



# North Carolina Department of Health and Human Services Permanency Planning Services Track Training

# Participant's Workbook Day Six

September 2024



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## **Instructions**

This course was designed to guide child welfare professionals through the knowledge, skills, and behaviors needed to engage with families in need of child protection services. The workbook is structured to help you engage in the lesson through reflection and analysis throughout each week of training. Have this workbook readily available as you go through each session to create a long-lasting resource you can reference in the future.

If you are using this workbook electronically: Workbook pages have text boxes for you to add notes and reflections. Due to formatting, if you are typing in these boxes, blank lines will be "pushed" forward onto the next page. To correct this when you are done typing in the text box, you may use delete to remove extra lines.

## **Course Themes**

The central themes of the [Insert Track Name] Track Training are divided across several course topics.

- Purpose, Practice Standards, and Legal Aspects
- Diversity, Equity, Inclusion, and Belonging
- Indian Child Welfare Act of 1978 (ICWA)
- Communicating
- Family Engagement
- Assessing in Permanency Planning Services
- Trauma-Informed Care
- Permanency Plans and Concurrent Planning
- Attachment
- Family Time
- Shared Parenting
- Working with Relatives
- Partners in the Permanency Planning Process
- Permanency Planning with the Family
- Permanency Planning Family Services Agreement
- Child and Family Team Meetings
- Authentically Engaging Children and Youth
- Family-Centered Permanency Planning
- Quality Contacts
- Preparing for Permanency
- Engaging Relatives
- Placement

- Placement with Relatives
- Monitoring the FSA
- Achieving Permanency
- Adoption
- Documentation
- Worker Safety

## **Training Overview**

Training begins at 9:00 a.m. and ends at 4:00 p.m. If a holiday falls on the Monday of training, the training will begin on Tuesday at 9:00 a.m. This schedule is subject to change if a holiday falls during the training week or other circumstances occur. The time for ending training on Fridays may vary and trainees need to be prepared to stay the entire day.

Attendance is mandatory. If there is an emergency, the trainee must contact the classroom trainer and their supervisor as soon as they realize they will not be able to attend training or if they will be late to training. If a trainee must miss training time in the classroom, it is the trainee's responsibility to develop a plan to make up missed material.

## **Pre-Work Online e-Learning Modules (If Applicable)**

There is required pre-work for the [Insert Track Name] Track Training in the form of online e-Learning modules. Completion of the e-Learnings is required prior to attendance at the classroom-based training. The following are the online e-Learning modules:

- 1. North Carolina Worker Practice Standards
- 2. Safety Organized Practice
- 3. Understanding and Assessing Safety and Risk
- 4. Understanding and Screening for Trauma

### Transfer of Learning (TOL) Tool

The Permanency Planning Track Training Transfer of Learning (ToL) tool is a comprehensive and collaborative activity for workers and supervisors to work together in identifying worker goals, knowledge gain, and priorities for further development throughout the training process. In four distinct steps, the worker and supervisor will highlight their goals and action plan related to participating in training, reflect on lessons and outstanding questions, and create an action plan to support worker growth. The tool should be started prior to beginning the Permanency Planning Track Training and revisited on an ongoing basis to assess growth and re-prioritize actions for development.

<u>Part A: Training Preparation</u>: Prior to completing any eLearning and in-person Track Training sessions, the worker and supervisor should meet to complete Part A: Training Preparation. In this step, the worker and supervisor will discuss their goals for

participation in training and develop a plan to meet those goals through pre-work, other opportunities for learning, and support for addressing anticipated barriers.

Part B: Worker Reflections During Training: The worker will document their thoughts, top takeaways, and outstanding questions regarding each section. This level of reflection serves two purposes. First, the practice of distilling down a full section of training into three takeaways and three remaining questions requires the worker to actively engage with the material, subsequently forming cognitive cues related to the information for future use in case practice. Second, prioritizing takeaways and questions by section allows workers to continually review information to determine if questions are answered in future sessions and supports the development of an action plan by requiring workers to highlight the questions they find most important.

