor. In-person visits also can be supplemented with regular phone contact, email contact, or web camera communication.

The sibling provisions apply only to children removed from their home. However, visitation and ongoing interaction should be maintained between children in foster care and their siblings who have not been removed from their home.

Consideration of placement and connections with siblings should be discussed at each Foster Care Child & Family Team meeting. All factors taken into account in making placement decisions, as well as decisions about maintaining contact between siblings who are not placed together, should be documented in the child’s case file to demonstrate that reasonable efforts were made.

**Termination of Parental Rights or Legal Guardian
Appointment 624-05-15-30****(Revised 1/1/11 ML #3256)**[View Archives](#)

A court's order, "Termination of Parental Rights," terminates all the parent's rights and obligations with respect to the child and of the child to or through the parent arising from the parental relationship. The parent is not thereafter entitled to notice of proceedings for the adoption of the child by another, nor has the parent any right to object to or participate in the child's adoption proceedings. The Agency's petition for Termination of Parental Rights must follow current instructions and formats for such petitions, set forth the facts plainly, and state clearly that the effect of the Termination of Parental Rights will be as described above.

A court's order appointing a legal guardian terminates any authority of a parent that is granted to the legal guardian under that order. A parent subject to such an order is entitled to treatment as a party at any subsequent juvenile court proceeding regarding the child.

After a termination of parental rights, if there is no other parent having parental rights, the court must: (N.D.C.C. [27-20-47](#))

1. Commit the child to the custody of the Department of Human Services or a licensed child-placing agency for adoptive or foster care placement;
2. Appoint a fit and willing relative or other appropriate individual as the child's legal guardian; or
3. Establish some other planned living arrangement for the child.

Legal Custodian:

N.D.C.C. [27-20-38](#) (8/1/99). Rights and duties of legal custodian. A custodian to whom legal custody has been given by the court under this chapter has the right to the physical custody of the child and the right to determine the nature of the

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care, placement and treatment of the child, including ordinary medical care as well as medical or surgical treatment for a serious physical condition or illness which in the opinion of a licensed physician requires prompt treatment, except for any limits the court may impose. The custodian also has the right and duty to provide for the care, protection, training, and education, and the physical, mental, and moral welfare of the child, subject to the conditions and limitations of the order and to the remaining rights and duties of the child's parents or guardian.

(Consent for medical care for a foster child should come from the child's parent. If that is not possible, consent should come from the child's custodian, or the court, depending on the circumstances.)

If the child has not been placed for adoption within 12 months of the custody order and the court has not established a legal guardianship or other planned alternative arrangement for the child, the child must be returned to the court for entry of further orders for the care, custody, and control of the child.

Termination of Parental Rights - Optional Filing 624-05-15-30-05

(Revised 2/10/07 ML #3053)

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The agency may file a petition to the court for Termination of Parental Rights at any time if any one of the three following conditions pertains:

1. The parent has abandoned the child.
2. The parent has given written consent to the Termination, acknowledged before the court.
3. The child is deprived and the court finds any one of the following:
 - a. The conditions and causes of the deprivation are likely to continue or not be remedied and that by reason thereof the child is suffering or will probably suffer serious physical, mental, moral, or emotional harm; or
 - b. The child has been in foster care or in the custody of the agency, county social service board, or the Division of Juvenile Services for at least 450 of the previous 660 nights; or
 - c. A court of competent jurisdiction has convicted the child's parent of one of the following crimes in North Dakota, or of a substantially similar offense under the laws of another jurisdiction: murder, manslaughter, or negligent homicide of a child of the parent; aiding, abetting, attempting, conspiring, or soliciting the same crimes; or aggravated assault in which the victim is a child of the parent and has suffered serious bodily injury.

Termination of Parental Rights - Mandatory Filing 624-05-15-30-10

(Revised 2/10/07 ML #3053)

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The agency must file a petition to the court for Termination of Parental Rights:

1. On or before the day when the child has been in foster care, in the custody of the agency or the Division of Juvenile Services for 450 out of the previous 660 nights; or
2. Within 60 days after the court has found the child to be an abandoned infant; or
3. Within 60 days after the court has convicted the child's parent of one of the following crimes in North Dakota, or a substantially similar offense under the laws of another jurisdiction: murder, manslaughter, or negligent homicide of a child of the parent; aiding, abetting, attempting, conspiring, or soliciting the same crimes; or aggravated assault in which the victim is a child of the parent and has suffered serious bodily injury.

**Compelling Reason(s) for Determining that Filing a
Petition to Terminate Parental Rights Would Not Be in the
Child's Best Interest 624-05-15-30-15**

(Revised 2/10/07 ML #3053)

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These mandatory deadlines for filing a termination of parental rights do not apply, however, if one of the following is true:

1. The child is being cared for by a relative approved by the agency; or
2. The agency has determined that reasonable efforts to reunify child and family are required, the case plan indicates that services are necessary for the safe reunification, and such services have not been provided consistent with time periods prescribed in the case plan; or [Document this in the case plan (compelling reason not to file TPR). This must be available to the court at the next court hearing.]
3. The agency has documented in the case plan a compelling reason why Termination of Parental Rights (TPR) would not be in the child's best interests and has notified the court that the documentation is available for review by the court. The "compelling reason" must be a recorded statement which reflects consideration of all of the following:

The child's age,

- a. The portion of the child's life spent living in the household of a parent of the child,
- b. The availability of an adoptive home suitable to the child's needs,
- c. Whether the child has special needs, and
- d. The expressed wishes of a child age 10 or older.

Examples of "compelling reasons" include, but are not limited to, the following:

1. Adoption is not the best plan for the child.
2. The child has expressed a desire to avoid TPR and/or adoption.

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3. The child has a significant bond with a non-family member who wishes to serve as a legal guardian.
4. The parent and child have a significant bond, but the parent cannot care for the child due to parent's emotional or physical disability, and another permanency plan has been identified for the child.
5. The parent has made significant measurable progress and continues to make diligent efforts to complete the requirements of the case plan, but needs more time to do so.
6. The placement of the child is due primarily to the child's behavior despite continued parental efforts at control and supervision, and progress is being made on improving the child's behavior.
7. There are insufficient grounds for filing a TPR petition.

Please use SFN 348, "Compelling Reason(s) for Determining that Filing a Petition to Terminate Parental Rights Would Not be in the Child's Best Interest," to carefully document any compelling reasons.

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Responsibilities of the Department of Human Services and Regional Human Services Centers - TPR Children 624-05-15-30-20

(Revised 10/15/12 ML #3341)

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1. Authorize releases of information where disclosure is controversial or required by another agency.
2. Authorize treatment for medical emergencies, surgeries, and hospitalizations, including unplanned psychiatric hospitalizations.
3. Approve participation in events with life changing consequences (marriage, enlistments, etc.).
4. Authorize participation in high-risk activities (horseback riding, hunting, driving farm/yard equipment, operating water equipment, etc.).
5. Authorize the seeking of licenses, certifications, and permits.

NOTE: The Department is not able to authorize a minor to secure a driver's license. Please refer to NDDHS Service Chapter 622-05 Foster Care for Children Licensing Standards, at 05-55. Motor Vehicle Operation by Youth in Foster Care for a complete discussion of this subject.

6. Approve participation in significant religious ceremonies, (baptism, confirmation).
7. Authorize out-of-state trips as well as trips that have unusual circumstances or risk.
8. Authorize law enforcement interviews including the administration of polygraph tests.
9. Authorize the child's depiction in any media advertisements or publications including those for adoptive home recruitment.
10. Approve requests to interview or question a child, including instances where the child is a subject of a sexual abuse investigation.
11. Approve any loan, credit card applications, or checking accounts by the child.
12. Act to resolve any issues where a child has an interest in a trust, inheritance, or gift. Approve the commitment of a significant amount

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of the child's funds, unless there has been a conservator of the child's estate appointed.

13. Approve Individualized Education Plans if requested by the completing Special Education District.
14. Through the permanency planning/wraparound process, discuss the child's treatment plan and approve placement level of care.
15. If concerns arise regarding the current placement, the custodial representative will work with the county case manager and the placement agency to resolve concerns and seek alternatives if needed.
16. The custodian is responsible for the child through adoption finalization and must concur with the adoptive home selected. Assistance from the Regional Director may be requested when there are differing opinions regarding such placement.
17. There are times when conflicting opinions will exist on the permanency planning/Foster Care Child & Family team. Our goal is to resolve all conflicts at the lowest possible level. If issues cannot be resolved during the permanency plan/Foster Care Child & Family Team meeting, the county case manager and the HSC/CSS supervisor(s) may be asked to assist in reaching an agreeable resolution. If no resolution can be achieved, the HSC or CSS worker may request to meet with the Regional Director who will facilitate a resolution. If resolution cannot be accomplished on the local level, the case will be referred to Central Office for resolution.

*Further sub-delegation of this role to the county case manager may happen occasionally, on a case-by-case basis and with the knowledge/approval of the DHS representative/Regional Director. Further sub-delegation of this role may happen when a formal adoptive placement is made through the AASK Program.

Authorization by CSS Director/Designee Permitted

1. Authorize releases of information to facilitate an agreed upon treatment plan.
2. Approve routine medical treatment including medication changes for a child under direct care of a physician. Notify custodial representative at next permanency planning/Foster Care Child & Family Team meeting of changes.

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3. Approve planned for psychological or psychiatric testing and evaluation as part of a child's treatment plan (send copy to custodial representative when completed).
4. Authorize a change in placement (notify custodial representative if less restrictive placement; consult with custodial representative on change if more restrictive).**
5. Authorize crisis bed or hospitalization that is part of an agreed upon crisis plan/safety plan.**
6. Manage issues around a family crisis (notify custodial representative if it involves placement outside of the home or change in placement).**
7. Approve child's involvement in local events, concerts, or family activities (not high risk).
8. Approve participation in religious education or church sponsored activities.
9. Approve Individual Education Plans.
10. Approve school sponsored educational or sports activities.
11. Approve employment activities.

**Further sub-delegation of this role may happen occasionally on a case-by-case basis and with the knowledge of the DHS representative. Further sub-delegation of this role happens when a formal adoptive placement is made through the AASK Program.

Notification of Custodial Representative:

Notification of the Custodial Representative or tribal representative upon a change in placement serves several purposes. First, it assures that the child's custodian or tribe is aware of where the child is placed; second, it can serve as notification in order to complete FRAME tasks; third, it will assure appropriate payment for eligible services; and finally, it can provide notification of special circumstances that may have medical, psychiatric, or legal consequences.

Recommendations for notification of change in placement include:

Change in Placement:

- Less restrictive (including respite home) - next perm plan*/FCCFT meeting or 30 days

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- Adoptive placement - Across regions or placement into new adoptive home - prior notification to all regional offices and counties involved and perm plan/FCCFT meeting within 30 days
- Adoptive placement - In current foster home - 1-2 days
- Safe House (notify as soon as possible so can enter in FRAME) or 3-5 days
- More restrictive foster care placement - Prior consultation required for FRAME - Notification when placement made if different than FRAME
- Detention/Attendant care - 1-2 days
- Planned Psychiatric/medical hospitalization- 2-3 days
- Unplanned psychiatric/medical hospitalization - immediate
- Child running (or picked up from run) - immediate

* Foster Care Child & Family Team

Computing Days in Care 624-05-15-35

(Revised 12/1/15 ML #3461)

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In calculating the mandatory filing deadline, the agency needs to consider the dates the child enters and leaves care, and certain nights between those dates which are not counted among the 450 nights in case.

When there is a petition to terminate parental rights, a child is not considered to be in foster care for the purposes of calculating the 450 nights on any night during which the child is:

1. On a trial home visit; or
2. Receiving services at the Youth Correctional Center pursuant to an adjudication of delinquency; or
3. Absent without leave from the place in which the child was receiving foster care.

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Entry to Foster Care 624-05-15-35-05

(Revised 12/1/15 ML #3461)

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A child is considered to have entered foster care on the earlier of:

1. The date of the first court order which finds that the child has been subjected to abuse or neglect, or
2. The date on which the child enters placement is removed from the home.

North Dakota recognizes a child is in foster care if:

1. A child meets the definition of “foster care for children” (NDCC 50-11); and
2. A current court order gives a public agency care, custody, and control.

Foster care placement and reimbursement to providers will vary depending on the best placement option for the child. ND can only issue payment to a licensed/approved provider; meaning not all foster care placements will have fiscal reimbursement. Examples of non-reimbursable foster care placements include, but are not limited to:

- A foster child is placed in an unlicensed relative home = No foster care maintenance payment will be issued for the child’s care.
- Foster children returned for a trial home visit = No foster care maintenance payment will be issued for the child’s care.

Please see Chapter 623-05 Foster Care Maintenance Rate Payment for more information

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Exit from Foster Care 624-05-15-35-10

(Revised 12/1/15 ML #3461)

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A child is considered to leave foster care when any of the following is true:

1. The court enters an order:
 - a. Denying a petition to grant care, custody, and control of the child to the agency or to the Division of Juvenile Services,
 - b. Terminating such a custody order, or
 - c. Appointing a legal guardian; or
2. The court order under which the child entered foster care ends by operation of law; or
3. The child is placed in a parental home by the court or legal custodian other than the Division of Juvenile Services and the legal custodian lacks authority to remove the child without further order of the court; or
4. The child is placed in a parental home by the legal custodian with the intent for the child to remain home. (This is not a trial home visit.)

Vacating Court Orders:

If the custodian has a valid court order providing care, custody, and control on behalf of a foster child; custodians are required to continue to have monthly visitation with children in foster care, quarterly Child & Team Meetings, and oversee the case management of the child's case plan.

If the Child & Family Team determines foster care is no longer necessary (reunification occurs, fit and willing relative is secured, etc.) and the child is discharged from foster care, the custodian shall request to vacate the court order and close the foster care program in FRAME upon receipt of the vacated order.

Closing a Foster Care Case:

Custodians are required to close the foster care program in FRAME, no later than 30 days from the date of discharge from foster care. If no other

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services are being provided by the agency, the case should be closed in FRAME.

Foster Care Verification Form: For all youth discharged from foster care at the age of 16 or older, Custodians are required to complete the foster care verification form (SFN 1612). This form may assist youth with entry into the ND Chafee IL program, apply for FAFSA, receive educational scholarships, and if they "aged out" it could provide proof for Medical Assistance until age 26.

Determination of Type of Placement 624-05-15-40

(Revised 1/12/09 ML #3170)

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Foster care is appropriate when it is used due to safety issues if the child remains at home. If the child must be placed out-of-home, a relative placement is preferable, then a foster family care home should be considered. Foster family homes require the child's ability to form some attachments and remain in the community.

Foster care case managers are frequently called upon to respond to family situations where a number of children must be removed from a home. Special consideration must be given to meeting the needs of sibling placements, with the emphasis on placing the entire sibling group in the same home if possible.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 added a requirement that states "consider giving" preference to **adult relative caregivers over non-relative caregivers** when considering placement of a child. This is consistent with the philosophy of placing a child in the "least restrictive environment."

Therapeutic family foster homes are less restrictive than group/residential care, and should be considered first.

Group homes and residential child care facilities are reserved for children who cannot maintain the close relationships required in family settings and/or are not capable of remaining in the community.

Placement Assessment Guidelines

1. Child's age.
2. Child's readiness to accept family ties (form attachments).
3. Child's readiness to participate in family life.
4. Child's capacity to attend community schools.

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5. Child's capability of living in the community.
6. Psychological assessment of the child.
7. Parent input.
8. Indian Child Welfare Act.

Case managers and supervisors are cautioned to carefully review and follow the requirements of NDDHS 624-05-05-15-50-15. Multiethnic Placement Act/Interethnic Adoption Provision (MEPA/IEP) in any foster care or adoption placement activity. MEPA/IEP compliance is a civil rights issue (Title VI).

Federal Parent Locator Services 624-05-15-41

(Revised 10/15/12 ML #3341)

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The North Dakota Department of Human Services or designee, in its provision of services under Title IV-E/IV-B of the Social Security Act, may have access to certain Child Support Enforcement Federal Parent Locator Service (FPLS) information for defined purposes. Information may only be accessed for the purpose of locating or facilitating the discovery of an individual who is a parent, alleged father, or relative of the child, as needed for IV-E/IV-B agencies to carry out their responsibilities of the IV-E/IV-B programs.

To access the FPLS information the following steps must be followed:

- The case manager identifies a need to “locate” information. (Is the information needed for a parent, alleged father, or relative of the child, and is the purpose related to carrying out the responsibilities of the IV-E/IV-B programs?)
- If the answer is “No” then FPLS information may not be requested.
- If the answer is “Yes” then the case manager completes the Request for Use of the Federal Parent Locator Service (FPLS) for Child Welfare Services ([SFN 1944](#)).
- The completed form, SFN 1944, is attached to an e-mail and sent to the Regional Supervisor.
- The Regional Supervisor reviews the request for approval.
- The Regional Supervisor sends the approved SFN 1944 to the Child Support Enforcement State Parent Locator Service (SPLS) as an email attachment. (csespls@nd.gov)

SPLS receives the request and processes it. A request that includes sufficient information is submitted to FPLS the next Friday. (Federal law prohibits the disclosure of FPLS information on an individual for whom a IV-D program has placed a Family Violence Indicator (FVI). A IV-D program places the FVI on an individual when there is reason to believe that release of information may result in physical or emotional harm. Therefore,

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although fairly uncommon, it may be that FPLS information will not be available due to the FVI.)

FPLS uses a variety of powerful sources, many of which produce information that would otherwise be confidential. Federal law and regulations prescribe what information FLPS provides in response to a request. SPLS will usually receive FPLS responses one to two weeks after submittal. However, this varies depending on the source of the information.

The SPLS worker sends the FPLS responses back to the Regional Supervisor via email. Upon receiving the FPLS responses:

- The Regional Supervisor provides the responses to the case manager by forwarding the email.

Sibling Placement Policy 624-05-15-45

(Revised 10/15/12 ML #3341)

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North Dakota policy is placement of siblings together whenever possible. When it is not possible to place siblings together, or if there is only one child in care, visitation between family members and the foster child must be determined and documented in FRAME. Visitations must be appropriate and must be sufficient to meet the needs and safety of the foster child(ren). Face-to-face contact is recommended. However, letters, phone calls, or interactive video is allowed.

Sibling placements present unique challenges to the foster care case manager. Some of these are requirements for the least restrictive placement, shortage of foster homes in some localities, licensing and placement limitations, and most importantly the needs of each child in the sibling group.

When considering a foster home with a child currently in their care, the needs of the child in care must be considered regarding placing more children in the home. How long has the child been in that particular foster home? How old is the child? How has the child adjusted? What is the plan? What is the projected length of care for the current child? What will be the impact on the foster parents and the current child if additional children are placed in that home?

Educational and medical needs of each child in the sibling group must be considered. Transportation related to meeting these needs may also be a factor.

The number of siblings is a determining factor in searching for placement resources. Keep in mind the statutory requirements (N.D.C.C. 50-11-00.1.) which states that a family foster home may have ". . . no more than four children, unless all children in foster care are related to each other by blood or marriage or unless the department* approves otherwise for the placement of siblings, in which case the limitation in this subsection does

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not apply." (NOTE: foster parent's children are not included in the limitation of four.)

Example:

A foster home is licensed for four children. They currently have two unrelated foster youth in care. It has been determined that a sibling group of three will be appropriate for this same foster home. Upon approval of the regional supervisor, the license is amended to reflect "5" children and the sibling group is placed in the foster home.

*The 'department' refers to the regional supervisor who issues the license. Licenses will need to be amended to accommodate sibling groups which exceed the limitation of four. It will be necessary to contact the CCWIPS/FAME Help Desk to enter a number greater than four in the CCWIPS/FAME licensing screen.

Case Plan 624-05-15-50**(Revised 11/1/16 ML #3481)**[View Archives](#)

Each child in foster care is required by federal law to have a case plan which must be a written document and a discrete part of the case record. The initial case plan must be developed within 30 days of entry into foster care.

The information in FRAME captures information essential to generate the individualized case plan to meet federal foster care requirements. The signed signature sheet from the Child & Family Team Meetings (FRAME generated) must be maintained as a hard copy in the child's foster care case file.

In those limited situations where the permanency planning preprinted forms (created outside of FRAME) are allowed, the created case planning document must be signed and maintained as a hard copy in the child's foster care case file.

Title IV-E of the Social Security Act, Sec. 475, specifies what must be in a foster care case plan. The child's case plan must:

1. Be a written document and made a discrete part of the case record.
2. Include a description of services offered and provided to prevent removal of the child from the home and to reunify the family.
3. A description of the type of home or institution in which the child will be placed, discussion of safety and appropriateness of the placement, how the responsible agency plans to carry out court requirements (i.e. reasonable efforts).
4. Assure the child receives safe and proper care; that services are provided to the parents, child, and foster parents in order to improve conditions in parents' home, facilitate return of child to their own safe home or the permanent placement of the child. It must include the most recent information available pertaining to child's health and education records, including a discussion of the appropriateness of the services that have been provided to the child as reflected in FRAME.

