Philosophical Basis

The policy of the State of Montana is to achieve a permanent placement for each child in the state foster care system as quickly as possible. Optimally, children are best raised in their birth families. Providing intensive services to the birth family immediately after the child has been placed in out-of-home care enhances the potential for reunification.

Hierarchy of placement should be: reunification with the child's parent; permanent placement with the non-custodial parent, superseding any exiting custodial order; adoption (preference order: kin, foster/resource family), guardianship (preference order: kin, foster/resource family) or other planned permanent living arrangement.

Combining efforts to develop a permanent placement for the child (such as adoption, guardianship or other planned permanent living arrangement following the placement preferences) with efforts to reunite the child with his/her birth parents can be very effective in providing a permanent, life-long family for the child.

Definitions

CONCURRENT PLANNING: A case plan that includes the development and implementation of two or more simultaneous plans, aimed at developing or ensuring a permanent outcome for a child in the shortest possible period of time through reunification, adoption, guardianship or other planned permanent living arrangement.

Plan A: intended to safely reunify the birth parents with their

child(ren)

Plan B: permanency for the child through adoption,

guardianship, or other planned permanent living

arrangement

Note: When reunification is not an option or Termination of Parental Rights has occurred, there still needs to be at least two permanency plans for the child. The plans needs to identify the permanency goal (adoption, guardianship, etc) and the steps being taken to identify a concurrent family if not already identified.

CONCURRENT PLACEMENT: The **planned** placement of a child with a concurrent family. A concurrent placement does not occur by default.

CONCURRENT FAMILY: A family approved by the Division as a kinship or foster family that will support the placing agency and the child's birth family toward the goal of reunification while simultaneously committing to becoming a permanent family for the child if reunification is unsuccessful.

A concurrent family must meet the requirements to become an adoptive or guardianship family and will be given priority for adoption, guardianship, or other planned permanent placement if the child cannot return home and if the permanency team determines that the family is able to meet the best interest criteria of the child.

NOTE: If the child has been placed with a child placing agency and the child placing agency has conducted the adoptive home study, the placing worker **must** obtain a copy of the adoptive home study and the child's permanency team **must** be involved in the permanency placement decision.

Diligent Search: An extensive effort to locate and document the names of relatives, and significant persons in the life of a child who is involved with child protective services and at risk of or placed in out-of-home care.

Parent-Child Interaction Plan (or Visitation Plan): A plan (based on the child's age and developmental level) that insures **frequent**, **meaningful contact** between the parent(s) and child. This is the DPHHS-CFS 208 form which is available on the OURS site.

Summary of Concurrent Planning Process

Concurrent planning requires that the Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) identify and work toward developing an alternative permanent plan for the child at the same time the Child Protection Specialist and parents are working toward the child's return to the parents. The steps of the concurrent planning process and placement are:

- Step 1. The Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) conducts a diligent search for the absent parent and other relatives.
- Step 2. Immediately upon placement or as soon thereafter as possible, the Child Protection Specialist must discuss concurrent planning with the parents and/or family. Concurrent planning requires that the Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) develop simultaneous plans for the child(which may be part of a treatment plan) and should include identification of:
 - short-term goals;
 - immediate tasks:
 - who does what, when and how;
 - specific time lines;
 - visitation schedule;
 - · conditions of return

 frequency of informal reviews; and must include an explanation of the circumstances that may prevent the implementation of any of the plans

Note: If child has been in care for 90 days or more, the child must have a concurrent plan.

Diligent Search for Absent Parent and Relatives

(Refer also to policy 304-2)

Immediately upon placement or as soon thereafter as possible, the Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) **must** initiate a diligent search for relatives of the child on both the paternal and maternal sides of the family. This includes immediate efforts to identify and contact legal and/or putative fathers so the child protection specialist can conduct an objective assessment of the viability of the non-custodial parent as a placement option for the child.

The case record of the child **must** contain documentation of the Child Protection Specialist's and/or designee (identified through a supervisory or permanency staffing) actions to identify and assess the viability of placement with the non-custodial parent and relatives. Tools the Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) may use to assist in the diligent search for relatives include, but are not limited to:

- 1. The Child Protection Specialist may use a family group decision-making meeting (FGDM) to obtain names and addresses of other extended family members.
- Utilize Family Finding process which would include, but is not limited to, mobility mapping, the blended perspective meeting and decision making meeting.
- 3. Development of a genogram with the family to identify family members and their relationships;
- 4. Development of an ecomap with the family to identify individuals, agencies, churches, service providers, etc., that serve as a support or source of conflict to the family;

Contact must be made with the non-custodial parent and relatives named at the FGDM, on the genogram or ecomap, or otherwise reported to the child protection specialist to determine their:

- a) willingness to serve as a respite family for the child;
- b) willingness to serve as a permanent placement for the child; or
- c) knowledge about the existence of other relatives of the child.