<u>Part C: Planning for Post-Training Debrief with Supervisor</u>: The worker considers the takeaways and questions they identified in each section and creates a framework to transfer those takeaways and questions into an action plan.

<u>Part D: Post-Training Debrief with Supervisor</u>: Provides an opportunity for the supervisor and worker to determine a specific plan of action to answer outstanding questions and to further support worker training.

While this ToL is specific to the Track Training in North Carolina, workers and supervisors can review the takeaways and questions highlighted by the worker in each section of training on an ongoing basis, revising action steps when prior actions are completed, and celebrating worker growth and success along the way.

## **Training Evaluations**

At the conclusion of each training, learners will complete a training evaluation tool to measure satisfaction with training content and methods. The training evaluation tool is required to complete the training course. Training evaluations will be evaluated and assessed to determine the need for revisions to the training curriculum.

All matters as stated above are subject to change due to unforeseen circumstances and with approval.

## **Learning Objectives**

#### Day 6

## **Working with Relatives**

- Learners will be able to explain the importance of applying family-centered practices and principles to engage relatives.
- Learners will be able to evaluate a relative's capacity to provide support by disproving myths associated with extended family of those involved in child protective services.

## **Engaging Relatives Learning Lab**

- Learners will be able to demonstrate engagement skills to involve relatives in planning for placement and other support.
  - Learners will be able to demonstrate processes to identify supportive individuals in youths' lives.

#### **Placement**

- Learners will be able to describe the importance of maintaining a child in one single, stable placement to reduce placement disruption.
  - Learners will be able to explain and provide examples of strategies for how to plan and make decisions about placement with the child and family.
  - Learners will be able to construct placement plans that prioritize educational stability for children in out-of-home care.
  - Learners will be able to appropriately identify placement considerations based on child needs.
  - Learners will be able to describe the importance of matching cultural considerations between children and their caregivers.
  - Learners will be able to explain and provide examples of placement considerations
    when matching placements for special populations, including LGBTQIA+,
    American Indian/Alaska Native children, infants exposed to substances, medically
    fragile children, large sibling groups, pregnant and parenting teens, and
    adolescents and older youth.
  - Learners will be able to provide detailed descriptions of placement preferences for tribal children and differentiate between the cultural considerations associated with those preferences.
  - Learners will be able to initiate appropriate placement processes to support the cultural and traditional needs of tribal children.
  - Learners will be able to explain and provide examples of placement considerations associated with the placement of tribal children.

#### Placement, continued

- Learners will be able to implement processes to prepare the child, the child's family, and the placement provider for placement.
- Learners will be able to develop and implement plans that support caregivers to maintain safe and stable placements.
- Learners will be able to assess safety and risk in providers' homes and determine appropriate next steps to plan for placement and address concerns related to safety or risk in the home.
- Learners will be able to apply the RPPS when supporting placement providers and ongoing normalcy for the child(ren) in those providers' homes.
- Learners will be able to distinguish between decisions a placement provider makes for a child that are considered reasonable and prudent, and those that must be made by the child's parent.
- Learners will be able to define dissolution and disruption and describe the risks associated with each.
- Learners will be able to assess safety and risk in providers' homes and determine appropriate next steps to plan for placement and/or address concerns related to safety or risk in the home.

## **Placement Learning Lab**

 Learners will be able to appropriately identify placement considerations based on child needs.