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5. Address visitations between the Foster child and his/her parent(s), and siblings in an effort to maintain family connections. The timeframes for these visits must be appropriate and meet the needs of the foster child and his/her family.
6. Include discussions of the appropriateness of the services that have been provided to the child as reflected in the data management system, FRAME.
7. Include discussions of how the plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available and in close proximity to the home of the parent(s) when the case goal is reunification and a discussion of how the placement is consistent with the best interests and special needs of the child.
8. Include details stating (if applicable) why the placement is in the best interest of the child if placement is a substantial distance from the home of the parent(s), in a different state, or outside of the Tribal service area.
 - A. If the child is placed out of the community, state, tribal service area the case manager must make arrangements to complete the monthly face-to-face visitation with the child. Courtesy case management is allowed for children placed out of state.
9. Include the most recent information available pertaining to child's health and education records, including:
 - A. Educational Information
 1. Names and addresses of child's school/s of attendance;
 2. Child's current grade;
 3. Child's school record;
 4. A specific educational stability plan providing assurances:
 - a) Each foster care placement 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 foster care placement.
 - i. School of origin decisions must reinforce the child's best interest. School of Origin: The foster child's school of origin may change depending on their foster care placement. If a foster child's placement changes, the school of origin would be considered

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the school in which the child was enrolled at the time of the placement change.

- ii. Example: The foster child was enrolled in District A when he/she entered foster care. The child was placed in a foster home of school District B when it was determined to be in the child's best interest for the child to remain in District A.

b) The foster care case manager has coordinated and communicated with the designated school district "foster care liaison", to ensure that the child remains in the school in which the child is enrolled at the time of foster care placement; or, if remaining in such school is not in the best interests of the child, assurances by the child welfare and educational agencies to provide immediate and appropriate enrollment in a new school, with request to transfer all educational records for the child.

c) Each school age child in foster care is enrolled as a student (or in the process of enrolling), or is a full-time *elementary or secondary school student; or, is incapable of attending school on a full-time basis due to the medical condition of the child. If the child is incapable of attending school on a full-time basis, regularly updated information, must be included in the case plan that supports this determination; and

B. Medical Information

- 1. Name and address of primary medical professionals;**
- 2. A record of child's immunizations;**
- 3. The child's known medical problems**
- 4. The child's medication;**

C. Any other relevant health and education information concerning the child determined to be appropriate and necessary for case planning.

(* The term "elementary or secondary school student" can include youth who are attending school in accordance with the State home school law, or

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youth who are seeking his/her GED through an independent study program in accordance with State law.)

NOTE: The above information related to education and medical must be reviewed and updated at the time of each placement of the child in foster care. Also, included is a requirement that such records be supplied to the foster parents or foster care providers.

Additional Case Planning Requirements Include:

A. Permanency Goal:

1. If the child's permanency plan/goal is adoption or placement in another permanent home, federal law (ASFA) requires the plan must include:
 - a. Documentation of the steps the agency is taking to find an adoptive family or other planned permanent living arrangement for the child, to place the child with an adoptive family, a fit and willing relative, a legal guardian, or in another planned permanent living arrangement, and to finalize a legal guardianship.
 - b. At a minimum such documentation must include child specific recruitment efforts such as the use of state, regional, and national adoption exchanges including electronic exchange systems to facilitate orderly and timely in-State and interstate placements.
2. If the child's permanency plan/goal is another planned permanent living arrangement (APPLA) the case plan must include:
 - a. Documentation of intensive, ongoing, and unsuccessful efforts made to return the child home or secure placement for the child with a fit and willing relative, a legal guardian, or an adoptive parent, including the utilization of search technology to find biological family members.
 - b. Documentation ensuring the foster care provider is following the reasonable and prudent parent standard.

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- c. Documentation that the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities.

B. Age Specific Case Plan Requirements:

1. A foster child who has attained 14 years of age, must be given the opportunity to:
 - a. Participate in the development and revision of their individualized permanency plan, which must include:
 - i. A written description of programs and services to help the child prepare for their transition to a successful adulthood. The case manager must assist the child in developing goals to meet their independent living needs.
 - ii. A signed copy of the ND Foster Youth Rights (DN 402) (see 624-05-15-50-49).
 - b. Personally invite two additional members to join the Child & Family Team, chosen by the child, who are not foster parents of, or a case manager for, the child.
 - i. Custodians may reject an individual selected by a child to be a member of the Child & Family Team at any time if there is good cause to believe that the individual would not act in the best interest of the child.
 - ii. One individual selected by the child to be a member of the child's team may be designated to be the child's advisor and, as necessary, advocate, with respect to the application of the reasonable and prudent parent standard to the child.
2. A foster child who has attained 16 years of age and has been identified as "likely to age out of foster care"; will be considered a Chafee Independent Living Program "Priority 1" participant. Children age 16+ are required to be referred to the Chafee Independent Living Program (SFN 1613) for assistance to the case manager in assessing and addressing

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the needs for a child's transition to a successful adulthood.

3. A foster child who is nearing 18 years of age must have as part of their case plan:
 - a. A developed individualized transition plan (SFN 494) (see 624-05-15-10)
 - b. A documented review of a health care directive (see 624-05-15-50-46).

Notice of Child Proceedings

Foster parents, pre-adoptive parents, or relatives providing care for the child must be provided with written notice of and a right to be heard in any proceeding held with respect to the child during the time the child is in the care of such foster parent, pre-adoptive parent or relative caregiver. Email or letter notice constitutes written notice, if there is documentation of the letter or email on file.

For assistance in generating the child's foster care case plan on FRAME, please refer to the FRAME user manual.

Abbreviated Case Plan

Every child in foster care is required to have an approved case plan which is a written document that is made a discrete part of the case record. For child in foster care on a short-term basis (less than 30 days), an abbreviated case plan is allowable. An abbreviated case plan must contain at least one completed factor, with goals and tasks, in FRAME's family assessment instrument.

All case plans must take into account the child's safety, permanence, and well-being. An approved case plan must be in FRAME before the foster care case can be closed.

NOTE: High Risk Youth (at risk of harming self or others)

Great emphasis is placed on youth in foster care receiving safe and proper care. Each child's case plan must include strategies for dealing with any behaviors or emotional needs which place him/her in the high risk category. Upon identification of such behaviors or emotional needs, a

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<p>safety plan must be developed immediately for implementation. A safety plan must be developed and distributed to all appropriate parties, specifically including the foster parents.</p>

Every child in foster care will have an individualized case plan developed and reviewed at least quarterly during the case review (Child & Family Team Meeting). See 624-05-15-50-03.

Case Reviews 624-05-15-50-03

(New 12/1/15 ML #3461)

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Detailed in the Title IV-E of the Social Security Act, Sec. 475(5), the case review system means a procedure for assuring that:

1. Each child has a case plan (FRAME) designed to achieve placement in a safe setting that is the least restrictive (most family like) and most appropriate setting available and in close proximity to the parents' home, consistent with the best interest and special needs of the child, which:
 - a. If the child has been placed in a foster family home or child-care institution a substantial distance from the home of the parents of the child, or in a State different from the State in which such home is located, sets forth the reasons why such placement is in the best interests of the child, and
 - b. If the child has been placed in foster care outside the State in which the home of the parents of the child is located, requires that, a case manager (from either State) visit such child in the home or institution where the child is placed, and every month, submit a report on the visit to the State agency (Children and Family Service Division).
2. The periodic review (North Dakota reviews are conducted quarterly and referred to as the Child & Family Team Meeting) determines the safety of the child, the continuing necessity for and appropriateness of the placement, the extent of compliance with the case plan, and the extent of progress which has been made toward alleviating the causes which necessitated the foster care placement, and projects a likely date when the child may be returned to and safety maintained in the home or placed for adoption or legal guardianship.
3. The periodic review will also determine and assess the steps the agency is taking to ensure the child's foster family or child care institution is following the reasonable and prudent parent standard and to ascertain whether the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities to achieve normalcy.

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Foster parents, pre-adoptive parents, or relatives providing care for the child must be provided with notice of and a right to be heard in any review (Child & Family Team meeting) or hearing with respect to the child.

The FRAME case management system is designed to capture the information required to generate create the Child & Family Team Meeting Report. Hard copies of the FRAME information can be generated and copies made for distribution. Please refer to the FRAME User Manual for technical assistance.

In addition to the requirements outlined above, federal law requires the case plan to also include the following items:

1. The goal(s) of placement. Goals must be time framed and detailed. A child's permanency goal must be reviewed at each Child & Family Team meeting.
2. Identification of the specific circumstances which necessitated and cause the separation of the child from the family. Refer to the Agency View and Family View of Situation in the FRAME Case Plan.
3. Identification of the specific services to be provided by the agency in alleviating or helping to alleviate the conditions which led to the placements; project the date(s) by which each of these goals is to be accomplished. Refer to the Family Risk Assessment (FRA) located with the FRAME.
4. Identification of the specific actions to be taken by the parents in correcting the conditions which led to the placement and the date by which each of these activities is to be accomplished. Refer to the Goals and Tasks sections of the Family Risk Assessment (FRA) within FRAME.
5. Identification of the specific actions, when appropriate, to be taken by the child in correcting the conditions which led to placement and the date by which each of these activities is to be accomplished. Refer to the Goals and Tasks section of the Family Risk Assessment (FRA) within FRAME.
6. Identification of the specific services to be provided by the foster parents to the child. Refer to the Goals and Tasks section of the Family Risk Assessment (FRA) within FRAME.
7. Anticipated length of placement stated in months.
8. Written plan for visitation stating frequency, location and participation.

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9. Specific information addressing the health, safety, and well-being of the child. Refer to the Life Domains and Safety Plan in the Family Risk Assessment (FRA) within FRAME.

This information is included in the child's case plan on FRAME. Refer to the FRAME user information for technical assistance.

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Preparation of Child and Family 624-05-15-50-05 (Revised 2/10/07 ML #3053)

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Preparation of the child and their family is crucial;

1. To decrease the damage done to child and family by the actual separation of the family.
2. To increase the success of achieving changes identified in placement and planning and to assist with reunification.

School District Notification 624-05-15-50-07

(NEW 11/1/16 ML #3481)

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NDCC 15.1-29-14 establishes school district responsibility for the payment of tuition, excess cost and, in the instance of handicapped children, excess educational costs related to special education. The law requires that foster care agencies placing children notify the interested school district of such placements to assure timely and orderly assumption of financial responsibility by the appropriate school districts.

The foster care case manager shall provide written or electronic notice regarding an initial placement and all subsequent placements to the superintendent of the student's school district of residence and to the superintendent of the admitting district:

1. Within five working days after a placement is made under court order;
2. Within five working days after an emergency placement is made; or
3. At least ten working days prior to any other placement.

In addition, the foster care case manager shall communicate with the school district's identified "foster care liaison" to ensure the opportunity to participate in permanency planning for the foster child attending school.

Online System Notification

Notifications (SFN 18119) are required when a child

1. Enters foster care (Initial Notification),
2. Has a change in placement resulting in a change of educator (Change in Educator),
3. Attends school annually (Annual Residency Notification), and
 - a. Must be completed each year while in foster care by September 15th - once established, the resident district remains unchanged until the following September 15th.
4. Discharged from foster care.

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The foster care case manager will see four boxes at the top of the form. Completing this form will update all parties and will keep the Educating District, Resident District and NDDPI all informed of the whereabouts of the foster child. Note: If a child does have a change in educator mid-year, the financially responsible district will remain the same (entire school year) and will not change until the following September 15th during the Annual Residency Determination allowed timeframe.

Online Procedure

Department of Public Instructions' (DPI) form, SFN 18119, will serve as the official document in all instances for the notification required by NDCC 15.1-29. Electronic submission is the preferred method of submission. The electronic notification system can be accessed at:
<https://secure.apps.nd.gov/dpi/ndteach/sclogin.aspx>.

This application requires workers to establish a ND State login ID, and link this ID to the placing agency. To determine if you have a current login, see link entitled, "Not Sure?" Also, Login ID users who have forgotten their ID's, or have forgotten their passwords, will have a link on the sign-in page which will provide assistance. If you do not have access to the site, you will need to create a login ID. This can be done by clicking on the link labeled "Register Now". You will be asked to provide your name, company name, address, email, and other security questions which help identify the user.

Training for the site can be accessed at
<http://www.dpi.state.nd.us/speced/>.

IMPORTANT: After you have created a login ID, current entity users for your agency, or school, will need to add your user login to the current list of entity users. DPI Administrators may also add your user login ID for access. This step must be completed before you may gain access to the notification and contract system.

Questions related to the notification process can be answered by clicking the question mark- help icon on the website or by calling ND Department of Public Instruction at (701) 328-2175 or (701) 328-1678.

Health Tracks 624-05-15-50-08**(NEW 11/1/16 ML #3481)**[View Archives](#)

Federal law specifies that all persons under 21 years of age who are eligible for medical services through Title XIX, including children in foster care, must be informed of Health Tracks, designed to detect health problems at an early age. Consent must be obtained for Health Tracks screening, diagnosis, and treatment. The Health Tracks "Informing & Referral" form must be signed by the appropriate individuals to show evidence that Health Tracks services were offered.

A Health Track screening must be completed within 30 days of entry into foster care and completed at least annually. The screening includes developmental and mental health assessments, as well as assessments for physical, dental and optical health needs. The professional providing the Health Track screening will assist the child's case manager in making referrals if additional services are needed. A copy of the Health Tracks screening must be placed in the child's case file and dates of the screening must be entered into the data management system.

The following questions should be asked when considering whether Health Tracks screening is appropriate.

1. Has the child had a complete physical exam within the past year?
2. Has the child had a dental exam with the past year?
3. Has the child had a vision test within the past year?
4. Has the child received a hearing test within the past year?
5. Are the child's immunizations up-to-date?

If any of the above questions are answered "no," it is recommended that screening services be obtained. The county director or agency representative responsible for the child should determine the appropriateness of a Health Tracks screening depending upon individual circumstance and the length of placement.

**Steps Recommended in Preparation for Placement
624-05-15-50-10**

(Revised 2/10/07 ML #3053)

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1. Discuss all aspects of the placement plan with parents, child and foster parents.
2. Tell family members about the home where the child will be -- answer their questions.
3. Have at least one pre-placement visit in the new home when appropriate.
4. Share the initial case plan with the foster parents.
5. Encourage the family to pack the child's belongings, encourage them to include special toys and pictures to help the child feel at home.
6. Be clear about how the child and his family can keep in touch with each other, directly or through the agency.

Interstate Compact on the Placement of Foster Children 624-05-15-50-12

(NEW 11/1/16 ML#3481)

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Custodians who identify placement options outside of North Dakota must follow Interstate Compact on the Placement of Children (ICPC) policy found in Manual Chapter 619-01. Questions regarding the ICPC paperwork or the required approval can be directed to Children & Family Services ICPC Administrator. ICPC approval must occur before the child leaves the state of ND.

Family Foster Home Placements: If a ND foster family is moving out of the state and the plan is for the ND foster child(ren) to move with them, the case manager must:

1. Follow ICPC policy
2. Discuss payment with the family noting that once the family leaves the state of ND, their foster care license terminates. Foster care funds cannot be authorized on behalf of the children's needs until the provider becomes licensed in their new state of residence.
3. Inform and provide the family with contact information to inquire about becoming licensed in their state of residence.

Facility Placements: Prior to a ND foster child being placed in a group home or residential child care facility outside of North Dakota, the case manager must:

1. Follow ICPC policy
2. Complete and receive denials from all appropriate in-state facilities. Foster youth who require residential care must be referred to all appropriate facilities within ND before consideration will be given to out-of-state facilities.

a) Out-of-state referrals can be made when it has been determined that the child's needs cannot be met within the state of North Dakota.

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b) Copies of denial letters must be included in all ICPC referral packets. If any denial letter is not available when an ICPC referral is submitted to CFS, a notation in the cover letter must identify the referral facility and the reason the child cannot be served in the facility.

c) If a youth is being referred to an out-of-state PRTF, Medical Services must approve the out-of-state referral in partnership with ND ICPC. Concurrent referrals through Medical Services and ICPC are suggested to expedite placement decisions.

Payment Rates: Foster care funds cannot be used to reimburse an unlicensed provider or a placement that does not meet ICPC compliance/approval.

1. When North Dakota is the receiving state in an Interstate Compact placement, the sending agency must reimburse the ND provider at a rate consistent with North Dakota's foster care daily maintenance rate.
2. When North Dakota is placing (sending) a child in another state through Interstate Compact, North Dakota will reimburse the out of state provider at the receiving state's daily maintenance rate.

**Multiethnic Placement Act/Interethnic Adoption Provision
(MEPA-IEP) 624-05-15-50-15**

(Revised 2/10/07 ML #3053)

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Interethnic Adoption Provisions of the Small Business Job Protection Act of 1996, amended the Multiethnic Placement Act of 1994 (MEPA), which prohibits delaying or denying the placement of a child for adoption or foster care on the basis of race, color, or national origin of the adoptive or foster parent, or the child involved. The language of the 1996 provision is as follows:

A person or government that is involved in adoption or foster care placements may not –

1. deny to any individual the opportunity to become an adoptive or a foster parent, on the basis of the race, color, or national origin of the individual, or of the child involved; or
2. delay or deny the placement of a child for adoption or into foster care on the basis of the race, color, or national origin of the adoptive or foster parent, or the child, involved.

For purposes of MEPA – IEP, “placement decision” means the decision to place, or to delay or deny the placement of, a child in a foster care or adoptive home, and includes the decision of the agency or entity involved to seek the termination of birth parent rights or otherwise make a child legally available for adoptive placement.

The purpose of MEPA/IEP is to promote the best interest of children by:

1. Decreasing the length of time that children wait to be adopted.
2. Preventing discrimination in the placement of children on the basis of race, color, or national origin; and
3. Facilitating the identification and recruitment of foster and adoptive families that can meet children’s needs.

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MEPA/IEP also provides for diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed. The diligent recruitment requirement in no way mitigates the prohibition on denial or delay of placement based on race, color, or national origin.

The 1996 changes to MEPA clarified that even where a denial is not based on a categorical consideration, which is prohibited, other actions that delay or deny placements on the basis of race, color, or national origin are prohibited. The changes made in the law removed areas of potential misinterpretation and strengthened enforcement while continuing to emphasize the importance of removing barriers to the placement of children. Any decision to consider the use of race as a necessary element of a placement decision must be based on the best interests of the individual child (good social work practice).

In summary, HHS cites focus on four critical elements:

1. Delays in placement of children who need adoptive or foster homes are not to be tolerated, nor are denials based on any prohibited or otherwise inappropriate consideration;
2. Discrimination is not to be tolerated, whether it is directed toward adults who wish to serve as foster or adoptive parents, toward children who need safe and appropriate homes, or toward communities or populations which may heretofore have been under-utilized as a resource for placing children;
3. Active, diligent, and lawful recruitment of potential foster and adoptive parents of all backgrounds is both a legal requirement and an important tool for meeting the demands of good practice; and
4. The operative standard in foster care or adoptive placements has been and continues to be “the best interests of the child.” Nevertheless, as noted above, any consideration of race, color, or national origin in foster or adoptive placements must be narrowly tailored to advance the child’s best interests and must be made as an individualized determination of each child’s needs and in light of a specific prospective adoptive or foster care parent’s capacity to care for that child.

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MEPA/IEP compliance is a civil rights issue (Title VI). The Office for Civil Rights receives and investigates complaints related to MEPA-IEP, and conducts independent reviews to test compliance within States.

Administration for Children and Families (ACF) will also conduct reviews focusing on or including MEPA-IEP compliance. Fiscal sanctions will be imposed on states for violations.

Entities subject to MEPA-IEP:

MEPA-IEP applies to any state or other entity that receives funds from the federal government and is involved in some aspect of adoptive or foster care placements.

ICWA:

MEPA-IEP has no effect on the application of The Indian Child Welfare Act (ICWA).

The Indian Child Welfare Act or ICWA promotes the well-being of American Indian children by keeping them connected to their families, tribes, and cultural heritage. It covers tribal children from all American Indian and Alaska Native tribes listed in the Federal Register. ICWA supports Indian tribal authority over their members and the well-being of Indian children and families.

Under ICWA, a child is Indian if he or she is a member of a federally recognized tribe or if he or she is eligible for tribal membership and is the biological child of a tribal member.

ICWA requires that every effort be made to try and keep families together. If removal is necessary, "**active efforts**" must be made for reunification. This means that everything possible must be done to help the family resolve the problems that led to placement. If an Indian child is removed and placed in foster care or a pre-adoptive placement, ICWA requires placement to be in the least restrictive, most family-like setting which the child's special needs, if any, may be met. The child shall be placed within reasonable proximity to his or her home and preference shall be given, absent good cause to the contrary, to a placement with:

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FOSTER CARE PLACEMENT:

1. A member of the child's extended family.
2. A foster home licensed, approved, or specified by the tribe.
3. An American Indian foster home licensed or approved by an authorized non-Indian licensing authority.
4. An institution approved by a tribe or operated by an American Indian organization that has a program suitable to meet the child's needs.