Contact must be documented on the ACTD screen in CAPS.

Upon placement of a child in out-of-home care, the Division may share information with extended family members for placement and case planning purposes.

If a relative is not identified as a potential placement for the child, the Child Protection Specialist must work with the Permanency Team to identify other placement options.

NOTE: A diligent search for relatives is also required under ICWA if the child is an Indian child. (See Section 305-1, <u>Indian Child Welfare Act.</u>)

Concurrent Placement Assessment Process

During the initial stages of the case, the Child Protection Specialist must make an overall assessment of the case facts and history utilizing input from the family and significant others. The assessment highlights the family's strengths and problems. The primary issue(s) - the condition(s) that, if not corrected, will prevent reunification - must be identified during the assessment phase.

A major factor in determining whether reunification is likely is the parent(s)' acknowledgment of the need for change in their behavior and their willingness to work with the Child Protection Specialist toward meeting the goals of the treatment plan. Therefore, of primary importance during the assessment phase (and throughout the life of the case) is the Child Protection assessment of the parent(s)' willingness and ability to address those issues which led to the placement of the child and their ability to work as a team member.

The presence of one (or more) of the following could be considered a barrier to reunification and may indicate that concurrent placement may be appropriate for the child:

- substance abuse
- mental, physical, developmental disabilities
- severe family dysfunction (birth and extended family)
- history of multiple placements for the child
- family history of violence and involvement with the agency

Identification and Selection of Concurrent Family

The Child Protection Specialist must work with the Permanency Team and the Family Resource Specialist to identify and select the concurrent family for the child. The concurrent family must acknowledge and accept that the primary goal is to reunite the child with his/her birth parents and must be willing to work with the Child Protection Specialist to achieve that goal. The family must understand

and agree that the child will be permanently placed with them only if reunification with the birth parent(s) is not possible and it is determined that it is in the best interest of the child to remain with the concurrent family. The concurrent family is approved or licensed by the Division as a kin or foster family and meets the requirements to be approved by the Division as an adoptive or quardianship family.

If more than one family is interested in becoming a concurrent family for the child, a Permanency Team consisting of the Child Protection Specialist and the Child Protection Specialist Supervisor, the Family Resource Specialist and Family Resource Specialist Supervisor, and the Permanency Planning Specialist Supervisor will review the families submitted for consideration and will select the family that best meets the child's needs. The FGDM Coordinator and the Regional Administrator may also participate on the Permanency Team. Other people may be included in a permanency staffing if their participation is agreed to by the required team members.

If the child is an Indian child (an ICWA case), a Tribal Social Services representative shall be invited to participate in the Permanency Team.

The selection of the family is based on the family's ability to meet the child's needs and the elements of concurrent planning. Other factors to be considered when selecting a concurrent family for the child include, but are not limited to the:

- 1. family's ability to understand the conceptual basis for concurrent planning;
- 2. family's ability to participate as a member of the team;
- 3. family's ability to accept and relate to birth parent(s);
- 4. family's willingness to support reunification with the birth parent(s):
- 5. birth parents' personality match with the resource family;
- 6. amount and location of expected visits with birth family;
- 7. if reunification does not occur, the family's willingness to agree to some ongoing communication if the child is adopted or has a guardianship established; and
- 8. nature of child's legal situation.

Full Disclosure

The Child Protection Specialist must **fully disclose** the assessment results and the case plan including the concurrent plan to the parents, extended family members, resource family, foster family, county attorney, guardian ad litem, and the court.