## **Day Six Agenda**

## **Permanency Planning Services Track Training**

I. Welcome & Agenda

## **Working with Relatives**

- II. Engaging Relatives
- III. Placement with Relatives

## **Engaging Relatives Learning Lab**

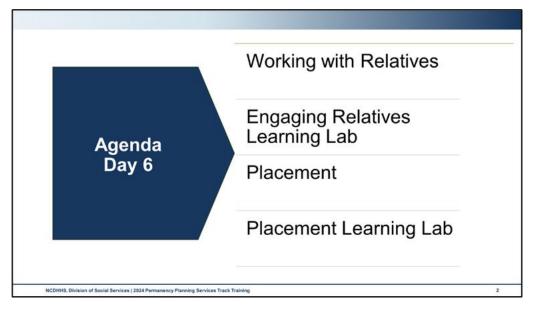
#### **Placement**

- IV. Placement Decisions
- V. Placement Stability
- VI. Reasonable and Prudent Parenting Standard

**Placement Learning Lab** 

**End-of-Day Values Reflection** 

## Welcome



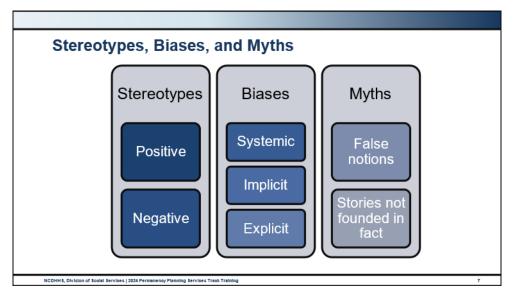
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# **Working with Relatives**

**Engaging Relatives** 



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Activity: Master your Stories

#### **Master Your Stories**

A "story" is our rationale for what's going on and our own interpretation of facts. Stories can present themselves in stereotypes, biases, and myths. To "Master My Stories" means to take control of our stories, so they don't take control of us. This is the key to preventing strong emotions and biases from taking control of a Crucial Conversation.

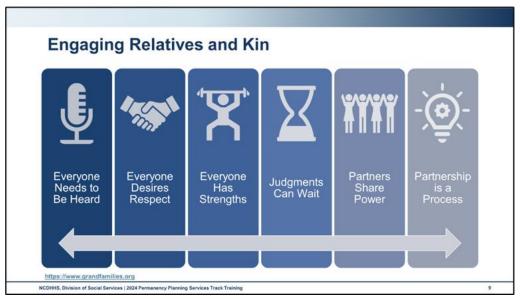
## **Snowball Activity**

Using a blank sheet of paper found on your table, write:

- One myth that exists in working with relatives or kin
- The stereotype or bias that supports this myth

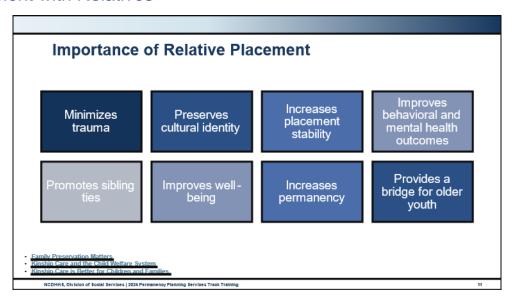
Crumple up your paper and throw it during the snowball fight.

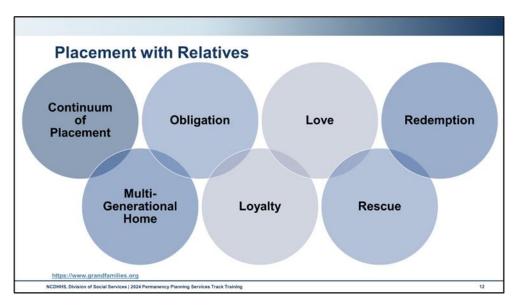
What is one stereotype or bias that supports the myth you found on the snowball you picked up?
What strategies might you use to address this myth, stereotype, or bias in your practice?
What other ideas, ideas, and strategies shared during this activity are worth noting?



SMART goal #1:		
SMART goal #2:		

## Placement with Relatives



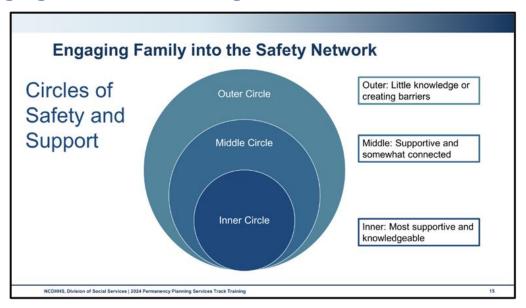


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#### Reflections and Check-In

Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any "aha moments."