ADOPTION PLACEMENT:

When placing an American Indian child for adoption, preference shall be given, absent good cause to the contrary, to a placement with:

1. A member of the child's extended family.
2. Other members of the child's tribe.
3. Other American Indian family, before placing the child in a non-Indian home.

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Relative Care 624-05-15-50-20

(Revised 2/10/07 ML #3053)

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Children must always be placed in the least restrictive environment; therefore, first consideration should be given to a relative home.

Federal law requires looking to relatives as a placement resource.

Federal law requires that the State shall consider giving preference to an adult relative over a non-related caregiver when determining a placement for a child, provided that the relative caregiver meets all relevant State child protection standards (1997 amendment to Section 471 of Title IV-E of the Social Security Act). In addition, Sec. 475 [U.S.C. 675], Social Security Act (11-19-97) requires:

(1) the "case plan" requires a discussion of the "safety and appropriateness of the placement . . .," and that the child "receives safe and proper care."

At (I)(E) of the above referenced section is the consideration for a "fit and willing relative."

N.D.C.C. 27-20. Uniform Juvenile Court Act:

10. "fit and willing relative or other appropriate individual" means a relative or other individual who has been determined, after consideration of an assessment that includes a criminal history record investigation under chapter 50-11.3, to be a qualified person under chapter 30.1-27, and who consents in writing to act as a legal guardian.

Further, the statute defines "relative":

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15. "Relative" means:

- a. The child's grandparents, great-grandparent, sibling, half-sibling, aunt, great-aunt, uncle, great-uncle, nephew, niece, or first cousin.
- b. An individual with a relationship to the child, derived through a current or former spouse of the child's parent, similar to a relationship described in subdivision a;
- c. An individual recognized in the child's community as having a relationship with the child similar to a relationship described in subdivision a; or
- d. The child's stepparent.

The North Dakota statute on public welfare also requires that we explore relative options for any child who is unable to return home due to safety concerns.

N.D.C.C. 50-06-23. Placement of Children - Least Restrictive Care.

N.D.C.C. 50-06-23. Placement of children - Least restrictive care. The department and county social service boards shall thoroughly explore the option of kinship care when a child is unable to return home due to safety concerns. Absent kinship options, the department and county social service boards shall provide permanency options that are in the least restrictive care and near the family's home as required by the federal Adoption and Safe Family Act of 1997 [Pub. L. 105-89, III Stat. 2115; 42 U.S.C. 671].

North Dakota foster care policy recommends concurrent planning as early as possible after the child has entered care. Therefore, exploration of the need for a relative home should be initiated as soon as possible.

In order to comply with the "fit and willing relative" mandate, a comprehensive search must be conducted. This process must be thorough, and can be accomplished through discussion with the parents, child, public records, and use of the internet search available through the regional supervisor. That process is as follows:

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The child's case manager collects and e-mails pertinent information regarding the family to the regional supervisor. The information should be as complete as possible to enable a comprehensive search.

The following is a sample of the type of information required.

Child: Name, date of birth, social security number, address or last known address.

Parents: Name, date of birth, Social Security Number, address or last known address.

Father: Name, including middle name if known, AKA, date of birth, social security number, occupation, last known address.

Mother: Name, including middle & maiden name if known, AKA, date of birth, social security number, occupation, last known address.

Add to this anything significant you determine may assist in locating relatives.

The regional supervisor e-mails the information to the search provider, and provides a copy of the request to Children and Family Services Division (CFS) for payment purposes. The regional supervisor e-mails completed search information to the case manager.

The case manager must document the results of the search (relatives considered, dates of contact, result of search, safety concerns, etc.). Also, requests and outcomes need documentation for purposes of determining and reporting on family placements or connections made for the child. Keep in mind the safety and appropriateness of the home, also documenting any issues that may rule out a potential relative home.

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The search should be initiated as early in the case as possible, but no later than when it is determined that the child cannot return home. Results from the relative search can be available within an hour.

Regional supervisors may also request a criminal background check from the search provider.

Summary of responsibilities for the relative search and documentation:

Case Manager:

- Collects relevant information and e-mails it to regional supervisor in a timely manner.
- Continues to gather any further information regarding relatives.
- Receives completed search information from the regional supervisor.
- Documents all search information in the child's case plan, including safety concerns or other issues that rule out certain relatives.

Regional Supervisor:

- Receives the child specific relative information from the case manager.
- Forwards the child's relative information to the internet search provider in a timely manner.
- Sends a copy of the search request to Children & Family Services Division for payment purposes.
- Receives the child's relative search information and transmits it to the case manager in a timely manner.

Children and Family Services:

- Receives copy of child's relative search request from Regional Supervisor.
- Makes payment to the search provider upon completion of the search and billing received by the provider.

Relative Search 624-05-15-50-22**(Revised 10/15/12 ML #3341)**[View Archives](#)

If it is apparent that the child will not be returning home within 30 days, a relative search must be initiated. The relative search can be conducted through discussion with the family, child, or the use of US Search. Costs associated with US Search are paid for by Children & Family Services. The results, or status of the search, must be included in the initial case plan. Searching for and contacting relatives is an ongoing process. Case managers should be contacting relative resources to explore their ability to either be a placement resource or other ways the relative could provide connections for the child/children through the child's stay in foster care.

If the location of the absent parent is unknown, the results, or the status of a search through the Federal Parent Locator services (FPLS*) – Child Support must be also included in the initial case plan (*See 624-05-15-41 for FPLS process.) If appropriate, efforts to locate and/or contact the absent parent should be made initially within 30 days of removal, prior to key decision points in the life of a case, and no less than once every three months.

A search for an absent parent does not have to be conducted in situations where the Child Support (good cause) claim has been determined. (Claim is based on a fear of serious physical or emotional harm, either to the child or to the custodian, which in turn could be expected to reduce his or her capacity to care for the child.) A copy of the county social service board's final decision that 'good cause' does exist and the basis for the findings must be included with the relative search documentation. The county social service board is required to review, not less than every 6 months, cases in which 'good cause' was previously found to exist. If it is found that circumstances have changed so that 'good cause' no longer exists, a search for the absent parent must be made immediately. Search efforts must be documented on the Absent Parent/Relative Search Record Form (SFN 772) Permanency Planning Committee Initial Report, or Permanency Planning Committee Progress report. It is recommended, for consistency, that the

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case file should contain a separate tab entitled "Absent Parent/Relative Search record," and that the form is placed behind this tab.

US SEARCH PROCESS:

The child's case manager collects and e-mails pertinent information regarding the family to the regional supervisor. The information should be as complete as possible to enable a comprehensive search.

The following is a sample of the type of information required.

Child: Name, date of birth, social security number, address or last known address.

Parents: Name, date of birth, social security number, address or last known address.

Father: Name, including middle name if known, AKA, date of birth, social security number, occupation, last known address.

Mother: Name, including middle & maiden name if known, AKA, date of birth, social security number, occupation, last known address.

Add to this anything significant you determine may assist in locating relatives.

The regional supervisor e-mails the information to the search provider, and provides a copy of the request to Children and Family Services Division (CFS) for payment purposes. The regional supervisor e-mails completed search information to the case manager.

The case manager must document the results of the search (relatives considered, dates of contact, results of search, safety concerns, etc.). Also, requests and outcomes need documentation for purposes of determining and reporting on family placements or connections made for the child.

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Keep in mind the safety and appropriateness of the home, also documenting any issues that may rule out a potential relative home.

The search should be initiated as early in the case as possible, but no later than when it is determined that the child cannot return home. Results from the relative search can be available within an hour.

Regional supervisors may also request a criminal background check from the search provider.

Summary of responsibilities for the relative search and documentation:

Case Manager:

- Collects relevant information and e-mails it to regional supervisor in a timely manner.
- Continues to gather any further information regarding relatives.
- Receives completed search information from the regional supervisor.
- Documents all search information in the child's case plan, including safety concerns or other issues that rule out certain relatives.

Regional Supervisor:

- Receives the child specific relative information from the case manager.
- Forwards the child's relative information to the internet search provider in a timely manner.
- Sends a copy of the search request to Children & Family Services Division for payment purposes.
- Receives the child's relative search information and transmits it to the case manager in a timely manner.

Children and Family Services:

- Receives copy of child's relative search request from Regional Supervisor.
- Makes payment to the search provider upon completion of the search and billing received by the provider.

Requirement for Notice to Relatives to Child's Removal 624-05-15-50-23

(Revised 12/1/15 ML #3461)

[View Archives](#)

Agencies are required to exercise due diligence to identify and provide notice to the following relatives: parents, parents of a sibling of the child entering foster care who have legal custody of the sibling, all adult grandparents, and any other adult suggested by the parents, subject to exceptions due to family or domestic violence, within 30 days of child's removal.

For the purposes of this section, "sibling of the child entering foster care" means:

- a. A brother or sister who has at least one biological or adoptive parent in common;
- b. A fictive brother or sister with a significant bond as identified by the child or parent; or
- c. A child that would have been considered a sibling but for the termination or other disruption of parental rights, including a death of a parent.

The relatives must also be advised of all available options to become a placement resource for the child. The notice shall:

- a. Specify that the child has been or is being removed from the custody of the parent, or parents of the child;
- b. Explains the options the relative has under federal, state, and local law to participate in the care and placement of the child, including any options that may be lost by failing to respond to the notice;
- c. Describes the requirements and standards to become a foster family home and the additional services and supports that are available for children placed in that home; and
- d. Describes how the relative of the child may enter into an agreement with the department to receive a subsidized guardianship payment.

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The agency must provide this notice in a manner that reasonably ensures the relative has understood the notice. This could mean providing notice in a language the relative is fluent in. Or, the family's case manager may have to go over the written notice in person with the relative. If an individual has a visual impairment, the notice may need to be written using large print or Braille.

It is not required to provide notice to relatives that are identified beyond 30 days of the child's removal. However, agencies can consider, on a case-by-case basis, whether notification would be appropriate.

If a relative fails to respond to the initial notice, the relative may not have the opportunity to participate in the care and placement of the child.

A notification template, which outlines the relatives options to become a placement resource for the child, is available for case managers to use.

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TANF Kinship Care Program 624-05-15-50-25 **(Revised 2/10/07 ML #3053)**

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The TANF Kinship Care program is available for kin/relatives of the 5th Degree which includes a child only TANF payment and supportive services (Refer to IM #4960 dated February 2, 2005 or contact Economic Assistance Division for further information).

Case Management Services During Placement 624-05-15-50-30

(Revised 10/15/12 ML #3341)

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The case manager supervising the placement of a child in foster care must have or arrange regular contacts with the foster child, foster child's parent(s), and foster parents, and must coordinate services (including periodic medical examinations) from other resources for the foster child. The case manager must be cognizant of the Adoption and Safe Families Act of 1997 (Implemented in North Dakota 8-1-99) and of the new timeframe requirements for foster care.

The content of the case manager/child or case manager/parent(s) visit must relate to the child and family team plan developed and the circumstances, issues, and relationships apparent at the time of the child/case manager or case manager/parent(s) visit.

Visit frequency must be discussed within the review process. Frequency and conditions must be defined in the child's case plan. **The following are North Dakota's minimal standards for visitation:**

1. Out-of-State Placements - relative parent, family foster care, residential

Federal law requires that a case manager (representative from either state) must visit the child in the foster care setting on a monthly basis. How visitation and reporting will be accomplished, as well as the possible costs to the custodian, must be carefully considered whenever out-of-state placement is being considered. Visitation standards are the same as those outlined for foster youth placed within North Dakota.

2. Foster Youth Placed in North Dakota Family Foster Homes
 - a. Personal contact once a month is required with the children in family foster care in order to carry out the agency's basic

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obligation toward the child and ensure that the child achieves permanency as quickly as possible. The majority of these visits must occur in the residence of the child. The home where the child is residing includes foster home, child care institution, or the home from which the child was removed if the child is on a trial home visit. Case manager visits can be conducted by any case manager within the custodial agency. Whenever possible, best practice dictates visitation should occur between the child and the child's case manager.

These face-to-face visits will focus on the child's safety needs, issues, and conditions needed for reunification or permanency, and well-being of the youth and his/her family. Using polycom or similar interactive system will not meet the requirements of the 'face-to-face' visit.

- b. When visiting the foster child face-to-face, once a month, weekly supplemental telephone contacts are recommended.
3. Group/RCCF Foster Care/Psychiatric Residential Treatment Facilities (PRTF)
- a. Personal contact once a month is required in order to carry out the agency's basic obligation toward the child. More frequent visits may be indicated immediately after placement or if problems are being noticed in the placement.
 - b. When visiting a foster child face-to-face on a monthly basis, telephone contact or IVN (polycom) with the child on a weekly basis is recommended. Using polycom or similar interactive system will not meet the requirements of the 'face-to-face' visit.
 - c. The content of these visits should focus on the child's safety needs, issues, and youth and his/her family.
4. Special Circumstances
- a. On occasions when a face-to-face visit is not possible between the child's case manager, or with a case manager within the custodial agency, it is possible for another case manager to visit the child and meet this requirement. The case manager can be anyone that the administrative county has assigned or

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contracted visitation responsibilities. The designee must have information regarding the child's ongoing case plan, the child's parents or legal guardians, and the child, including any special needs of the child. The staff person making the contact is responsible for assessing the safety and well-being of the child. Documentation of the visit must be provided to the child's case manager to be included in the child's case file.

In all cases, the case manager visitation frequency should be discussed at permanency planning reviews/Foster Care Child & Family Team meetings and written into the case plan/FAME.

Document the agency involvement and time frames on the permanency planning initial and on-going progress reports in the "tasks" section, and time frame the activity. (It is also incorporated in the SFN 902 and SFN 903 for those limited situations done on hard copy.) Refer also to the FAME - Case Activity Log.

Case managers must enter one of the following codes in FAME, under the Case Activity Log, following each visit with the child:

FF Face-to-face contact not in child's residence

FR Face-to-face in child's residence

Case Manager Visitation with Foster Child

Section 422(b)(17) or Section 424(e)(2) of the Social Security Act requires that all youth in a foster care placement must be visited each and every full month that they are in care, with majority of those visits taking place in the youth's place of residence.

During each monthly visit, the youth's **safety, well-being,** and **permanence** should be assessed and addressed by the worker. An entry should be made into the youth's case activity log outlining progress or concerns related to the three main areas noted above. This face-to-face visitation and whether or not the visitation took place in the youth's residence should also be entered into the FAME system.

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Key Elements of Visitation: Each visit should be tailored to address current issues that the youth is experiencing. The following are some examples of subjects that could be covered in each of the three noted areas that must be addressed during every visit. This list is given only as a brief outline and is in no way meant to exhaust the topics that could/should be covered during the visitation:

Safety Examples:

- Does the youth feel safe in the placement? Why or why not?
- Does the youth have resources whom they can contact if they are not feeling safe? Does the youth know how to contact them, i.e., case manager, parent, trusted adult?
- Is the living environment free from hazard and is it habitable?

Permanence Examples:

- Does the youth know the goals of their treatment plan/placement?
- Can youth describe permanency goals and how to accomplish them?
- Is there contact via telephone, e-mail, Polycom, letters, visitations, etc., with family and other important people in their life?

Well-Being Examples:

- Has there been illness or injury since the last contact?
- Is the youth receiving adequate nutrition, sleep, space, privacy, therapy, recreational time, and educational services/activities?
- Has there been a change in emotional state since last contact?
- Have there been any changes in medications since last contact?

Case Manager Visitation With Parents

The case manager must meet with parents at least monthly.

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Acceptable levels of contact: face-to-face, telephone, or written. Contact should always be at the highest possible level. If it is possible to have face-to-face contact with parents, than it is required. The frequency and quality of the visits between the case manager and the parents must be sufficient to address issues pertaining to the safety, permanency, and well-being of the children and promote achievement of case goals (i.e. focus on issues pertinent to case planning, service delivery, and goal achievement). The length of the visits should be sufficient duration to address key issues with the child(ren) and in a location conducive to open and honest conversation. The documentation of the frequency and quality of visits with parents must be entered into FRAME monthly.

“Parents” refer to the primary caregivers with whom the children live and noncustodial parent who is involved or wishes to be involved in the child’s life. This includes the children’s biological parents, primary caregivers (if other than biological parents), and adoptive parents if the adoption has been finalized.

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Clothing Inventory 624-05-15-50-31 (NEW 11/1/16 ML#3481)

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The foster care case manager is responsible to identify the clothing needs of the child upon entry into foster care and ongoing thereafter. Clothing purchased specifically for the child will become the property of the child and must accompany the child upon leaving their foster care placement.

An inventory must be conducted of a child's clothing prior to any placement or change in placement in foster care. A copy of the most recent inventory should be sent with the child at the time of initial placement as well as all other subsequent placements. A copy shall be kept by the agency making the placement, as well as the financial county.

For clothing reimbursement rates refer to Foster Care Maintenance Payment policy 623-05-30-10.

Human Trafficking 624-05-15-50-32

(New 12/1/15 ML #3461)

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Custodial case managers must identify, report, determine services for and document the case activity involving any foster child who has been or is suspected to have been a victim of human trafficking.

Human Trafficking is defined in NDCC 12.1-41 as, “the commission of an offense created by sections 12.1-41-02 through 12.1-41-06; which include trafficking an individual, forced labor, sexual servitude, patronizing a victim of sexual servitude, and patronizing a minor for commercial sexual activity.

ND State law recognizes “human trafficking” as including many elements of exploitation. PL 113-183 (Preventing Sex Trafficking and Strengthening Families Act) specifies the identification of sex trafficking victims. Any minor under the age of 18 engaged in a commercial sex act is a victim of sex trafficking. Child sex trafficking is not limited to prostitution, but can include stripping, pornography, live-sex shows, or the exchange of sex acts for necessities such as food, shelter, and/or clothing. Under U.S. federal law, a victim of sex trafficking is a person who is recruited, harbored, transported, provided for, or obtained for the purpose of a commercial sex act. A victim of severe sex trafficking is one who is induced by force, fraud, or coercion, or is under the age of 18 to perform a commercial sex act (Trafficking Victims Protection Act of 2000 (TVPA)).

Identifying Victims of Human Trafficking

While the suspected trafficker may not be a “person responsible for a child’s welfare” under North Dakota law, the reported victim, however must be considered an alleged deprived child(NDCC 12.1-41-12(4)). Please see NDCC 12.1-41-12 for information on immunity of minor.

Children who are at the greatest risk of human trafficking may have one or more common risk factors that should be taken into consideration, including, but not limited to: children for whom family connections are

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limited or severed; children in foster care, group homes, and juvenile justice custody; children with a history of physical or sexual abuse or neglect; runaway status; LGBTQ status; prior involvement with law enforcement; and those who have dropped out of high school.

Indicators of Human Trafficking

Sub-Culture

- Items purchased by traffickers, such as clothing, jewelry, gifts, etc.
- Cell phone usage.
- Gang signals.
- Specific language and terminology.
- Information about locations which children used as housing.
- Names and nicknames of people with whom the child is familiar.
- Tattoos which are sometimes used to establish control or ownership; particularly tattoos around the neck and wrist.

Living Conditions

- The child works where they live.
- The child's personal freedom of movement is restricted.
- The child's address has changed frequently.
- The child cannot identify their home address.
- The child possesses hotel keys.
- The child has frequently run away from home.
- The child lives with other unrelated youths and unrelated adults.
- The child receives gifts or clothing from unrelated youths or adults.
- The child returns to an unsafe living situation despite intervention.

School Experiences

- The child has significant, unexplained, gaps in school attendance.
- The child displays severe exhaustion during the school day.
- The child does not participate or show interest in school activities.
- The child is not enrolled in school.

Adults in the Child's Life

- The child has much older boyfriends or girlfriends, "friends".

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- The child does not live with their parent(s) or know the whereabouts of their parent(s).
- The child receives money from unrelated adults.

Medical/Physical Condition

- The child has been treated frequently for symptoms of physical abuse.
- The child lacks an adequate medical history.
- The child is malnourished.
- The child shows signs of physical and/or sexual abuse, including physical restraint, confinement, or injuries from actual torture.
- The child has infections from unsanitary tattooing.
- The child has dental injuries; broken/missing teeth, gum disease.
- The child has bed bug bites.
- The child has infections or mutilations but nominal medical treatment.
- The child has contracted sexually transmitted diseases.
- The child has reproductive problems caused by unsafe abortions.
- The child has physical injuries related to sexual activity, such as pelvic pain and urinary tract infections.
- The child has substance abuse problems.

Financial/Employment Coercion

- The child has to work but does not indicate where they work.
- The child has little or no access to earnings and no bank account.
- The child has an unusually large amount of money on them.
- The child is indebted to adults.
- The child reports working in a strip club, night club, or massage parlor.
- The child works excessively long or unusual hours.
- The child is not allowed breaks and is unusually restricted at work.
- The child was recruited through false promises concerning the nature and conditions of their work.

Psychological Indicators

- The child may not always self-identify as a child or minor. Traffickers coach their victims to state they are eighteen years of age or older.
- The child tells inconsistent stories or stories lacking significant details.
- The child gives deceptive responses to questions.
- The child avoids eye contact with responders.