The Child Protection Specialist must discuss with the parents the negative impact of foster care placement upon the child. It is

recommended that the extended family be included in this discussion through a FGDM or other family meeting with the parent(s)' consent. The discussion should include the:

- need to achieve a safe, stable environment for the child;
- parent(s)'s rights and responsibilities;
- parent(s)' behavior that resulted in the out-of-home placement of their child; and the consequences of that behavior;
- statutory time lines which affect the amount of time the parents can work toward completing the treatment plan established for reunification; and
- notification that, as a general rule, the Division is required to file a petition for termination of parental rights if the child remains in foster care for 15 consecutive months or is in foster care for 15 of the most recent 22 months;
- harmful effects of substitute care on the child which result from the process/impact of multiple moves on attachment and the child's security;
- inability of the child to form secure attachments to a nurturing adult when the child does not have a stable, permanent adult in his/her life;
- occurrence of developmental problems in the child when breaks occur in a child's attachment (e.g., removal from home, multiple moves in foster care, etc.);
- definition of concurrent planning and placement for the birth family;
- importance of what parents **do**, not what parents **say**;
- need to develop a concurrent plan to assure the child a permanent home as quickly as possible and to assure the child's proper attachment and development;
- need to begin to implement the **concurrent plans**
- appropriateness of concurrent placement;
- alternatives to reunification available to the parent(s) including placement with non-custodial parent, kinship care placement and the assessment determines that it is appropriate:
 - a) a **concurrent placement** will be developed;
 - b) a **concurrent family** will be recruited for the child:
 - the parents and Child Protection Specialist with the support of the concurrent family will work toward reunification of the child(ren) and parents; but
 - d) if reunification or placement with kin is not possible, the concurrent family will be given priority to become the child's permanent family.

NOTE:

The appropriateness of the child/family for concurrent placement is assessed within 90 days of the initial placement and at each subsequent permanency meeting.

Intensive Visitation

During the assessment phase and while the parent(s) are working toward reunification, *maximum* visitation opportunities between the parent(s) and child must be available. Therefore, the Child Protection Specialist should ensure that intensive visitation is available before the child is placed in a concurrent placement.

A Parent-Child Interaction Plan/Visitation Plan (based on the child's age and developmental level) that ensures **frequent**, **meaningful contact** should be developed. If the child is placed with a concurrent family, a visitation plan must be developed for the parent(s). This plan defines, among other things, the length and frequency of visits between the child and the parent(s). Intensive visitation is defined as at least two times per week (frequency) and no less than two hours per visit (length). The frequency of visits should correlate with the child's age and sense of time; for example, in the case of an infant, parental visitation would ideally occur daily but should occur at least every two or three days.

Intensive visitation between parent(s) and child is necessary for the following reasons:

- frequent visitation increases the chance that the child will return home;
- frequent visitation maintains the parents' and child's attachments to each other;
- frequent visitation keeps the child foremost in the parent's thoughts and concerns. Parents will be more likely to work (and work quickly) toward reunification when visiting frequently with the child.

Concurrent Placement Implementation

Once the Permanency team determines that concurrent placement is appropriate for the child, the Child Protection Specialist may then initiate the concurrent placement.

Throughout the life of the case, the Child Protection Specialist will document the parents' efforts toward meeting the objectives and goals of reunification. If the parent(s) have made significant progress and need more time to complete the treatment plan objectives, the Child Protection Specialist will document the need for more time and obtain court approval for the extension of the plan (if necessary).

Services provided to Concurrent Family

The Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) should ensure that appropriate support services are available for the concurrent family. These support services may include, but are not limited to, ongoing support services from Child Protection Specialist and Family Resource Specialists, intensive supervision of the placement by the Child

Protection Specialist and provision of support groups for the concurrent family.

Concurrent Planning Review Through-out the Life of the Case

The Child Protection Specialist and/or designee (identified through a supervisory or permanency staffing) will ensure that the concurrent plans are reviewed to assess whether the plans are still appropriate and that all tasks identified are being completed within the appropriate timeframes. Reviews should occur:

- When reunification is no longer an option and the Division has or is filing for Termination of Parental Rights;
- When the child has or will change placements;
- When a concurrent family can no longer be a placement option;
- During permanency staffing;
- During FGDM's;
- When the Absent or Noncustodial Parent is located;
- When Relatives are located and willing to participate in the child's case plan;
- If the child is assigned a new Child Protection Specialist; and
- When the child turns 16 years of age.

References

Mont. Code Ann. § 41-3-301 Mont. Code Ann. § 41-3-423 Mont. Code Ann. § 41-3-443 42 U.S.C. 620 et seq. (P.L. 105-89), Adoption and Safe Families Act 25 U.S.C. 1901 et seq., Indian Child Welfare Act

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