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- The child has symptoms of post-traumatic stress, including anxiety, depression, addictions, panic attacks, phobias, paranoia or hyper-vigilance, or apathy.
- The child has developmental delays, enuresis, or fecal incontinence.
- The child experiences culture shock when in strange communities.
- The child is not allowed or able to speak for themselves, especially when a third party insists on being present or translating.

Environmental Indicators

- Large amounts of cash and condoms are present where child is found.
- The child's environment contains sparsely furnished rooms.
- The child's environment contains sex advertisements.
- The child's environment contains multiple televisions and pornography.
- The child's environment contains timers; used to time sexual services.
- The child's environment contains tinted windows, buzz-in entrances, video cameras, barred or locked windows/doors, security, etc.

Reporting

In the event it is determined that the foster child was a victim or sexually exploited; case management will work to ensure needed medical screenings are initiated, services are provided to the child and all required documentation (SFN 960, safety planning, sentinel events, etc.) is completed. Reports of suspected child abuse and neglect that involve human trafficking of a minor are processed in the same manner as any other report of suspected child abuse or neglect.

Determining Services

There is a high level of need for comprehensive and intensive therapeutic services for victims of human trafficking. Case managers should collaborate with the child and Child & Family Team to develop an individualized service plan specific to these needs. This plan should address the need for safe housing, physical and mental health services, substance abuse treatment, therapeutic foster homes and other services.

It is recommended that trafficking victims receive trauma focused therapy at the earliest possible time following identification as a victim of trafficking. A list of trauma-trained therapists throughout ND may be found at: **<https://www.tcty-nd.org/index.php/users/>**

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Services are best provided from a victim-centered perspective. While each case and victim of human trafficking will be different, victims typically have many of the same service needs. Below are some needs to consider when assessing the needs of individual victims:

Concrete needs

Food (culturally appropriate) Clothing Safety/ Protection/ Safety plan	Food (culturally appropriate) Clothing Safety/ Protection/ Safety plan	Food (culturally appropriate) Clothing Safety/ Protection/ Safety plan
Safe Placement Emergency Housing Crisis Intervention Mental healthcare/ trauma informed care	Safe Placement Emergency Housing Crisis Intervention Mental healthcare/ trauma informed care	Safe Placement Emergency Housing Crisis Intervention Mental healthcare/ trauma informed care
Medical/ Dental /Eye care Substance Abuse Evaluation/Treatment Counseling and/or Case Management	Medical/ Dental /Eye care Substance Abuse Evaluation/Treatment Counseling and/or Case Management	Medical/ Dental /Eye care Substance Abuse Evaluation/Treatment Counseling and/or Case Management
Education/life skills training/ ESL Health education Transportation	Education/life skills training/ ESL Health education Transportation	Education/life skills training/ ESL Health education Transportation
Legal representation - Criminal/Civil/Immigratio n Interpreter/Translator Court Advocacy/ Victim Assistance	Legal representation - Criminal/Civil/Immigratio n Interpreter/Translator Court Advocacy/ Victim Assistance	Legal representation - Criminal/Civil/Immigratio n Interpreter/Translator Court Advocacy/ Victim Assistance
Psychiatric Care Assistance with Benefits Crime Victim Compensation	Psychiatric Care Assistance with Benefits Crime Victim Compensation	Psychiatric Care Assistance with Benefits Crime Victim Compensation
Job/income/Viable employment alternatives Tattoo Removal/Cover Up Childcare and/or parenting skills	Job/income/Viable employment alternatives Tattoo Removal/Cover Up Childcare and/or parenting skills	Job/income/Viable employment alternatives Tattoo Removal/Cover Up Childcare and/or parenting skills

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Supportive needs

Respect Mentoring Acceptance	Respect Mentoring Acceptance	Respect Mentoring Acceptance
Nonjudgmental environment Healthy relationships Affirmation of skills and strengths	Nonjudgmental environment Healthy relationships Affirmation of skills and strengths	Nonjudgmental environment Healthy relationships Affirmation of skills and strengths
Recognition of abuse and trauma Understanding of the recovery process Engagement in positive community	Recognition of abuse and trauma Understanding of the recovery process Engagement in positive community	Recognition of abuse and trauma Understanding of the recovery process Engagement in positive community
Education to understand the issue(s) of trafficking/exploitation Opportunities to develop new skills and strengths Opportunity to be defined by more than abuse/trauma	Education to understand the issue(s) of trafficking/exploitation Opportunities to develop new skills and strengths Opportunity to be defined by more than abuse/trauma	Education to understand the issue(s) of trafficking/exploitation Opportunities to develop new skills and strengths Opportunity to be defined by more than abuse/trauma
Supportive peers Mentors /role models Leadership opportunities	Supportive peers Mentors /role models Leadership opportunities	Supportive peers Mentors /role models Leadership opportunities
Holistic care Advocacy/Know your rights A sense of empowerment in one's own healing and restoration process	Holistic care Advocacy/Know your rights A sense of empowerment in one's own healing and restoration process	Holistic care Advocacy/Know your rights A sense of empowerment in one's own healing and restoration process

Documenting

As with all other types of foster care case planning and record documentation; a human trafficking case must be documented in FRAME according to policies and procedures. This includes completion and updates to the care plan, safety plan, case activity log, etc.

Sentinel Events and Incidents 624-05-15-50-33

(Revised 10/15/12 ML #3341)

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The Risk Management incident report SFN 50508 must be completed by the Regional Supervisor and filed with State Risk Management within 24 hours. The on-line reporting system, www.nd.gov/risk, is used to report both a sentinel event or an incident.

Additional information may be attached to an incident report. Any additional information must be filed with State Risk Management and also sent to the DHS Risk Manager and DHS Legal Advisory Unit Director.

If you are uncertain whether a situation is a sentinel event or an incident, consultation is available through the Regional Supervisor, CFS or the DHS Risk Manager. A sentinel event will always require an incident report, but every incident reported is NOT a sentinel event.

Sentinel Events:

A sentinel event is defined as any unexpected occurrence involving death or serious physical or psychological injury or risk thereof that is not related to the natural course of the individual's illness or underlying condition. Serious injury specifically includes inappropriate sexual contact. The phrase "or risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome. They signal the need for immediate investigation and response.

An example of a sentinel event would be if a foster youth is seriously injured, (including inappropriate sexual contact), dies unexpectedly, or attempts suicide.

Regional Supervisors must report all sentinel events to the Regional Director, Institution Superintendent, or Local Risk Manager immediately. The event also must be reported to the DHS Executive Director, DHS Risk Manager and DHS Legal Advisory Unit Director as soon as possible, but no

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later than 12 hours after the occurrence. Initial notification may be made by phone, voice mail, or e-mail.

Incidents:

An incident is an unplanned occurrence that resulted or could have resulted in injury to people or damage to property, specifically involving the general public and state employees. An incident can also involve issues such as harassment, violence, and discrimination. An incident may be referred to as an accident or near miss.

Utilize the Risk Management Fund Incident Report (SFN 50508) for general and employee incidents. The report should be completed by the employee that has the most information or first-hand knowledge about the incident. Incident reports should not be completed by non-state employees. An example of an incident that is not a sentinel event would be if a foster youth runs away.

If there are questions regarding this policy, please feel free to contact the CFS Foster Care Administrator or the DHS Risk Manager.

Missing Children 624-05-15-50-34

(Revised 12/1/15 ML #3461)

[View Archives](#)

The custodial case manager, upon determining that a foster child is missing, must make a report immediately, and in no case later than 12 hours using three specific steps:

1. Immediately report the incident and pertinent information to local law enforcement. This includes requesting that law enforcement enter the pertinent information into the National Crime Information Center (NCIC).
2. Immediately report the incident and pertinent information to the National Center for Missing and Exploited Children (NCMEC) at 1-800-THE-LOST (1-800-843-5678).
3. Immediately report the incident and pertinent information to the Regional Supervisor.

Pertinent Information means, but is not limited to the following:

Circumstances of the “missing” report:

- Who, what, where, when, exact time.
- Description of the child’s appearance; i.e. hair color/style, clothing, identifying marks. Supply photo if available.
- Provider name, address, and telephone number.
- Who saw the child last?
- Date, time, relevant content from the last case manager visit.
- Is this the first time the child has been “missing”? If not, provide a brief history of prior “missing” episodes.
- What was going on with the foster child at the time, including the possible primary factors that contributed to the foster child being absent from care?
- Is there any suspicion of foul play such as abduction, human trafficking, or sexual exploitation?

Return of the foster child.

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Once the foster child is found, the above three steps should be repeated to inform all involved parties that the foster child is no longer missing or on the run.

The case manager must screen the foster child to determine both the primary factors that led to the foster child running away, and the foster child's experiences while absent from foster care. This includes determining if the foster child was a possible human trafficking victim. The ND Runaway & Missing Youth Screening (SFN 573) shall be used to help the custodial agency identify if a child missing from foster care was a victim or exploited. The custodial agency should determine how to best integrate this screening tool upon the missing child's return to foster care. Attention should be paid to the child's ability and willingness to participate in the screening. Every effort should be made to complete the screening before NCMEC is notified that the child has been located.

In the follow-up contact being made to the National Center for Missing and Exploited Children (NCMEC), the case manager will be asked if there was suspicion of or actual human trafficking/sexual exploitation while the child was absent from foster care. If the screening is not completed prior to contacting NCMEC and later it is determined the child was exploited, case management shall notify NCMEC of the findings.

In the event it is determined that the foster child was a victim or sexually exploited; case management will work to ensure needed medical screenings are initiated, services are provided to the child and all required documentation (960, safety planning, sentinel events, etc.) is completed.

Additional resources to assist case management with runaway clients can be found on www.missingkids.com.

Documentation by the Custodial Case Manager

The case manager must document information in the appropriate data fields in FRAME:

- What action was taken by the case manager and foster care provider to expeditiously locate the missing foster child?

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- What primary factors led to the foster child running away?
- How will case management respond to the primary factors identified in current and subsequent placements?
- The date and the results of the screening determining whether or not the child was a victim or exploited while missing from foster care.

Children and Family Services (CFS) must be notified by the Regional Supervisor when a foster child is missing.

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High Risk Youth 624-05-15-50-35

(Revised 10/15/12 ML #3341)

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Suicidal Youth

Any time a foster youth is expressing suicidal ideation, contact your local human service center (24-7) and request, at a minimum, a consultation and/or an evaluation with appropriate staff or risk team to determine the risk level.

Whenever a youth enters foster care and information is available related to a history of self-harm or suicide indications, a safety plan needs to be developed and implemented within 24 hours. A plan for evaluations and/or treatment resources must be identified and all local and regional staff must be advised of the treatment plan. This safety plan must also become a part of the case plan for that youth.

For youth being discharged from an inpatient treatment facility and who has any related behavior of self-harm, follow-up treatment services must be arranged prior to discharge. Case managers must actively participate in the discharge planning with treatment facility staff and are required to follow-up with treatment facility staff (daily, if needed) as to the progress and/or safety of youth.

Documentation of the above must be included in the child's case plan.

Reasonable & Prudent Parent Standard - Normalcy 624-05-15-50-40

(Revised 12/1/15 ML #3461)

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The reasonable and prudent parent standard is characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child participating in extracurricular, enrichment, cultural, and social activities.

The goals of the reasonable and prudent parent standard are to:

- Provide children in foster care with a “normal” life experience.
- Empower foster care providers (homes, group homes, facilities) to encourage children to engage in extracurricular activities that promote child well-being.
- Allow foster care providers (homes, group homes, facilities) the ability to make reasonable parenting decisions without waiting to obtain additional permissions from the custodial case manager or the Child & Family Team. (Ex: Field trip permissions, attendance at school functions, carpools, etc.)

When using the reasonable and prudent parent standard, providers should consider:

- The child’s age, maturity and developmental level;
- Potential risk factors of participating in the activity;
- The child’s best interest;
- Whether or not the activity will encourage the child’s emotional and developmental growth; and
- Whether or not the activity will offer the child a family-like living experience.

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Normalcy is giving children in foster care the opportunity to engage in typical growth and development. This includes the participation in age-appropriate activities, responsibilities and life skills.

Age appropriate activities are events generally accepted as suitable for children of the same chronological age or level of maturity. Age appropriateness is based on the development of cognitive, emotional, physical, and behavioral capacity that is typical for an age group.

Example: It may be age appropriate and “normal” for a 14 year old to go to a school ball game without parental supervision. It may not be age appropriate and “normal” for a 14 year old to go camping with friends without parental supervision.

In an effort to make decisions in the best interest of the child; it is important to engage the child to understand their desire and abilities. Providers may have personal beliefs that would influence participation in requested activities. The Child & Family Team is a resource in finalizing decisions that may present risk.

Typical Activity Requests

Foster children request permission to participate in various activities. Requests that seem “normal” to young people may include but are not limited to:

- Extra-curricular activities (participate in school sports, band, theater, etc.)
- School related activities (attend a dance, ball game, field trip, etc.)
- Working – Babysitting
- Using a cell phone
- Staying up late
- Watching television
- Using the internet – social media
- Dating
- Driving
- Playing video games
- Attending Summer Camp (Sports, Boy Scouts, etc.)
- Riding in a vehicle with others

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- Sleepovers
- Vacations (in-and-out of state)
- Haircuts/ tattoos/ piercings
- Operating an ATV or snowmobile
- Boating
- Hunting
- Rodeo
- Skiing

High Risk Activities

The child's custodian has the discretion to approve the child's participation in what may be considered high risk activities; i.e. skiing, hunting, horseback riding, BMX dirt bike racing, etc. This decision should be made through discussions at the Child & Family Team Meeting. It is recommended that the child attend any safety course available that may relate to the activity prior to participating in the activity; i.e. hunter's safety, rider's safety training, etc. Approval should be documented in the child's case file.

Making Decisions

The custodian will specify upon placement or at the first CFT meeting the parameters for provider decision making authority.

The custodian must:

- Detail the agencies expectations supporting the provider's ability to engage in reasonable and prudent parenting,
- Define and address "normal" activities the child is already participating in,
- Discuss additional interests and desires the child may have, and
- Identity if there are any barriers.

Example: Upon placement, the custodian acknowledges and supports "reasonable and prudent parenting" and agrees that the provider can sign school field trip permission slips, sign documents at clinic appointments, approve who the child can ride with to and from basketball practice (carpools), allow for participation in Girl Scouts, and grant permissions to attend after school events/functions. The custodian also noted that the provider must consult with the agency and Child & Family Team in order to give permission for the child to visit with extended family members.

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Providers utilizing the reasonable & prudent parent standard take into account varying factors to make decisions to best meet the needs of the child in placement. Questions include, but are not limited to:

- If appropriate, have the biological parents been consulted about their thoughts regarding their child's participation in the activity?
- Does the activity promote the child's social development?
- Will the activity encourage "normalcy" for the child?
- If the child has medical needs; will the child be able to tell others how to help them if necessary?
- Has the child shown maturity in decision making abilities?
- Would I allow my own child to participate in the activity?
- Who will also be attending or participating in the activity?
- Will the timing of the activity interfere with a scheduled sibling or parent visit, therapy or medical appointment? If so, other options to accommodate the activities and family engagement/ treatment will need to be pursued.
- Does the foster child understand the set expectations regarding curfew, approval for last minute changes to the plan and the consequences for not complying with the expectations?

Immunity for Providers

A person providing foster care for children in a licensed or approved family home, group home, or facility is immune from civil liability for any act or omission resulting in damage or injury to or by a child in foster care if, at the time of the act or omission, the person providing foster care for children applied the reasonable and prudent parent standard in a manner that protects child safety, while also allowing the child in foster care to experience normalcy through age or developmentally appropriate activities.

Documentation

The case manager must document child engagement in developmentally appropriate activities:

1. In the data fields of FRAME (CFTM notes, case activity logs, etc.)
2. In the affidavit to the court for a permanency hearing, the custodial agency must detail the steps taken to ensure that:
 - a. The child's foster care provider is following the reasonable and prudent parent standard; and

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- b. The child has regular, ongoing opportunities to engage in age or developmentally appropriate activities.

**Motor Vehicle Operation by Youth in Foster Care
624-05-15-50-41**

(NEW 11/1/16 ML#3481)

[View Archives](#)

The Department, as a custodian, is not able to authorize a minor to secure a driver's license. Even though it is desirable and the Department would like to provide this experience for young people, it is prohibited by the absence of insurance protection. The complete policy related to operation of motor vehicles by youth in foster care is found in NDDHS Manual Chapter 622-05-60.

Credit Reporting 624-05-15-50-43

(New 12/1/15 ML #3461)

[View Archives](#)

This policy is specific to foster youth under the custody of County Social Services, the Division of Juvenile Services (DJS), and Title IV-E Tribal Social Services. The intent of the federal law is to:

1. Identify if the youth has been subject to identity theft;
2. Assist youth in understanding the importance of having a credit check completed;
3. Teach the youth how to review a credit report;
4. Educate the youth on the process to continue this practice upon discharge from foster care.

ND Children and Family Services (CFS) will obtain an annual credit report from each of the three Consumer Reporting Agencies (CRAs); TransUnion, Equifax, and Experian for North Dakota foster youth over the age of 14. CFS will request youth credit reports before the 15th of the month and documentation will be electronically forwarded to the custodial case manager within 45 days.

Every other month CFS will run a FRAME report to identify foster youth who will turn 14 years old or greater, with an open court order in an open foster care service period. CFS will review data from three months prior to see if any youth who recently turned age 14 or greater entered foster care since the last credit report request. It is critical that information is entered into FRAME in a timely manner; especially when opening a new case or closing a foster care service program. Ex: If a youth is no longer in foster care, but the foster care program has not been closed in FRAME; CFS will obtain that youth's credit report. Youth turning age 18 will be eliminated from retrieving their own "free credit report" post discharge because ND already obtained their free annual report.

Report Request Schedule:

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ND Foster Youth Birthday Months	Retrieval Month
January & February	January
March & April	March
May & June	May
July & August	July
September & October	September
November & December	November

Credit Report Results:

Many youth under the age of 18 will likely not have a credit report, as many do not have credit history. Therefore, the request of a credit report for a youth in foster care will simply be confirming that no report exists. However, when a credit report does exist, it indicates that there is likely a need to correct information and to take action to protect the identity and future credit worthiness of the foster youth.

What if discrepancies are found?

Case managers will be responsible to remedy a false credit report. Below are steps on how to respond to discrepancies found in a credit report:

1. Discuss with the youth the results of the report asking if they are aware of anyone using their identity to secure finances (housing, utilities, cell phone).
2. Contact the companies where an account was fraudulently opened or misused. The youth's custodial agency must discuss the logistics of the accounts and indicate there is false credit out in the minor youth's name. Companies will have different procedures to follow in the effort to remedy fraudulent activity.
3. After receiving more information, discuss with the youth the need or desire to file a police report.
4. If needed, contact the Credit Reporting Agency where the activity was identified;
 - a. To place an initial fraud alert on youth's name;
 - b. To initiate a credit freeze for the youth's name;
5. If needed, file a report with the Federal Trade Commission (FTC) www.ftc.gov or call 1-877-IDTHEFT (1-877-438-4338);

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In order to be in compliance; case managers must:

1. Place a copy of the credit report or message indicating a report does not exist sent by CFS in the youth's case file;
2. Provide a copy of the results to the youth;
3. Assist the youth in understanding why the credit report was obtained, interpreting the results, and resolving inconsistencies (flyer created to use if desired);
4. After communicating with the youth, document the independent living opportunity for the purposes of National Youth in Transition Database (NYTD) federal reporting. Case managers will select "Budget-Financial Management" in FRAME under the Independent Living Services (NYTD) tab.

National Youth in Transition Database 624-05-15-50-45
(New 12/1/15 ML #3461)[View Archives](#)

The National Youth in Transition Database (NYTD) is required federal reporting to track the services and outcomes of youth transitioning from foster care. NYTD requires state child welfare agencies to collect and report data in two specific areas:

1. **Independent Living Services** – document all independent living services provided to foster youth age 14+ with an open FRAME foster care episode. Data collection and entry is to be completed by the public agency custodians and Chafee IL Coordinators (when applicable) into FRAME. Custodians may ask foster care providers for assistance in collecting the information. Independent living service categories include but are not limited to mentoring, academic support, career preparation, and health education. All independent living service categories can be found in FRAME under the Case Management tab in the Independent Living Services (NYTD) section.
 - a. The federal report is submitted every six months.
2. **NYTD Survey** - administer and collect survey data via a three part survey of eligible youth in foster care at age 17, again at age 19, with a final survey completed at age 21.
 - a. Every three years (FFY 2011, 2014, 2017....) North Dakota will survey a new cohort of 17 year old foster care youth. NDDHS Children and Family Services will identify eligible youth from FRAME and will communicate with case managers for assistance in administering the NYTD Survey as needed.
 - b. The **voluntary nature** of the NYTD survey is important for case managers and youth to understand. Youth in foster care are not required to complete the NYTD survey, rather the state of North Dakota is required to ask the youth if he/she would like to participate. At age 17, if the youth declines to participate, there is no penalty to the youth or to state funding. However, North Dakota will be subject to fiscal penalty if a youth takes the first

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NYTD survey at age 17 and then chooses not to participate or cannot be located at age 19 and 21.

- c. It is important that youth understand if they choose to take the NYTD Survey at age 17 they are willing to be part of the ND NYTD Survey Cohort and will remain in contact with ND Children & Family Services until they reach age 21 and complete the last of three NYTD surveys.

NDDHS Children and Family Services created the NYTD Handbook to better assist professionals with procedures, data entry requirements, and an understanding of roles and tasks. The **NYTD Handbook can be found at:** <http://www.state.nd.us/robo/projects/62410/62410.htm>.

Health Care Directives 624-05-15-50-46

(New 12/1/15 ML #3461)

[View Archives](#)

All foster youth who will be discharged from foster care at the age of 18 or greater must be informed about the importance of designating another individual to make health care treatment decisions on their behalf if they become unable to do so, and they do not want or do not have a relative who could make these decisions. A "health care directive" is a document that enables youth to make decisions now about medical care in the future.

Resources:

- Forms and directions related to health care directives can be found at www.legis.nd.gov/cencode/t23c065.pdf.
- A brochure, "Health Care Directives, A Guide to Assist Youth Aging Out of Foster Care," DN 35, is available to give to youth when developing the youth's transition plan.

Foster Youth Rights 624-05-15-50-49

(New 12/1/15 ML #3461)

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The case plan for any youth age 14 or older must include a list of rights with respect to education, health, visitation, and court participation, the right to be provided with credit reporting documents, and the right to stay safe and avoid exploitation. The custodial case manager must explain the list of rights (DN 402) to each youth in a developmentally and age appropriate manner.

The list of rights must be reviewed and signed annually by the custodian and the youth. A copy of the signed rights must also be given to the youth for their records.

Foster Youth Have The Right To:

1. Know why they are in foster care and plans for their future.
2. Be treated with respect, along with their family members.
3. Receive food, clothing, a bed, and items for personal hygiene.
4. Live in a safe, clean place with a reasonable amount of privacy and safety for their personal property.
5. Take personal items, clothing and any gifts or possessions that have been acquired when leaving a foster care placement.
6. Receive medical, vision, and dental care.
7. Be safe from exploitation, physical, sexual, and verbal abuse or neglect.
8. Be treated fairly and without discrimination related to race, gender, age, sexual orientation, disabilities, and religious beliefs.
9. Practice cultural traditions and religious faith in reasonable ways.
10. Receive an education and help with emotional, physical, intellectual, social and spiritual growth.
11. Be given the opportunity to participate in school and community activities.
12. Participate in the development of their case plan and attend Child & Family Team meetings.

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13. Contact and be granted visitation with family as approved by the legal custodian.
14. Communicate with case manager.
15. Express concerns about safety, permanency and well-being.
16. Participate and be represented in judicial proceedings.
17. Receive a copy of their annual credit report obtained by the state office.

DN 402

Need for Early Planning 624-05-15-55**(Revised 2/10/07 ML #3053)**[View Archives](#)

Permanency planning must begin immediately. If appropriate, concurrent planning should be initiated as soon as possible. The difficulties inherent with children adrift in foster care can be reduced by starting efforts for permanency prior to or as soon as the child enters foster care.

In permanency planning for a child, keep in mind the safety issues for the child, and the philosophy of the Adoption and Safe Families Act of 1997 – foster care is not a place to grow up. Children deserve permanency, safety, and well-being.

Immediately after the child is removed, parents have usually not yet adjusted to their loss and are more apt to be motivated to change the conditions that led to the removal of their child. If intensive case management services through the Wraparound process does not begin immediately after the child has been placed in foster care, the original problem(s) may become obscure. The parents may have adjusted to life without the child and may be unable to reincorporate their child into their home without major changes in their lifestyle. In addition, they may resist treatment/services because they are reluctant to open old wounds and to face the possibility of again failing to meet society's expectations of them as parents. If the decisions in permanency planning/the Foster Care Child & Family Team meetings are delayed, the parents may leave the jurisdiction making the task of replacing the child in their home more difficult to achieve. The agency will be handicapped when trying to evaluate from a distance the parents' potential to care for their child or children. This can be time consuming, and the results are far too often inconclusive or non-existent.

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Periodic Review Requirement 624-05-15-80

(Revised 10/15/12 ML #3341)

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All children in foster care (including children on trial home visits), including those in the custody of the Division of Juvenile Services, will come under the review of the Foster Care Child & Family Team meetings (permanency planning), but the review frequency will differ depending on how long the child has been in care in a specific placement. At a minimum, the committee will review every three months the cases of all Foster Care children.

The Adoption and Safe Families Act (ASFA) provides tightened time frames for children in foster care, twelve-month disposition hearings, filing of petitions for termination of parental rights when a child has been in foster care a certain period of time, and an emphasis on moving the child into adoption, relative care, guardianship, or alternate permanent setting quickly.

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Placement Review 624-05-15-80-05

(Revised 10/15/12 ML #3341)

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Children in foster care in North Dakota will continue to be reviewed by the committee/team on a quarterly basis subsequent to the first permanency planning committee meeting (where the case plan is developed) within the first 30 days of initial placement.

Periodic permanency planning/team reviews at three-month intervals are required for all children and documented in FRAME as a Permanency Planning Committee Progress Report. The three-month review requirement is dictated by the ASFA mandates to move children into permanent situations, and to help agencies meet the various ASFA deadlines, such as permanency hearings. It is anticipated that the result of this emphasis on planning and services to foster children will result in shortened times in foster care and diminished recidivism.

The periodic permanency-planning requirement does not substitute for monthly reviews of the case by the case manager and supervisor.

Review of Children in Care 624-05-15-80-05-05**(Revised 1/15/10 ML #3206)**[View Archives](#)

It is expected that every child in care will have a plan as outlined in the previous section. The following questions are suggested to help the case manager gather required information for the periodic review.

Questions to ask at a three-month review.

1. Is concurrent planning appropriate?
2. What was the reason for placement?
3. What is the long range, permanency plan for this child?
4. What specific tasks were assigned to agency, parents, child and foster parents and others to achieve the plan?
 - a. Were time frames established for each goal?
5. Of tasks completed:
 - a. Are achievements documented?
 - b. Will these tasks lead to the desired goal?
 - c. What child or parent strengths are apparent now that were not at the time of placement?
 - d. Were time frames established for each task?
6. Of tasks not completed:
 - a. Are failures documented?
 - b. Are tasks reasonable, appropriate?
 - c. Why were tasks not completed?
 - d. What new barriers have arisen since the last review?
7. Did visiting occur as planned?
8. What is the expected length of placement (in months)?
9. What changes need to be made in the plan, specific tasks and visiting schedule?

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10. What is the independent living plan for youth 16 and over? (Refer to 624-10 Independent Living Manual chapter)
11. Does a transition plan need to be developed?
12. Are siblings in foster care placed together? If not, is it now possible for them to be placed together?
13. If it is not possible for siblings in foster care to be jointly placed, is ongoing visitation or interaction occurring? If not, is it now possible to provide these connections?
14. Is ongoing visitation or interaction being provided between foster children and siblings who are not removed from their home?

**Review of Children in Out-of-Home Care More than 1 Year
624-05-15-80-05-10**

(Revised 2/10/07 ML #3053)

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The Adoption and Safe Families Act requires that we look at cases to develop an alternate permanency plan for a child that cannot be reunified. Consider the age of the child and whether the goal is realistic if it has not yet been achieved. Consider also if concurrent planning is appropriate; and, if services the family needs have been provided. The basic premise is that the child needs permanency. The longer a child has been in care, the less chance they have for reunification with their family or adoption.

Suggested Questions to ask at review of longer term placement.

1. What reasons necessitated placement?
2. What is the permanent planning goal for this child?
3. Is the plan realistic?
4. What is the current family situation, what conditions are preventing return of the child (absence, condition, conduct). What do they want in a plan?
5. Is there a concurrent plan?
6. What is the current situation of the child? Where are his/her psychological ties, what does he/she want in a plan?
7. What is the current situation of foster parents, relatives or others who have been caring for the child? What is the role and planning process for the relatives and foster parents? How do they fit into the permanent plan?
8. What is the independent living plan for youth 16 and over?
9. Do safety issues prevent child's return home?

**Assessment of Child and Family in Planned Permanency
Living Arrangements 624-05-15-80-10**

(Revised 2/10/07 ML #3053)

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ASFA requires scrutiny of every case situation, even if the child has been in the foster care system for a long period of time. It requires agencies to take a new look at the circumstances of each case and to be open to changing the child's case plan in an effort to provide the child a permanent living situation. Keeping in mind the emphasis in ASFA of safety, permanence, and well being, consider concurrent planning while providing the family services within structured time frames. Begin by assessing the current situation of the child, the child's family, and the foster family through the Strengths Discovery and Permanency Planning Committee/Foster Care Child & Family Team meeting process. Involve the extended family if appropriate. Consider a relative placement.

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Family 624-05-15-80-10-05

(Revised 1/15/10 ML #3206)

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Assess the current situation with the child's biological family. Look at each category, decide which sections describe the family and follow the outlines below.

Absence - This refers to the lack of consistent contact between the parent and child over a period of time.

1. Conduct a diligent and exhaustive search of missing parents. The following is a list of resources to be used and/or contacted in conducting a search:

- Federal Parent Locator Services (FPLS)
- Letters to last known address
- Registered letters to last known address
- Friends
- Relatives
- Last known place of employment
- Telephone directory
- Other social service agencies (public welfare, mental health, etc.)
- Utility companies
- Employment services
- Probation/parole authorities
- Labor unions
- School and colleges parent attended
- Social Security Office
- Police departments
- Motor Vehicle Registration Office
- Hospitals/clinics
- Child Support Unit (IV-D)
- Bureau of Indian Affairs (Social Services)
- Tribal Enrollment Office

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Other:

Letters to parent c/o relatives, friends, previous employers, etc. With or without a social security number, address a letter contained in an unsealed envelope to the parent, enclosed with request that it be forwarded - mail to:

Social Security Administration
Bureau of Data Processing
Baltimore, MD 21232

Contact:

Federal Bureau of Investigation
Records Department
Washington, DC

Condition - This refers to qualities within the parent which prevent adequate nurturing. These qualities should have a diagnosis and prognosis.

1. Make use of professional consultation if necessary in obtaining a clear diagnosis and prognosis of the parent's condition. These are minimal items to request:
 - What is the parent's condition-specific diagnosis and a description in lay language?
 - How does, or could, this condition prevent adequate parenting?
 - What is the prognosis (future) of the parent's condition: including ability to parent, and expected time for improvement or recovery from condition?
 - What indicators of future stability exist?

Conduct - This refers to parental behavior which is detrimental to the child.

1. Define in behavioral terms the parental conduct which is preventing return home.
2. In what specific ways is this conduct detrimental to the child?

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3. What conduct indicates genuine caring for the child?

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Child 624-05-15-80-10-10

(Revised 2/10/07 ML #3053)

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Assess the child's current situation. Look at each category to determine what plan will be appropriate for the child.

Attachments - This refers to the feelings a child has about where they belong and who is their family.

Consider the following in making your assessment:

1. Length of time in care - what percentage of their life has been spent in care.
2. Number of placements and length of time for each.
3. Where the child says they belong.
4. What relationships does the child want to maintain.
5. Request assessment of bonding from a psychologist or psychiatrist for help if this is necessary.
6. The child's attitude toward permanency in their lives.

Condition - This refers to qualities within the child which prevent him from receiving the care and nurturing they need in their home. These qualities should have a diagnosis and prognosis.

1. Make use of professional consultation in obtaining a clear diagnosis and prognosis of the child's condition. These are minimal items to request.
 - What is the child's condition - specific diagnosis and a description in lay language.
 - How does this condition affect the parenting that this child will need.
 - What is the prognosis (future) of the child's condition and how might it be affected by various placement plans.

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Conduct - This refers to a child's behavior which is disruptive to the family.

1. Define in behavioral terms the child's conduct.
2. In what specific ways will the child's behavior influence plans for placement?
3. What special parenting will this child need as a result of the child's behavior?

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Foster Family 624-05-15-80-10-15

(Revised 2/10/07 ML #3053)

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Assess the foster family's current situation. Each foster family must be evaluated in terms of their commitment to the child, the child's future, and the best interests of the foster family.

1. Length of time the child has been in placement.
2. Assessment quality of the relationship between the foster parents and the child.
3. Bonding with the child.
4. Assess foster family's ability to accept the child's family.

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Periodic Review Requirement for Group Homes and Residential Child Care Facilities 624-05-15-85

(Revised 2/10/07 ML #3053)

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For those children placed into an in-state group care facility or residential child care facility, it shall be the continuing responsibility of the legal custodian (i.e. county, or in the case of a TPR, county where court action initiated) or the Division of Juvenile Services representative responsible for the case plan to continue the periodic review process. (See Reference N.D.A.C. 75-03-16.)

Arrangements must be made to ensure that the county having financial responsibility for foster care payment receives at least quarterly written reports from any facility in which the child is placed.

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Periodic Review for Children Committed to the Division of Juvenile Services 624-05-15-90

(Revised 2/10/07 ML #3053)

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All youth committed to the Division of Juvenile Services who are pending placement or who are placed in foster care must be initially and periodically reviewed with the permanency planning committee/Foster Care Child & Family Team as outlined in this chapter. This review must be initiated by the Division of Juvenile Services worker as the case manager.

**Legal Authority Child & Family Team Meeting
624-05-15-100**

(Revised 12/1/15 ML #3461)

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The custodial agency has the final responsibility for the case plan and what happens to the child. The Child & Family Team essentially serves in an advisory or recommending posture in relation to the case plan. The agency and team by working cooperatively through multi-agency and multidisciplinary approaches can provide a wider variety of support services to the parents, foster child, and foster parent to carry out the treatment for the case plan. The team makes a recommendation as to whether a petition should be filed for termination of parental rights; if and when the child should be returned to their own homes; the parent's willingness and ability to benefit from counseling and treatment services; potential for the parents to ever be able to provide and care for their child and other critical decisions. No single profession has the total knowledge of what is the best plan for a child. By utilizing a multi-agency, multidisciplinary permanency planning/team approach, we broaden the input and allow for more ideas into the important planning decisions. This has proven to be very valuable when it is necessary to go to court on behalf of children and their families. (Reference N.D.A.C. [75-03-14](#).)

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Responsibility for Permanency Planning 624-05-15-100-05

(Revised 2/10/07 ML #3053)

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Permanency Planning is the responsibility of the custodian.

In out-of-state foster care placements in family foster homes or in group or residential child care facilities, permanency planning is the responsibility of the legal custodian.

The county of financial responsibility maintains all case management responsibility not vested in the custodian.

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Services Following Termination of Parental Rights 624-05-15-100-10

(Revised 2/10/07 ML #3053)

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The county where court action terminating parental rights was initiated shall continue to exercise responsibility for permanency planning until the adoption is finalized (as required by federal law). This should be done in cooperation with the private agency adoption worker.

For information on determination of financial responsibility for foster care payment, refer to: Manual Chapter 623-05.

**Responsibilities of County of Financial Responsibility
624-05-15-105-10**

(Revised 2/10/07 ML #3053)

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Financial responsibility for the case always rests with the "financial county."

The financial county enters the payment information on CCWIPS, unless an agreement to do so is negotiated with another county.

The county of financial responsibility maintains all case management responsibility not vested in the custodian. In cases where the financially responsible county is also the custodian, the county has complete responsibility for the case, including eligibility and payment and all activities associated with placement and supervision of the child.

In certain circumstances, the financial/custodial county may negotiate an agreement with another county to provide specific services, such as placement and supervision. In such an instance, the financial/custodial county remains responsible for ensuring that permanency planning/Foster Care Child & Family Team meeting takes place, and that the case is documented, for example, in preparation for audit.

Responsibility by Type of Care and Custodian 624-05-15-105-15

(Revised 10/15/12 ML #3341)

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1. Family Foster Care:

The financial county for family foster care (not therapeutic family foster care) is the county where the child's parent has residence at the time of court intervention.

2. Therapeutic Family Foster Care:

In therapeutic family foster care, the procedures for financial county are similar to procedures for children in group/RCCF/PRTF care. The custodian refers the child, ensures that permanency planning takes place, maintains the documentation ensuring that custodial duties are carried out and compliance issues met. The financial county (where the child's parent has residence at the time of court intervention) is frequently the same as the custodial county. In some instances, there may be an exception to this. Please refer questions to the regional supervisor.

3. Group/Residential/PRTF:

The county of financial responsibility for children and youth in foster care in group/RCCF, in or out of state, is the county where the child's parent has residence at the time of court intervention. Financial responsibility will remain with that county as long as the individual remains in care.

4. Division of Juvenile Services:

Division of Juvenile Services (DJS), as custodian, is responsible for those case management duties involved in permanency planning as found in NDDHS 624-05. This includes, for example, contacting the regional supervisor to ensure that the DJS case is permanency planned, ensure placement in the least restrictive environment, is

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reviewed regularly in permanency planning, and that appropriate permanency planning documentation is in place.

5. Tribal Foster Care Cases:

Above guidelines are followed.

The eligibility worker in the appropriate county has the responsibility to see that permanency-planning reports are on FRAME. If not, the eligibility worker will notify the appropriate tribal social worker.

For tribal case plans (Permanency Planning Committee Initial Report) and quarterly reports (Permanency Planning Committee Progress Report), the involved county starts the case plan on CCWIPS (generating available information from the system), printing it out, and mailing it to the appropriate tribal social worker for completion.

It is the responsibility of the tribal social service worker (case manager) for the specific case to ensure that permanency planning is done in a timely manner and that the policies in Service Chapter 624-05 are followed. It is the responsibility of the tribal social worker to ensure that the tribal court is notified if hearings are due, etc.

Please refer to Service Chapters 447-10 and 623-05 for more information.

Discharge & Transition Planning 624-05-15-110

(Revised 12/1/15 ML #3461)

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Discharge Planning

Discharge planning efforts begin the day a child enters foster care. The Child & Family Team, including the child when age appropriate, need to develop a comprehensive discharge plan, focusing on the individualized needs of the child. Special attention must be given to the child's mental health, substance abuse, and developmental issues.

Federal law requires that all children in foster care should be discharged with the following items at no cost to the child:

1. Personal items
2. Legal documents
 - a. Copy of birth certificate
 - b. Copy of Social security card, and/or
 - c. Identification card (if applicable)
3. Medical information
 - a. The extent of the medical history and records provided upon discharge is to be determined by the case manager as necessary and appropriate for the child's continued care.
4. Education records
 - a. History of schools attended
 - b. School grade level
 - c. Copy of the child's IEP (if applicable)
5. Credit report results
 - a. Only required for children over the age of 14
6. Transition Checklist ([SFN 494](#))
 - a. Only required at age 18 for children "aging out" of foster care

Transition Planning

For a child "aging out" of foster care at the age of 18, transition planning occurs in conjunction with discharge planning.

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A transition plan is required for all children “aging out” of foster care and must be completed within 90 days prior to their 18th birthday. The transition plan must be developed and personalized at the direction of the child and made part of their foster care case plan (either attached or embedded in the case plan). Transition planning is also required 90 days prior to the 18th birthday for a child who is interested in remaining in the 18+ Continued Care program. The transition plan can be updated as needed.

North Dakota requires the use of SFN 494 “Transition Checklist” for all children aging out of foster care regardless of the length of time the child has been in foster care. For placements less than six months, custodians should make concerted efforts to gather required documentation noted on the Transition Checklist. This document will assist the Child and Family Team in developing transition goals and organizing all required information that must be provided to a child aging out.

All efforts must be made to ensure that foster youth are not discharged into homelessness.

Goals in Foster Care Placement 624-05-15-115

(Revised 12/1/15 ML #3461)

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It is impossible to develop any plan for children in foster care without establishing goals, either single or concurrent, with specific deadlines and a specific time frame established to reach those goals (See Wraparound Case Management Manual Chapter 641-10).

Foster care lends itself to situations that are extremely difficult to define. It is imperative that a plan be developed with the Child & Family Team related to strengths, needs, risks, and safety issues with specific measurable and time-limited goals and tasks that will achieve permanency for the child. The safety, permanency, and well being of children and their families must be the priority for everyone involved in the case planning to assure timely permanence and goal achievement.

The primary purpose of the case plan for each child is to document the intent and the steps under way to achieve the goals, including both reunification goals and/or alternate permanency goals. Federal law, in particular, requires that the case plan documents the goals and progress being made toward those goals.

In particular, with respect to a child whose permanency goal is adoption or placement in another permanent home, the case plan must document the steps which the agency is taking to find an adoptive family or other permanent living arrangement, to place the child with an adoptive family, a fit and willing, relative, a legal guardian, or in another planned permanent living arrangement (APPLA), and to finalize the adoption or legal guardianship. At a minimum, such documentation shall include child-specific recruitment efforts such as the use of the state or national adoption exchanges.

For foster youth 14 years of age and older, independent living goals must be developed in their case plan by the custodian. When the child reaches

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age 16, a referral can be given to the Chafee Independent Living program. Refer to Manual Chapter 624-10, Independent Living Policy.

The following sections are some examples of the goals that can be established to meet the needs of the children, when to select the goal, how to implement it, and when a selected goal may not work.

Return Home 624-05-15-115-05

(Revised 12/1/15 ML #3461)

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This refers to the return of a child in foster care to the home of one or both parents.

When to Select this Goal:

The goal of return home is generally the first choice for a permanent plan. It maintains family roots, requires few legal procedures and is usually the least traumatic.

The goal of return home should be considered when the assessment/Strengths Discovery indicates the following:

- The parent is able to provide safely and adequately for the child's well being.
- The parent will be able to provide safely and adequately for the child's well being in a reasonable period of time.
- The parent wants to have the child returned home.
- The child wants to return home.
- Conditions in the home are sufficiently positive after the parents have met the treatment plan goals.

How to Implement this Goal:

To return a child to the home of his parents, there are two steps to follow:

1. The development of a clear plan which includes the roles of the parent, child, natural supports (neighbors, minister, relative, etc.), foster parents, and agencies as described in the single plan of care.
 - a. Future specific tasks the parent and the child, where appropriate, must complete in order to provide adequately for the child's permanence, safety, and well being.
 - b. A visitation plan designed to strengthen the parent-child bond.
 - c. Target date for return home.
 - d. Follow-up plan/safety plan for family support after the child is returned home.

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2. Clarification of the legal status of child and family.

When Not to Select this Goal:

The goal of return home would not be appropriate under the following circumstances.

- The parent does not want to have the child returned.
- The child strongly objects with good cause to returning home.
- The parent cannot or will not provide adequately for the child's safety and well being.
- The parent will not be able to provide adequately for the child's safety and well being within a reasonable period of time.
- The parent(s) refuses to participate in treatment

Placement with Relatives 624-05-15-115-10

(Revised 12/1/15 ML #3461)

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This refers to the placement of a child with a relative other than the biological parents.

When to Select this Goal:

The goal of placement with relatives is one of the less restrictive options. Placement with relatives should be selected under these circumstances:

- The agency must maintain legal custody of the child for up to 12 months and provide supervision during the placement.
- The goal of return home has been ruled out.
- The relative is able to provide adequately for the child's needs and participate in the treatment plan for the child.
- The relative will be able to provide safely and adequately for the child's needs.
- The relative is willing to make a commitment to care for the child.
- The child wants to be placed with the relative.

How to Implement this Goal:

To place a child with relatives there are four steps to follow:

1. 1. Location of relatives as possible placement resources. If relatives have not already come forward to express an interest in caring for the child, seek out family members who might be interested. Refer to 624-05-15-50-20 for comprehensive information on conducting a relative search.
2. 2. Assessment of the relative's home. Consider in your assessment:
 - a. Physical resources that the relatives have for providing for the child in a safe and stable environment.
 - b. Commitment to the child.
 - c. Flexibility. Will they be able to adapt to the changes the child will bring to the home. Are their words and actions consistent.
 - d. Stability. Have their relationships, employment, housing and social circumstances remained reasonably stable.

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- e. Nurturance capacity of the relative.

****IMPORTANT**** If the relatives live in another state or county, request an assessment of their home through Interstate Compact before deciding to place the child.

3. Development of a case plan. The plan should be developed with the relatives and the child (when appropriate) and contain the following:
 - a. Specific tasks the relative must complete in order to provide adequately for the child's needs.
 - b. A visitation plan designed to develop and strengthen the bond between child and relative.
 - c. Target date for placement.
 - d. Follow-up plan/safety plan for family support following placement of child.
4. Clarification of the legal status of child and family. Determine the legal status of the child and the relative with regard to this plan. Check with your regulations and your attorney or court for the following information:
 - a. By what authority does your agency have this child in care.
 - b. What must be done legally to move the child into the relative's home.
 - c. What legal rights and responsibilities do the relatives have with respect to this child when placed with them.
 - Can they consent to surgery, armed services, marriage, etc.
 - Can they keep the child safe from the parents who are at risk of harming the child.
 - d. Is legal guardianship appropriate?

When Not to Select this Goal:

The goal of placement with relatives may not be appropriate under the following circumstances:

- No relatives want the child
- The child strongly objects to placement with relatives.
- The parents strongly object to placement with relatives.
- The relatives cannot provide safely and adequately for the child's needs, or provide protection (i.e. sexual and physical abuse cases) and will not be able to within a reasonable period of time.
- The relatives are not willing to participate in the treatment plan or accept supervision from the agency.

Adoption 624-05-15-115-15**(Revised 12/1/15 ML #3461)**[View Archives](#)

This refers to the situation where the legal rights and responsibilities of a parent to a child are terminated and assumed by another individual who becomes the child's legal parent.

When to Select this Goal:

Adoption is the permanent goal offering the most stability to the child who cannot return home to his parents. It is also the most traumatic to the family since it generally involves permanent separation of child and family. All reasonable efforts should be made to reunite the family before moving to adoption. The goal of adoption should be considered under the following circumstances:

- The goal of return home has been ruled out.
- The parents through words or action have shown an inability or unwillingness to care for the child. The biological parents will not be able to provide for the child's safety and well being within a reasonable period of time.
- The parents want the child to be adopted, or parental rights have been terminated.
- An adoptive home is available or can be found within a reasonable period of time.
- The child wants to be adopted.

How to Implement this Goal:

The goal of adoption involves permanent separation of child and family, and this will require considerable work by the agency. There are two basic steps in the adoptive process:

1. Developing a plan for placement including the referral to AASK for adoptive placement. A referral must be made to AASK no later than when the petition for termination of parental rights has been filed. A referral to AASK should be made when a goal (or concurrent goal) for adoption has been established.

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2. Freeing the child for adoption.

The release of a child for adoption is a legal procedure. Before continuing with adoption plans, consult with your agency attorney, court or another attorney familiar with adoption laws in your state and get the following information:

1. What statutes pertain to adoption?
2. What procedures must be followed if a parent wants to voluntarily relinquish their parental rights?
 - a. What are the grounds necessary to terminate a parent's rights when they will not release the child voluntarily?
 - b. Many statutes permit termination of parental rights based upon:
 - i. Absence - Abandonment of the child for a long time or a series of shorter periods of abandonment.
 - ii. Condition- A parental condition which can be diagnosed as precluding parental ability to care for the child adequately.
 - iii. Conduct- Parental behavior which has demonstrated the parents unwillingness or inability to provide adequately for the child's well being.
 - iv. Best interest of the child - The child has formed strong ties with another family and/or will be damaged by a return to the biological parents.

ASFA requirements and timelines have expanded the reasons for termination of parental rights. Refer to the 1999 amendments to N.D.C.C. 27-20-20.1. Petition to terminate parental rights – When brought – Definitions, for complete information.

- c. What factual evidence is necessary and admissible in court if parental rights are to be terminated?
- d. What if one parent will release the child and the other won't, or you cannot locate one parent?
- e. What is the appeal process?

A plan should be developed to initiate general recruitment for an adoptive family at the first Foster Care Child & Family Team meeting following a termination of parental rights. General recruitment is not necessary if the child's current placement resource has committed to adopting the child. Current caregivers should be given sufficient support to make their decision to adopt the child which will transition a child to permanence within a

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timely manner. It is not appropriate to delay a child's adoption while waiting indefinitely for a placement resource's decision.

Development of the Goal:

A clear and specific goal should be developed with all parties involved which includes the following:

1. Preparation of the child for adoption, including explaining reasons for termination of parental rights, development of a life history books, counseling around loss of parents.
2. Visitation plan designed to build the adoptive parent-child relationship.
3. Target date for placement.
4. Procedures for handling disagreements in the planning process.
5. Specific plans for follow-up services to child and family following placement.
6. Procedures necessary to finalize adoption.

Prepare the Adoption Case:

Review your case record, case plan, your notes, all letters and correspondence concerning the child. Develop a chronology of your information for termination of parental rights.

For example, list in chronological order the following information about both parents:

1. Reason, date and plan for placement. Note court orders, etc. that document these items.
2. Visits between child and parent, including dates, who made the arrangements, where the visit occurred, how the child and parent behaved and failure to show for visitation by parents.
3. Gifts given to the child - include cards and letters. Note appropriateness, whether one child in a family was left out, dates gifts were given and who gave them.
4. Financial support for child. Who paid what and when, was their court order requiring payment.
5. Parental involvement in case work plan for child's return. Document plans developed, note success and failures at goal achievement, note referrals made to other treatment providers.
6. Document parental conditions which necessitate termination of parental rights.

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7. Review all documentation kept by the foster parents throughout the course of the placement.
8. Agency service provision to the family to help in rehabilitation. Include dates of contacts, document services provided. List failed scheduled treatment appointments.
9. Periods of abandonment and agency attempts to locate missing parents.
10. Child's reaction and preference.
11. Parents reaction to situations regarding their child while in placement.

Review your chronological record with regard to state statutes for termination of parental rights.

- If you believe you have a strong case, meet with your attorney to plan to take your case to court.
- If your case is weak, begin NOW to collect the information you need. If the agency has failed to provide adequate services, you may need to plan for return home with a clear casework plan. Should that plan fail you will then have a clear documentation for termination at a future time.

When you have determined that you are ready to go to court, prepare the parents for what is to happen. This applies to voluntary as well as involuntary terminations.

1. Explain clearly to parents the nature of the court proceedings which will occur.
2. Explain clearly to parents their rights to counsel.
3. Explain to the child, if they are to be involved in this process, what is going to happen in the court proceedings.
4. Explain, when appropriate, to the foster parents the process and what is going to happen in the court proceedings.
5. Explain that foster caregivers must be provided timely written notice and the "right" to be heard in any proceeding held with respect to the child.

When Not to Select This Goal:

This goal of adoption should not be selected under the following circumstances:

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1. The child's own family wants the child and can provide adequately for their safety and well being.
2. The child wants to return to the parents.
3. The child strongly objects to being adopted.
4. The child cannot be freed for adoption.
5. No adoptive home can be found following an exhaustive search for such a home, including use of national resource exchanges.

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Guardianship 624-05-15-115-20

(Revised 2/10/07 ML #3053)

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The Adoption and Safe Families Act of 1997, (Title IV-E of the Social Security Act) recognizes guardianship as a permanency option for some children.

A legal guardianship means a judicially created relationship between child and caretaker. This can be accomplished without termination of parental rights. (See: N.D.C.C. [27-20-48-1](#) and N.D.C.C. [30.1-27.](#)).

The North Dakota Department of Human Services has developed a subsidized guardianship program for those older youth in foster care who do not have the option of returning home, living with a relative, or adoption.

Guardianship is a permanent arrangement and should be considered only after exhausting all other permanency options.

Please refer to NDDSH Service Chapter 623-10, "Subsidized Guardianship," for more information.

Alternate Permanency Placements 624-05-15-115-25**(Revised 12/1/15 ML #3461)**[View Archives](#)

The Adoption and Safe Families Act (ASFA) regulations effective March 27, 2000 require significant changes in practice related to long-term foster care, independent living, and emancipation. The changes are consistent with discouraging the use of long-term foster care, and the preference for another permanency arrangement for the child such as adoption or guardianship. Federal ASFA regulations note references to “another planned permanent living arrangement,” and no longer references to long-term foster care, independent living, or emancipation.

The Supplementary Information to federal regulations issued January 25, 2000, clarifies that it is not permissible for courts to extend their responsibilities to include ordering a child’s placement with a specific foster care provider. The child’s placement and care responsibility must be with a public agency (the State agency or another public agency with whom the State agency has an agreement). Once a court has ordered a placement with a specific provider, it has assumed the State agency’s placement responsibility.

The terminology regarding “dispositional hearing” has been replaced in ASFA at 475(5)(C) by “permanency hearing.” The requirements at 475(5)(C) require a permanency hearing no later than 12 months after foster care entry, and not less frequently than every 12 months thereafter, “. . . which hearing shall determine the permanency plan for the child that includes whether, and if applicable when, the child will be returned to the parent, placed for adoption and the State will file a petition for termination of parental rights, or referred for legal guardianship, or (in cases where the State agency has documented to the State court a compelling reason for determining that it would not be in the best interests of the child to return home, be referred for termination of parental rights or be placed for adoption, with a fit and willing relative, or with a legal guardian) placed in another planned permanent living arrangement”

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1356.21(h)(3): (Federal Regulation effective 3-27-2000)

If the State concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency plan for a child is placement in another planned permanent living arrangement, the State must document to the court the compelling reason for the alternate plan ...

The requirement for the 12-month permanency hearing (and every 12 months thereafter) applies to the child “in another planned permanent living arrangement.”

Children entering “another planned permanent living arrangement” (APPLA):

When other options such as reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative have been ruled out, and it is concluded that “another planned permanent living arrangement” is the most appropriate plan for the child, the agency must document to the court the compelling reason for the alternate plan. The child must be age 16 or greater in order to select this goal as permanency option.

The child’s case plan along with the “compelling reasons” document must be available to the court for review during the next permanency hearing.

Permanency Planning Requirements:

The quarterly Child and Family Team meetings apply to all children in foster care. This will ensure that the placement is reviewed and the case plan kept up-to-date for the court’s yearly review at the 12 month (or sooner) permanency hearing.

Another Planned Permanent Living Arrangement (APPLA) 624-05-15-115-30

(Revised 12/1/15 ML #3461)

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Another Planned Permanent living Arrangement (APPLA) is a permanency alternative permitted under ASFA that allows a young person age 16 or greater to have a "permanent home" that is not the child's home of origin, adoption, guardianship, or kinship care.

When to Select this Goal:

APPLA should be selected as a permanency goal only for a child:

1. Age 16 or greater
2. After reunification, adoption, legal guardianship, and relative placement have been ruled out.

ASFA explicitly prohibits long-term foster care as a permanency option. APPLA either will involve a permanent adult caregiver of the child or adult parental figures playing permanent and important roles in the child's life.

APPLA is intended to be planned and permanent. Planned means the arrangement is intended, designed, considered, premeditated, or deliberate. Permanent means enduring, lasting, or stable. In other words, the agency must provide reasons why the living arrangement is expected to endure. The term living arrangement includes not only the physical placement of the child, but also the quality of care, supervision and nurturing the child will receive.

How to Implement this Goal:

If the custodian concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency goal for the child age 16 or greater another planned permanent living arrangement (APPLA), the custodian must document to the court the compelling reason for the alternate plan.

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The case plan should focus on building relationships between the child and those adults who will be his or her network of support upon discharge from foster care. APPLA can certainly include family foster care, but it will usually be foster care with a particular family or individual. Most importantly, the plan should focus on the caregiver's familial relationship with the child continuing after the youth is discharged from foster care.

Examples of a compelling reason for establishing a goal of APPLA:

1. The case of a child age 16 or greater who specifically requests the custodial agency to allow them to “age out of care”;
2. The case of a parent and child who have a significant bond but the parent is unable to care for the child because of an emotional or physical disability and the child's foster parents have committed to raising him/her to the age of majority and to facilitate visitation with the disabled parent; or
3. The Tribe has identified APPLA for the child.

In cases in which a compelling reason has been shown that it would not be in the child's best interests to return home, to have parental rights terminated, to be placed for adoption, to be placed with a fit and willing relative, or to be placed with a legal guardian, whether and, if applicable, when the child, aged 16 or older, will be placed in another planned permanent living arrangement. The court shall:

1. Verify the child is age 16 or greater;
2. Ask the child whether the child has a desired permanency outcome of APPLA,
3. Make a judicial determination explaining why APPLA is the best permanency plan for the child, and
4. Identify the compelling reasons it continues not to be in the best interest of the

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Basic and Specialized Family Foster Care 624-05-20

Basic Family Foster Care 624-05-20-05

(Revised 2/10/07 ML #3053)

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This is 24-hour care and supervision of a foster child provided by a licensed family foster home. It includes safety and well being for the child as well as teaching basic life skills such as feeding, cleanliness, and self discipline and provides economic, recreational and social experiences and education which are appropriate to a child's age and mental and physical capacity. This level of care is intended for children who would experience the usual foster child separation, placement, and developmental problems but would have no other severe outstanding problems. Payment for this type of care includes maintenance payments and irregular items as indicated in North Dakota Department of Human Services Service Chapter 623-05.

Specialized Family Foster Care - Excess Maintenance Payments (EMP) 624-05-20-10**(Revised 2/10/07 ML #3053)**[View Archives](#)

This is 24-hour care and supervision of a foster child with special problems, the severity of which places undue demands on the foster parent's physical, emotional, and/or material resources beyond the demands expected in normal foster parenting. Specialized care homes are foster homes in which excess maintenance payments (EMP) are made on an individual basis when the foster child requires special services or based on the child's difficulty of care level.

These special services would involve an unusual amount of one or more of such things as: time, physical work, skill, stress, or cost to the foster parent. In the area of time, an unusual amount could be required for feeding, dressing, and/or supervising. In regard to the physical work in special situations, there could be a need for an unusual amount of washing, cleaning, lifting, and/or transporting. In the area of skill, the foster parent would need ability in teaching, and in the handling of behavior and/or medical problems. In the area of stress, consideration would be given to the strain on the foster parents when the child's needs require performing distasteful tasks, constant supervision, the meeting of frequent acute situations, and/or the handling of abnormal behavior problems. In the area of costs, consideration would be given to the destruction of household equipment, the unusual wear and tear of walls and woodwork and respite from child care demands.

Approximately 25% of the children in family foster care in North Dakota fall within this category. Payments to foster parents providing this type of care include the age appropriate foster care maintenance, and irregular items as stated in North Dakota Department of Human Services Manual Chapter 623-05 and excess maintenance payments (EMP) subject to the requirements noted in this manual chapter. Also, refer to NDDHS 623-05, "Difficulty of Care/Excess Maintenance Payments (EMP), Category 60."

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Relief care: See 623-05

Only licensed or affidavit homes should be used for relief care.

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Examples of Problematic Behavior or Needs

624-05-20-10-05

(Revised 2/10/07 ML #3053)

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Some examples of problematic behavior or needs of the foster child which might qualify the foster parent for the EMP payment include stealing, lying, swearing, alcohol/drug abuse, runaway, emotional problems, self-destructive behavior, suicidal thoughts, continuous supervision related to a medical condition, unusual special dietary needs, teaching the child self-help skills (primarily for the blind, deaf or developmentally disabled), and others. The above list is to serve as a guideline and is not intended to be all inclusive.

Required Training for Foster Parents Providing Specialized Care 624-05-20-10-10

(Revised 10/15/12 ML #3341)

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Foster parents receiving specialized payments (EMP) are required to take the following training:

1. Initial orientation
2. PRIDE Core Service Course
3. PRIDE Core Training Curriculum, as appropriate
4. Annual Training – 12 hours

The initial orientation training is to be conducted by the county social service board, regional human service center staff, the private agency or a combination of these agencies. Foster parents licensed July 1, 1985 to January 1, 1998, were required to take the basic foster family course within six months of licensure. Since January 1, 1998, prospective foster parents must also take the PRIDE Pre-service Course prior to licensing. (PRIDE training for foster parents commenced January 1, 1998, and availability has increased since that time.) The foster parents must take, if provided or approved, at least twelve hours of training per year effective July 1, 1985. Initial and annual fire safety training hours will not be counted toward the minimum number of training hours required for initial and annual foster parent licensure. Foster parents must also be willing to take the specialized training PRIDE Care modules that will be required when available and prior to receiving the enhanced maintenance payment.

It is the responsibility of the county social service boards and regional human service centers or the private agency to assure that this training is made available, either through direct provision or written approval to the foster parents providing specialized care. It is the responsibility of the foster parent to avail themselves of the training when provided or approved.

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Foster parents who do not take the above identified training even though it is available to them and even though they are providing foster care to a child whose behavior would qualify them as providing specialized care will not be eligible for excess maintenance payments. It is the responsibility of the regional foster care supervisor to assure that all foster parents receiving EMP's care meet the above requirements. The regional foster care supervisor does have the authority to waive the required training under appropriate circumstances. (Example: If a foster parent had a degree in special education and was caring for a mentally retarded child, then it would be appropriate to waive the training in this type of situation.)

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Levels of Specialized Family Foster Care Payments 624-05-20-10-15

(Revised 2/10/07 ML #3053)

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Specialized family EMP levels and amounts are as follows:

1. Level 1 -- \$50.00 per month
2. Level 2 -- \$100.00 per month
3. Level 3 -- \$150.00 per month
4. Level 4 -- Refer to NDDHS 623-05 for explanation

Approval of Specialized (EMP) Payments
624-05-20-10-20**(Revised 2/10/07 ML #3053)**[View Archives](#)

The "Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form" (SFN 1865) must be completed when an excess maintenance payment (EMP) is being considered. The form is to be completed by the child's foster care case manager with the assistance of the Foster Care Child & Family team.

Approval of specialized level EMPs shall be made by the permanency planning committee/Foster Care Child & Family team with regional supervisor approval. Cooperation between the permanency planning committee/team members is essential to the functioning of the specialized EMP system. Professionals need to recognize the committee's effort to try to achieve fairness and uniformity in the application of the EMP for children. Each regional supervisor is responsible for determining the comparative difficulty of care that the children in their region require. It is felt that this procedure will provide regional uniformity and still provide for professional judgment. It is the responsibility of the regional foster care supervisors to maintain the standard for uniformity of payment level in the region. Regional supervisor questions regarding appropriateness of EMP levels will be discussed with the Administrator, Foster Care Program.

Before EMP payment can be made for specialized family foster care, there must be:

1. A completed (SFN 1865), "Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form, completed and signed by the case manager, county director (or designee) and regional supervisor (or designee).
2. A signed (**SFN 904**), "Agreement to Furnish Specialized Family Foster Care Services" signed by the foster parent, county social service board representative, and regional foster care supervisor.

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Specialized Payment Procedure 624-05-20-10-25

(Revised 2/10/07 ML #3053)

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The payment for EMP specialized family foster care is made with foster care funds.

The child's social worker is responsible for getting the signed agreement (SFN 904, "Agreement to Furnish Specialized Family Foster Care Services"). The agreement must be signed by the foster parent, administrative county and regional supervisor. It is important that this be done in a timely manner when the decision is made that this excess payment need exists. It is not the Department's practice to back date agreements. The duration of the agreement should not exceed the end of the court order, or the end of the biennium, whichever is earlier.

The EMP payment in Specialized Family Foster Care is handled as part of the maintenance payment as an irregular payment on CCWIPS. Refer to Service Chapter 623-05 for more information.

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Request for an Adjustment in the Level of Excess Maintenance Payment (EMP) 624-05-20-10-30

(Revised 10/15/12 ML #3341)

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Any foster parent or other member of the permanency planning committee/Foster Care Child & Family team may request that the committee reevaluate the level of care whenever there is a significant change in the child's functioning. Review of the need for an EMP payment will be required with each review of the permanency plan.

Therapeutic Family Foster Care 624-05-20-15 **(Revised 10/15/12 ML #3341)**

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Introduction:

This manual information represents North Dakota's model of Therapeutic Family Foster Care (TFFC). The North Dakota model was designed to meet the needs of children who would otherwise require a more restrictive setting, such as a group or residential facility. Characteristics of the North Dakota model include the preference for only one child in a therapeutic family foster home (TFFH), with a maximum of two in some situations; small social worker caseloads (8-10); and, intense agency support for the TFFH. This is the model the Department is interested in purchasing for those children who need the TFFH level of care, meet the eligibility requirements for TFFC, and where a TFFH is available to meet the child's needs. TFFC is available statewide; however, due to resource constraints it is limited.

Therapeutic family foster care is family care in a specially selected foster home, where the foster parents have participated in intense preparation and training for meeting the needs of children who are at risk of placement in a more restrictive setting. It provides more opportunity for one-on-one work by the TFFH and the child, and a more intense level of support and availability to the TFFH by the social worker who has a limited number of therapeutic family foster care cases. TFFC is intended to be in lieu of a more restrictive setting for children and youth in need of out-of-home care.

Licensing & Placement Limits:

Due to the intensity of needs of youth in care, the TFFH license is limited to two children. Preferably, one child will be placed in a TFFC home. Two TFFC children in the home is maximum. If it is determined that the home may be used for more than one child at any time, the license is issued for two. This accommodates brief relief care stays, without the need to amend the foster home license. It is important to keep in mind that licensing and placement are separate and distinct issues. In terms of placement, North Dakota policy states a preference for one child in a TFFH with two (occasional) as

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the maximum. The maximum of two includes the relief care placement or a mother-infant placement. Licensing requests for more than two in therapeutic family foster homes are handled as exceptions by the regional supervisor in consultation with the Administrator, Foster Care Program, Children and Family Services.

Financial County Related to TFFC Placements:

The administrative county for purposes of TFFC is similar to the procedure for children in group/RCCF/PRTF care. The custodian refers the child, ensures that permanency planning takes place, maintains the county case file for purposes of ensuring that custodial duties are carried out, compliance issues met, and that payment is processed in CCWIPS. In other words, the working relationship with the TFFC agency and their financial county is established. The county of financial responsibility maintains all case management responsibility not vested in the custodian.

Referrals to Therapeutic Family Foster Care:

Therapeutic Family Foster Care is a resource for children at risk of a more restrictive placement setting. It is one of the resources available to children in the whole spectrum of out-of-home care (relative care, family foster care, therapeutic family foster care, group care, residential child care, residential treatment). It is intended to address the child's needs at the time, to enable return to a less restrictive setting (family foster care, relative care, or home). TFFC is a very limited resource and is not used for emergency or shelter care, nor is it considered a resource for a planned, long-term foster care placement.

Due to the availability limits of TFFC, only those children who cannot be served in other family foster care homes should be referred to TFFC. The needs of most young children and medically fragile children can most often be met in other foster care homes, sometimes with the addition of excess maintenance payment or other resources. On the other hand, adolescents with behavioral/emotional problems at risk of placement in a more restrictive setting are appropriate referrals to TFFC.

Cross Regional Referrals:

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Regional supervisors and custodians from the referring and receiving county must be involved in child placement planning decisions. All prospective referrals to the therapeutic family foster care program in a region other than where the custodian is located must be approved by both the referring and receiving regional supervisor(s) before the referral is processed.

Multiple Placements in a Therapeutic Family Foster Home:

North Dakota policy states a preference for one child in a therapeutic family foster home with two placements as the maximum. In instances where a second placement is planned, the custodian must review the appropriateness of the placement with the regional supervisor prior to processing the referral. The custodian of the child currently placed in the therapeutic family foster home must be involved in the discussions regarding the possible placement of a second child into the home. It is imperative that all parties involved in utilizing/referring to the same therapeutic family foster home come to an agreement prior to processing the referral.

Eligibility for TFFC:

1. The child must be in need of the TFFC level of care. Serious consideration must be made to meet needs in a less restrictive setting prior to referral to TFFC. Allow sufficient time to adequately evaluate the child's needs prior to referral to TFFC. The child's referral and entry to TFFC should be planned.
2. Any child for whom the NDDHS-CFS has a financial responsibility for maintenance payment may receive therapeutic family foster care through the Department's therapeutic foster care program, as long as other eligibility criteria is met.
3. Court order with finding (deprived, unruly, delinquent) and appropriate foster care information, i.e. contrary language, prevention and reunification language, independent living language, appropriate custodian, etc. The court order, with the above information, needs to be in place prior to the referral to TFFC.
4. DSM-IV diagnosis.
5. Medical assistance eligibility.

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6. All of the federal and state requirements for foster care (i.e. case plan, periodic reviews, permanency planning/Foster Care Child & Family team meetings, etc.) also apply.
7. Regional Supervisor approval (Recommendation Concerning Foster Care Payment in Group Care, RCCF, PRTF, TFFH, now completed in FRAME) for a specified period of time.

As is the case of any placement planning, the situation must be discussed in the permanency planning/Foster Care Child & Family team meeting setting. Questions regarding appropriateness of referral for TFFC should be directed to the regional supervisor before the referral is processed.

Length of stay in TFFC varies according to the child's needs and progress. TFFC is not intended to be used as emergency or shelter care, nor is it intended to develop into a long-term placement. Current projected length of stay in TFFC is estimated at 9-18 months. Because TFFC is a limited resource, a dual approach is required to maximizing the availability of this resource for children in need of care, namely:

1. Ensure that TFFC is used only for children in need of the TFFC level of care, and
2. When the child is ready for a less restrictive environment, transition the child and make the TFFC bed available to serve another child.

One way to ensure that all parties are fully aware of the intended purpose and use of TFFC is to commence discharge planning at the onset of TFFC placement, and involve all parties pertinent to the child's foster care situation, i.e. TFFH, TFFC social worker, child and parents, custodian, etc.

EXCEPTION: TFFC Accelerated Referral/Intake:

The regional supervisor may make an exception to the above policy for TFFC/referral/intake in a situation where the child has a temporary foster care order; a court hearing has been scheduled; the child is eligible for medical assistance; and the custodian has evaluative information on the child sufficient to determine that TFFC is appropriate.

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This exception to the TFFC referral and intake policy is intended to accelerate the youth's TFFC intake when absolutely necessary. The exception does not apply to situations where the child's need is shelter care. This policy exception provides quicker access to TFFC when it is clearly the service needed by the child, a temporary foster care order is in place; a longer foster care order is forthcoming; and the custodial agency has not had the opportunity for a planned entry to TFFC. The expectation then, is the child will remain in TFFC for treatment after the order is issued.

TFFC Accelerated Intake Eligibility:

1. Temporary foster care court order.
2. DSM-IV diagnosis.
3. Permanency planning committee/Foster Care Child & Family team review.
4. Medical assistance eligibility.
5. NDDHS-CFS has financial responsibility for the child's maintenance payment.
6. Regional supervisor approval (Recommendation Concerning Foster Care Payment in Group Care, RCCF, PRTF, TFFH, in FRAME) for TFFC for a period **not to exceed 40 days**: The regional supervisor notes on the approval that the situation is a TFFC Accelerated Intake-Exception.

40-day approval provides ample time for the 30-day hearing and securing the foster care court order.

7. At this point, the TFFC case must meet all of the qualifications for TFFC. If all requirements for TFFC are not met, the youth's eligibility for TFFC ceases.

Please note that the accelerated intake provision is a policy exception, and it is expected that it will be used infrequently. It does not change the policy regarding TFFC intake.

Rate for Therapeutic Foster Care:

Refer to NDDHS 623-05 and NDDHS 447-10 for Therapeutic Family Foster Care rate information and billing procedure.

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18+ Continued Care 624-05-23

(Revised 12/1/15 ML #3461)

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A child in 18+ Continued Care is still considered to be a “child” for the purposes of foster care as noted in NDCC 27-20. The child is considered an adult in all other systems; therefore releases of information are needed.

PROGRAM ELIGIBILITY AND VERIFICATION

Eligibility For Continued Foster Care

18+ Continued Care is available to eligible current and former foster care children up to the age of 21 years old if the child meets certain criteria. The child must have aged out of foster care while in the custody of a North Dakota public agency including; county social services, tribal social services, and the Division of Juvenile Services (DJS). Tribal Social Services foster care youth must have been Title IV-E eligible prior to discharge in order to qualify for 18+ Continued Care set forth in this policy. The length of time that a child is in foster care does not determine their eligibility for 18+ Continued Care. The 18+ Continued Care program philosophy encourages youth to stay in family foster care while they continue to pursue independence. Any arrangements made for placement in settings other than family foster care must be staffed with, and approved by the state office.

Living Arrangements

The following types of living arrangements are allowable:

- ☐ Licensed Foster Care Homes
- ☐ College Dorms
- ☐ Group Homes/ RCCF's

A child generally will not be eligible for 18+ Continued Care if they are living in an apartment. Special circumstances to allow this will need to be discussed with the Regional Supervisor.

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A child must:

1. Be between the ages of 18 and 21.
2. Need continued foster care services.
3. Have aged-out of foster care at age 18 or greater from County Social Services, Tribal Social Services (as Title IV-E eligible) or Division of Juvenile Services.
4. Qualify in at least one of the program eligibility categories.
5. Agree to and sign the 18+ Continued Foster Care Agreement (SFN 60).
6. Return to foster care within six months of their last discharge date.

Categorically Eligible

Verification of initial and ongoing eligibility for program participation is the responsibility of the case manager or the agency's agreed upon designee. A release of information between the agency, child and verifying entity (school, employer, etc.) is needed.

Eligibility may be reached in a combination of the following categories:

1. Education

Eligibility: The child must participate in secondary or post-secondary education on a full or part time basis. A child who is attending school on a part time basis is encouraged to also work or volunteer. Arrangements should be negotiated between the child and the case manager. If the child is on an extended school break (i.e. summer break) or if the next school session is more than 30 days away, the child should work or volunteer until the session begins.

Verification: Verification must be provided in the form of an enrollment or acceptance letter, copy of grades, a letter from the school, class schedule, tuition receipt, etc. The frequency of verification must be every 9 weeks, quarter, or semester depending on the program in which the child is involved or more often if required by the case manager. Compliance of continued eligibility must be discussed at the monthly case manager visitation meeting and at every quarterly Foster Care Child and Family Team Meeting.

2. Employment

Eligibility: The child must work at least 80 hours per month.

Verification: Verification must be provided in the form of a pay stub, letter from employer, a copy of an application for employment, etc. The frequency of verification must be monthly or more often if required by the case manager. Compliance of continued eligibility must be discussed at the monthly case manager visitation meeting and at every quarterly Foster Care Child and Family Team Meeting.

3. Employment Preparatory Program

Eligibility: The child must attend a program that is designed to promote or remove barriers to employment. There could also be educational components tied to this type of programming; for example Job Corps. If the start of the next program session is more than 30 days away, the child should work or volunteer until the program begins.

Verification: Verification must be provided in the form of an application, enrollment or acceptance letter, copy of grades, a letter from the program, program schedule, tuition receipt, etc. The frequency of verification must be every 9 weeks, quarter or semester depending on the program in which the child is involved or more often if required by the case manager. Compliance of continued eligibility must be discussed at the monthly case manager visitation meeting and at every quarterly Foster Care Child and Family Team Meeting.

4. Medical Condition or Disability

Eligibility: The child must be unable to participate in educational or employment activities stated above due to a medical condition or disability. A medical condition or disability would have likely been identified long before a child enters 18+ Continued Care.

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Verification: A statement signed by a licensed physician, physician's assistant, psychologist, or Vocational Rehabilitation Counselor that documents the child's medical condition or disability (which can include a mental health diagnosis) and their inability to go to school, work, or participate in job training. Compliance of continued eligibility must be discussed at the monthly case manager visitation meeting and at every quarterly Foster Care Child and Family Team Meeting or more often if required by the case manager.

Grace Period

In the event a child does not meet an eligibility category set forth above, a 30 day grace period is allowable to enter under one or a combination of the categories. During the grace period, volunteer work is encouraged while a child awaits an offer for employment or acceptance to an educational program.

Return to Foster Care

18+ Continued Care participants must have been discharged from foster care at the age of 18 or greater from a North Dakota public agency; including county social services, tribal social services, or Division of Juvenile Services (DJS). The agency where the child last exited foster care will be the point of contact for the child requesting a return to foster care. For example; in the case of a child under the custody of DJS, who exited foster care at or after the age of 18, the child should contact their most recent DJS case manager or agency to identify steps on how to return to foster care.

The child must return to foster care within six months of their last foster care discharge date. If the date falls past the six month re-entry maximum, contact the Regional Supervisor to discuss. There is no limit to the number of times that a child can return to foster care. Eligibility must be assessed at the time of the child's request to return to foster care. The voluntary 18+ Continued Foster Care Agreement (SFN 60) must be signed between all three parties for 18+ Continued Care to occur.

Residency

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Some children may be in foster homes, group facilities or dorms in other states and continue to want or need the support of a foster home or group facility. A North Dakota foster child living out of state is eligible for 18+ Continued Care. A child, who ages out of foster care under the custody of another state, is not eligible for North Dakota 18+ Continued Care even if they move to North Dakota.

Interstate Compact Placement of Children (ICPC) does not apply to those over the age of 18, however continued courtesy case management requests of out of state partners is allowable and encouraged.

Criminal Background Checks

A child who remains in or returns to foster care in 18+ Continued Care is still considered to be a “child” for the purposes of foster care as noted in NDCC 27-20. Therefore, it is not possible to conduct a fingerprint based criminal background check. However, it is possible for agencies to conduct a free web-based search.

<http://www.ndcourts.gov/Search/Query.asp>

<http://publicsearch.ndcourts.gov/default.aspx>

<http://pa.courts.state.mn.us/default.aspx>

CASE MANAGEMENT

Case Management Responsibilities

All case management responsibilities applicable to children under the age of 18 in foster care will continue for a child participating in 18+ Continued Care. Case management requirements continue regardless of the child’s IV-E eligibility and the case is subject to review during a CFSR and if applicable during a Title IV-E audit. To assist with monthly face to face visits, the use of the created tool “18+ Monthly Face to Face” contact form is encouraged.

Agencies must advise a child of the availability to continue in foster care and receive benefits until they reach the age of 21. This discussion should be done within 90 days of their 18th birthday, in conjunction with the

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development of the required transition plan. To assist with notification to the child a brochure (DN 1174) was developed for distribution.

If a child currently in foster care notifies the agency of their intent to participate in 18+ Continued Care, the agency will work with the child's foster care provider to see if the continued placement would be appropriate. If the placement is not appropriate, recruitment efforts for a new placement resource should begin.

For a child returning to foster care after being discharged, the case manager must complete the assessment of safety and risk. If the child is in crisis, the case manager should provide crisis intervention services (i.e. connecting the child with resources that provide temporary housing, food, emergency medical care, etc.). If a foster care placement is not available at the time the child requests to return to foster care, the agency will begin recruitment efforts immediately. A child is not in foster care until a placement resource is identified and all three parties sign the 18+ Continued Foster Care Agreement (SFN 60).

18 + Continued Foster Care Agreement

The 18+ Continued Foster Care Agreement (SFN 60) is a three party agreement willfully entered into between the Department of Human Services or its agent (agency), the child, and the foster care provider. This option is used for any youth *turning 18 that wishes to continue in foster care and whose custody order expires, or a child over the age of 18 that wishes to *return to foster care within 6 months of discharge**. When the child turns 18 and continues in foster care, the 18+ Agreement does not start a new foster care episode – it is simply a continuance of the current foster care episode because the child never left care. If the child returns to care, the 18+ Agreement will initiate a new foster care episode.

At times, custodians will receive custody extending beyond the child's 18th birthday. In this instance, the custody order will remain in effect and regular foster care will continue. **An 18+ Continued Care Agreement is not necessary if a custody order is in effect.**

Multiple Agreements:

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When the 'effective date' of the 18+ Agreement is entered into FRAME, the duration start and end dates are automatically populated. The end date reflects the day prior to the child's 21st birthday. When an 18+ Agreement is no longer valid, it is necessary for the case manager to "edit" the end date to accurately reflect the date that the 18+ Agreement ended with that specific provider. This will eliminate "multiple" effective agreements in FRAME.

Continued Care Example:

1. If the child requests to remain in foster care upon turning age 18 on February 7th, and all three parties are in agreement, the agreement effective date will be February 6th, which is one day prior to the child's 18th birthday.

Return To Care Examples:

1. If the child requests to return to foster care on March 1st (4 months post discharge) and all three parties are in agreement, the agreement effective date will be March 1st.
2. If the child requests to return to foster care on March 1st (4 months post discharge), but there is not a foster care provider identified until April 5th (5 months 5 days post discharge), the agreement effective date will be April 5th. Agencies can begin recruitment efforts for a foster home on March 1st, but this child is not in foster care and the 18+ Continued Foster Care Agreement (SFN 60) is not effective until there are three willing parties (child, agency, and foster care provider).

18+ Continued Care Placement Process

Child In Continuous Foster Care

- Through the course of transition planning, the agency will educate the child and current foster care provider of 18+ Continued Care, its purpose, eligibility requirements, and expectations.

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- The child makes their intention known to the agency that he/she would like to voluntarily remain in foster care once reaching the age of 18.
- The agency will review eligibility categories (education, employment, preparatory program, medical condition/disability).
- The agency will continue to meet with the child to conduct ongoing safety and risk assessments.
- If the child cannot remain in his/her current foster care placement, the agency will work to identify a new placement resource.
- The agency, child, and foster care provider will voluntarily sign the 18+ Continued Foster Care Agreement (SFN 60) effective the date prior to the child's 18th birthday.
- The agency will begin the court process seeking judicial determinations. Agency will draft an affidavit with requisite language seeking placement and care responsibility of the child.
- Judicial determinations must be made within 90 days of the effective date on the 18+ Continued Foster Care Agreement (SFN 60).
- Agency will follow existing foster care policy on case management duties and responsibilities.
- Agency will continue to update the case in FRAME. Initial changes will include foster care reason for care, foster care program period, court order, placement, care case plan, etc.
- Agency will meet at least monthly for face-to-face contact with the child.
- Agency and Regional Supervisor will co-chair Foster Care Child and Family Team meetings.
- Agency will assist the child in updating his/her personalized transition plan, including goal setting to allow the team to measure his/her achievement toward independence.
- Agency will provide independent living resource and referral (Ex: Discussions about home management, budgeting, referral to Chafee Independent Living, etc.).
- Agency will coordinate and communicate with foster parents, service providers, school, etc.
- A permanency hearing must be completed within 12 months of the date that the child entered foster care and every 12 months thereafter.
- The 18+ Continued Foster Care Agreement (SFN 60) remains in effect until the permanency goal is reached, one of the three parties requests to terminate, or the child reaches the age of 21.
- 18+ Continued Care case files are subject to Children and Family Service Reviews (CFSR) and Title IV-E federal foster care audits.

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Child Returning To Foster Care Process

- The child contacts the public agency (county/tribal social services, DJS) in which he/she was last in foster care.
- The agency will meet with the child to identify steps on how to return to foster care.
- The agency will conduct a safety and risk assessment, which can include a free web-based background check search.
- The agency will review the program eligibility requirements.
- The agency will work to identify a placement resource for the child.
 - If no placement resource is available, the agency will provide the child with resource referral and begin recruitment for a foster home. The child is not in foster care until there is a three party agreement in place.
 - If a placement resource is identified, the agency, child, and foster care provider will fully enter into the 18+ Continued Foster Care Agreement (SFN 60).
- The agency will begin the court process seeking judicial determinations. Agency will draft an affidavit with requisite language seeking placement and care responsibility of the child.
- Judicial determinations must be made within 90 days of the effective date on the 18+ Continued Foster Care Agreement (SFN 60).
- Agency will follow existing foster care policy on case management duties and responsibilities.
- Agency will continue to update the case in FRAME. Initial changes will include foster care reason for care, foster care program period, court order, placement, care case plan, etc.
- Agency will meet at least monthly for face-to-face contact with the child.
- Agency and Regional Supervisor will co-chair Foster Care Child and Family Team meetings.
- Agency will assist the child in updating his/her personalized transition plan, including goal setting to allow the team to measure his/her achievement toward independence.
- Agency will provide independent living resource and referral (Ex: Discussions about home management, budgeting, referral to Chafee Independent Living, etc.).

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- Agency will coordinate and communicate with foster parents, service providers, school, etc.
- A permanency hearing must be completed within 12 months of the date that the child entered foster care and every 12 months thereafter.
- The 18+ Continued Foster Care Agreement (SFN 60) remains in effect until the permanency goal is reached, one of the three parties requests to terminate, or the child reaches the age of 21.
- 18+ Continued Care case files are subject to Children and Family Service Reviews (CFSR) and Title IV-E federal foster care audits.

Termination from 18+ Continued Care

- Termination from foster care will occur if the permanency goal is reached, one of the three parties requests to terminate the agreement, or the child reaches the age of 21.
- The agency must notify the child via letter sent to his/her last known address within three days of the decision to terminate the 18+ Continued Foster Care Agreement. The child is informed they have the option to return to foster care within six months from their last date of discharge. A copy of this notification will become part of the child's case file.
- Child is discharged and the foster care program is closed.

Trial Independence

A child discharged from foster care at the age of 18 or older may be placed on Trial Independence for no greater than six months. Trial Independence allows for the child to maintain IV-E eligibility and return to foster care at any time before the six month expiration. During Trial Independence all case management responsibilities end, the foster care program is closed and the court order may be vacated or allowed to expire.

Documentation is required in the case file indicating that a child is discharged from foster care under Trial Independence. This documentation will support IV-E eligibility determination in the event he/she returns to foster care. The "Notice of Change" (SFN 45) has been revised to include a Trial Independence field.

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School District Notification

18+ Continued Care requires agencies to follow existing policy on school district notifications. Communication with the Department of Public Instruction is encouraged to determine tuition standards.

Family Connections

Agencies must document the child's interest in pursuing involvement with their family after they turn age 18. If the child is interested in maintaining family connections, the agency must provide for visitation or other ongoing interactions, unless such interaction would be harmful to the child. Documentation in the case file regarding family connections must meet the requirements of the Children and Family Service Review (CFSR).

Transition Planning

Transition planning is strengths based and directed by the child. Agencies should include the child in conversations related to their independence and allow them to lead their Child & Family Team meetings when appropriate.

Current policy states, a transition plan is required no greater than 90 days prior to the child's 18th birthday. For the purposes of 18+ Continued Care, transition plans should then be updated as needed and monitored on an ongoing basis until the child is discharged from foster care. Agencies must use SFN 494 "Transition Checklist" to ensure that the requirements of youth transition plan are met.

Chafee Independent Living Program

Participation in the voluntary Chafee Independent Living Program is encouraged. Chafee Independent Living eligibility criteria and program standards can be found in Foster Care Services – Chafee Foster Care Independence Program 624-10.

Foster Care Recruitment

18+ Continued Care may require specialized recruitment efforts for foster homes. Agencies are encouraged to include these efforts in their recruitment and retention plan. Agencies are also encouraged to use the option of a statewide search to locate the best foster care provider match.

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JUDICIAL DETERMINATIONS

The 18+ Continued Foster Care Agreement (SFN 60) must be signed by the agency, the child, and the foster care provider for any child who chooses to remain in or return to foster care. Foster care payments are available only for the first 90 days of the child's voluntary placement in foster care unless the required judicial determinations have been made.

There must be a court order that gives a public agency (county social services, tribal social services, DJS) placement and care responsibility within 90 days of the effective date noted on the 18+ Continued Foster Care Agreement (SFN 60). The court order does not have to be the result of an actual court hearing.

In order to claim foster care funds for a child, the following judicial findings must be included in all court orders for children age 18 to 21, remaining in or returning to foster care. No payment can be made to support a child's foster care placement without each and every required finding.

Every youth age 18 to 21, remaining in foster care or returning to foster care, must have the following judicial findings. No payment can be made to support a youth's stay in care without each and every required finding.

It is highly recommended that the affidavit containing the case details be "Incorporate By Reference and made part of this order."
NDCC 27-20-30.1(2)

Every 18+ Court Order Requires
1. A judicial determination that [youth's name] is between the ages of eighteen and twenty one years and is in need of continued foster care services.
2. A judicial determination that [youth's name] is not deprived, unruly or delinquent.
3. A judicial determination that [youth's name] requests to [remain in or return to] foster care pursuant to the "continued foster care

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Every 18+ Court Order Requires

agreement”, willfully entered into between the Department of Human Services or its agent, the youth, and the foster care provider.

4. FOR 18+ YOUTH **CONTINUING IN** FOSTER CARE

- a. **A judicial determination that it is in the best interest** of this youth to **remain in** foster care, **and**
- b. **A judicial determination that reasonable efforts were made** to meet this youth’s needs before a foster care placement for a youth remaining in care for continued foster care purposes. (Detail the agency efforts and list services provided to meet the youth’s needs.)

5. FOR 18+ YOUTH **RETURNING** TO FOSTER CARE

- a. **A judicial determination that it is in the best interest** of this youth to **return to** foster care, **and**
- b. **A judicial determination that reasonable efforts were made** to meet the youth’s needs before a foster care placement. (Detail the agency efforts and list services provided to meet the youth’s needs.)

6. A judicial determination that [youth’s name] has satisfied the education, employment or disability requirements as set forth by the law.

7. Permanency Hearing: [**youth’s name**] will be required to appear at a Permanency Hearing before this court on or before 12 months from the date of the last permanency hearing, or 12 months from the date that the youth is considered to have **entered** foster care.
 - a. **A judicial determination** with detailed findings that the agency has made reasonable efforts to finalize the permanency plan specific to the youth.
 - b. For the permanency goal of **APPLA (Another Planned Permanent Living Arrangement)**, the court shall:
 - vii. Verify the youth is 16 years of age or older
 - viii. Ask the youth whether they have a desired permanency outcome of APPLA,
 - ix. Make a **judicial determination** explaining why APPLA is the best permanency plan for the youth, and
 - x. Identify the compelling reasons it continues not to be in the best interest of the youth to return home, be placed

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Every 18+ Court Order Requires

for adoption, be placed with a legal Guardian, or be placed with a fit and willing relative.

- | |
|---|
| 8. In the dispositional and in the permanency hearing, the court shall make a finding that services have been/will be provided to assist the youth in making the transition from foster care to independent living. |
| 9. A judicial determination that the [Administrative county or Agency/tribal council of a recognized Indian tribe] shall continue to provide foster care case management. |
| 10. A judicial determination that the [Administrative county or Agency/tribal council of a recognized Indian tribe] must have care and placement responsibility of this youth |
| 11. A judicial determination that there are no grounds to file a petition to terminate parental rights under chapter 27-20. |
| 12. Out of State: For out-of-state placements the court must determine if the placement continues to be appropriate and in the best interest of the youth. |

Permanency hearings are required every 12 months from the date that the child entered foster care. It is expected that most children in 18+ Continued Care will have a permanency plan of Another Planned Permanent Living Arrangement (APPLA). In addition to the identified permanency plan of APPLA, the court order must also address the agency's efforts to prepare the child to meet the permanency goal. The agency's efforts toward that goal would include activities outlined in the child's case plan. The permanency court order must be the result of an actual hearing. Special attention should be given to children who "remain" in foster care. The permanency hearing may be on a different track than a child that "returns to" foster care. For example, a child entered foster care on 3/1/11, when the child was age 17. If not held before, a permanency hearing is required no later than 3/1/12. If that child turns age 18 on 2/1/12 and an 18+ court order is obtained with an expiration date of 2/1/13, the permanency hearing is still required on 3/1/12, unless the

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permanency hearing was held at the same time that the 18+ court order judicial determinations were made.

The agency must notify the foster care provider of any hearing held with respect to the child. A copy of the written notification should be kept in the child's case file.

Compelling reasons not to file a termination of parental rights is a requirement for 18+ Continued Care. Compelling reasons for not filing a TPR will be a judicial determination that there are no grounds to terminate parental rights under NDCC 27-20.

For children with an adjudication of delinquent, court orders are often extended past their 18th birthday. These children remain in "regular" foster care and the requirements under 18+ Continued Care do not apply until the court order expires and no new court order has been entered. It is at that time they can enter 18+ Continued Care or start their 6 months return option.

ICWA requirements do not apply in 18+ Continued Care.

The following "**Court Order**" options are available in FRAME:

- **18+ Court Order**
- Dispositional Order
- Division of Juvenile Services
- Permanency Hearing Order
- **18+ Court Order/Permanency**
- Removal/TCO/Shelter Care
- TPR

The only court order options to use in the 18+ program are indicated above as bold and underlined. The 18+ Court Order is entered in cases where a permanency hearing was not held and permanency findings are not part of the court order. Generally, this is selected in situations where a court order was obtained for youth returning to foster care. This court order can be obtained through a paper process.

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If the court order is the result of an actual hearing that addressed the child's permanency plan, please choose the 18+ Court Order/Permanency option. **Permanency hearing requirements apply to all children who have turned 18 and continue in foster care, or return to foster care.** A child that continues in foster care requires permanency findings within 12 months of their removal and every 12 months thereafter. A child returning to foster care will require permanency findings 12 months from the effective date of the 18+ Continued Care Agreement, **not** the effective date of the new court order.

EXAMPLE:

A child entered foster care on 3/1/11, when the child was age 17. A permanency hearing is required no later than 3/1/12. If that child turns age 18 on 2/1/12 and an 18+ Court Order is obtained with an expiration date of 2/1/13, the permanency hearing is still required on 3/1/12.

In the above example, it is strongly suggested that an 18+ permanency hearing be held in situations where a child continues in foster care to ensure that the requisite 12 month permanency finding requirement is not missed.

TITLE IV-E ELIGIBILITY

All Title IV-E eligibility requirements that apply to children under age 18 also apply to children in 18+ Continued Care. A child age 18 or greater must meet at least one of the 18+ Continued Care program eligibility categories as outlined in previous sections. A child's case file must contain documentation of and verification of both program eligibility and Title IV-E eligibility.

Match symbols allowed for 18+ Continued Care children are federal match (FM) and regular match (RM). Emergency Assistance (EA) is available only in the situation described below.

Process

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- 1. Children who currently are in foster care with an “Understanding of Parties” Agreement (Voluntarily signed before 1/1/12):**
 - a. All 18+ Continued Foster Care Agreements (SFN 60) are effective 1/1/12. The agreement must be signed by all three parties.
 - b. A court order must be in effect within 90 days of January 1, 2012, containing the requisite court order findings for foster care providers to continue to receive payment. A permanency hearing may be required if a permanency finding has not been made within the past 12 months.
 - c. Children who are Title IV-E eligible (FM) will remain Title IV-E eligible (FM) throughout the foster care episode. A new determination of Title IV-E eligibility is not needed.
 - d. Children who are coded as EA and will graduate by their 19th birthday, will continue as EA until they graduate. The match symbol will change to RM the beginning of the month following graduation.
 - e. Children who are determined to be RM will remain RM.
 - f. Compelling reasons may need to be documented, if applicable.
- 2. Children who return to foster care within six months of 1/1/12 (Discharged prior to 1/1/12 and not placed in Trial Independence)**
 - a. The 18+ Continued Foster Care Agreement (SFN 60) must be signed by all three parties. The 18+ Continued Foster Care Agreement gives a North Dakota public agency placement and care responsibility until a court order is in effect.
 - b. A court order must be in effect within 90 days of the effective date noted on the 18+ Continued Foster Care Agreement (SFN 60), containing the requisite court order findings. If, at the end of 90 days, a court order is not in effect, foster care payments must be terminated.
 - c. Application for Foster Care (SFN 641) must be completed by the child. Information included on this form applies to the child only.
 - d. Title IV-E eligibility must be re-determined by completing the Title IV-E Initial Eligibility Worksheet (SFN 869). Documentation in the file must include:

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- SFN 641, Foster Care Application
- SFN 869, Title IV-E Initial Eligibility Worksheet
- SFN 870, Title IV-E Reimbursability
- SFN 873, Title IV-E Income Calculation Worksheet

e. Verification of the 18+ Continued Care eligibility category (grace period applies). Documentation in the file must support one category below:

- Education – full or part-time
- Employment – at least 80 hours per month
- Attending a program designed to promote or remove barriers to employment
- Incapable of education or employment due to medical condition or disability

3. Children Who Were Discharged from Foster Care at or after Age 18 (after the date of 1/1/12)

Children who were discharged from foster care at or after age 18 can return to foster care within six months of their discharge date.

a. Discharged under Trial Independence: The child can maintain their Title IV-E eligibility if he/she was discharged under Trial Independence and returns to foster care within 6 months. Title IV-E must be re-determined based upon the child only, without regard to the parent(s) or legal guardian(s).

1. Required:

- SFN 641, Foster Care Application, completed by the child. Information included on this form applies to the child only.

2. Documentation in the file supporting Title IV-E must include: *

- SFN 869, Title IV-E Initial Eligibility Worksheet
- SFN 870, Title IV-E Reimbursability
- SFN 873, Title IV-E Income Calculation Worksheet

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3. Verification of the 18+ Continued Care eligibility (grace period applies). Documentation in the file must support one category below:

- Education – full or part-time
- Employment – at least 80 hours per month
- Attending a program designed to promote or remove barriers to employment
- Incapable of education or employment due to medical condition or disability

* Based on the foster care episode in which the child was most recently discharged under Trial Independence.

- b. **Not discharged under Trial Independence:** If a child returns to foster care within six months of discharge and was not under Trial Independence, Title IV-E eligibility must be re-determined based upon the child only, without regard to the parent(s) or legal guardian(s).

1. Required:

- SFN 641, Foster Care Application, completed by the child. Information included on this form applies to the child only.

2. Documentation in the file must include:

- SFN 869, Title IV-E Initial Eligibility Worksheet
- SFN 870, Title IV-E Reimbursability
- SFN 873, Title IV-E Income Calculation Worksheet

3. Verification of the 18+ Continued Care eligibility category (grace period applies). Documentation in file must support one category below:

- Education – full or part-time
- Employment – at least 80 hours per month
- Attending a program designed to promote or remove barriers to employment
- Incapable of education or employment due to medical condition or disability

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Medical

The Foster Care Application (SFN 641) must be completed in order to reinstate Medicaid for children who exit and return to foster care after age 18.

Title IV-E/Title XIX Redetermination – Foster Care (SFN 642) is used to re-determine Medicaid annually for children who remain in foster care past the child's 18th birthday.

Children under the custody of Tribal Social Services

The North Dakota Department of Human Services has entered into formal agreements with Standing Rock Sioux Tribe, Three Affiliated Tribes, Turtle Mountain Band of Chippewa and Devils Lake Sioux Tribe. The agreements allow the tribe or tribal court to retain jurisdiction, including placement and care responsibilities, of children and still have Title IV-E foster care eligibility for a child if all other Title IV-E foster care eligibility requirements are met. The Tribe is responsible for providing eligibility related information to the county to assist the county in determining Title IV-E eligibility. Maintenance payments for the care of children who are Title IV-E eligible and reimbursable will be paid by the state.

If the child is non-Title IV-E eligible, financial responsibility for foster care payment remains with the Tribe.

A child under the custody of Tribal Social Services, who was Title IV-E eligible while in foster care under the age of 18, is eligible for 18+ Continued Care. All areas of responsibility remain the same as when the child was under the age of 18. If the child loses Title IV-E eligibility or reimbursability, the county will close the foster care case and the Tribe will become financially responsible.

Child Support

A parent's child support obligation ends when the child turns age 18. The child support referral is automatically closed in CCWIPS when this occurs.

Social Security Benefits

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Current policy related to children in foster care under age 18 applies to children in 18+ Continued Care.

FOSTER CARE PAYMENTS:

All youth in 18+ Continued Care remain eligible for foster care maintenance payments. The process and items covered in the foster care maintenance payment are consistent with policy for foster youth under the age of 18. This rate includes the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, and liability insurance with respect to the child.

Secondary placements are not allowed in 18+ Continued Care. Payments are limited to the primary caretaker only, as the 18+ Continued Foster Care Agreement (SFN 60) does not include any placement resource other than the primary foster care provider.

Irregular Payments

With the appropriate approval, irregular payments are available for a child in 18+ Continued Care. Payments will be made to the licensed foster care provider.

In cases where a foster child is a parent and placed with their own child in the same foster home, the foster care maintenance payment will be assessed to cover the cost of that child.

Although excess maintenance payments (EMP's) are allowed, requests should be discussed thoroughly during Foster Care Child & Family Team meetings before an EMP is approved. EMP's are available in special circumstances, when the child has special needs or the difficulty of care significantly affects her/his foster care placement.

Therapeutic Family Foster Care

The child must be in need of a therapeutic level of care in order to remain eligible for the therapeutic family foster care rate. The step-down or county age appropriate foster care rate (flow through rate) will be paid in situations where the child does not meet the therapeutic level of care. A

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group home approval is required for all children who are placed in a therapeutic family foster home.

FRAME/ CCWIPS:

A FRAME Users Guide for 18+ Continued Care will be distributed to explain the changes made to the system. This guide will assist case managers with required data entry.

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Permanency Planning Forms 624-05-25

(Revised 12/1/15 ML #3461)

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The following forms are necessary to carry out the permanency planning foster care program in North Dakota.

They are as follows:

1. DN 402, "Foster Youth Rights"
2. SFN 60, "18+ Continued Care Agreement"
3. SFN 494, "Transition Checklist"
4. SFN 573, "Runaway & Missing Youth Screening"
5. SFN 904, "Agreement to Furnish Specialized Family Foster Care Services"
6. SFN 1537, "Foster Care Visitation Agreement"

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Agreement to Furnish Specialized Family Foster Care Services, SFN 904 624-05-30-15

Purpose and Use of SFN 904 624-05-30-15-05

(Revised 2/10/07 ML #3053)

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SFN 904 must be completed before specialized family foster care payments can be made to foster parents. It is initiated out of the permanency planning committee meeting. After it has been signed by the foster parent, county social service board in the county of physical residence of the child and the regional foster care supervisor in the physical region of the child, it is to be distributed as indicated on the form.

The dollar amount or level to be paid is that agreed upon at the permanency planning committee meeting. The contract can be written for any length of time up to the end of the current state biennium. Contracts in place at the conclusion of the year will need to be renegotiated on new contract forms at the beginning of the new biennium. It is recommended that the agreement be used as a part of the treatment planning process for the parent, the child, the foster parent, and the agency.

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Voluntary Parental Placement Policy 624-05-30-20-10 (Revised 11/1/16 ML #3481)

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Voluntary parental placement agreements are not common. However, in the event that such an agreement is necessary to protect the rights and needs of a child, a voluntary placement agreement between the parents and the agency can be entered into for up to 45 days of placement for children under the age of 18. Voluntary placement agreements require the approval of the regional supervisor. The agreement must be entered electronically in CCWIPS.

Foster care funds cannot be used for the payment of voluntary placements when a public agency does not have care, custody, and control of the child. If voluntary treatment is a desire of the family, the families are to be redirected to the NDDHS Behavioral Health Division Voluntary Treatment Program in an effort to avoid unnecessary relinquishment of parental custody.

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Foster Care Visitation Agreement, SFN 1537 624-05-30-25

Purpose and Use of SFN 1537 624-05-30-25-05 (Revised 10/15/12 ML #3341)

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SFN 1537 is prepared and implemented to provide a uniform and consistent program for visitation. This will allow parents and foster children to maximize their time together. As it is the intention of foster care to reunite the family whenever possible, the very importance of good, productive visits is recognized. The importance makes it absolutely necessary to schedule this valuable time into the case plan. This agreement will allow for the foster home routine, the social life of the child, and the parental visits to work in harmony and in the interest of ALL parties.

Unless mutually agreed upon by all parties involved, visits should not disrupt the planned activities of the foster home, school process (including extra curricular activities, sports or youth organizations) and/or religious activities of the foster child.

This agreement is entered into by all parties, and failure to comply with this agreement shall give cause to review this agreement which may require action to limit and/or discontinue visits in the future.

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**Compelling Reason(s) for Determining that Filing a
Petition to Terminate Parental Rights Would Not be in the
Child's Best Interest, SFN 348 624-05-30-30**

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Purpose and Use of SFN 348 624-05-30-30-05 (Revised 10/15/12 ML #3341)

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<http://www.nd.gov/eforms/Doc/sfn00348.pdf>