# **Engaging Relatives Learning Lab**



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### Handout: Circles of Safety and Support

Circles of Safety and Support is a Safety-Organized Practice tool used to support families in identifying people in their network. This tool can be used with adults, youth, and children. The Circles of Safety and Support tool can be used on the very first visit with a family or at the point when you are starting to talk with family about the importance of involving a network of family and friends and involved professionals. Circles of Safety and Support helps workers to introduce and explore the idea of involving a network.

Outer Circle

Middle circle

Inner Circle

Micco

**Inner Circle**: Most supportive and knowledgeable

- Who knows everything about what we are worried about here?
- With whom do the children feel the most connected?
- Who are the first people you call when you are in need?

Be sure to acknowledge the family's ability to access support. Perhaps say, "How did you find the strength to reach out to them about this?"

**Middle Circle**: Those who are supportive and somewhat connected

- Who knows some things about these worries?
- Who support you a little?
- With whom do your children feel some connection?
- Who knows a little about what is going on?

Outer Circle: Those who have little knowledge or create barriers

- Who knows nothing about what is going on?
- Who creates challenges or barriers for your family?
- Who have you not reached out to, but could see yourself reaching out to in the future?
- Who is willing to support you but you don't feel comfortable asking them?
- Who is in your phone/contact list or on your social media?

Engaging parents/caregivers using the Circles of Safety and Support tool is a good first step to helping them understand what a safety network is and who needs to be a part of the safety planning process. Share with parents that the network is built by them and can include family, tribes, friends, neighbors, service providers, and others that they believe will be beneficial.

If the family struggles to identify support, consider the following:

- If you were in an accident and were taken to the hospital, who would you call to pick up your children from school?
- If your house was on fire and burned to the ground, who would you call?
- If you won the lottery, who would be the first person you call?
- Who would your children say they want to spend the night with if you needed to go out of town and couldn't take them with you?
- If you died tomorrow, who would you want to take your children in and care for them until they are adults?
- Who is someone who has shown a lot of interest and support to your children now or in the past? (teacher, neighbor, counselor, church member, someone you work with?)
- Who can help you move closer to your goals? (Boss, co-worker, counselor, neighbor, friend of a friend)
- Do you belong to a church, club, support group, or sports team? If so, who are some people who have been there for you and your children?
- Who do you look up to? Who encourages you when you are having a bad day?
- Has there ever been a time you felt no one cared about you and your feelings?
   Who is someone who stepped up and made you feel better?
- Tell me about a time when things were working well for your family, what did that look like and who helped you and your children at that time?
- Who in your life has had a tragedy and you helped them through that difficult time?
- Create a family tree with the parent/caretaker and ask about the communication and location of these individuals.

#### Source:

Using Circles of Safety and Support to Build Safety Networks with Families, Child Welfare Practice Manual Resources (December 2021). https://policies.ncdhhs.gov/wp-content/uploads/Resource\_Using-Circles-of-Safety-and-Support-to-Build-Safety-Networks\_June2024.pdf

## Activity: Circles of Safety and Support

Use the space below to capture the Circles of Safety and Support for George based on the interview.

- Consider designating people who feel safe and secure with a circle
- Consider designating people moving from one circle to the next with an arrow

	ctivity: Information Review
W	hich relatives will be able to contribute to the family and how?
W	/hat are some next steps for these relatives?
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	•
	•
	•
	•
	•

## Handout: Relative Search and Interest Forms (DSS-5316) Results

The chart below reflects efforts made to contact relatives by sending the Relative Interest Forms (DSS-5316) and the respective responses.

Name of relative	Relationship to children	Interested in contact	Interested in temporary placement	Interested in permanent placement
Delores and Eric Jackson	Paternal grandparents	Yes	No	No
Mary and Paul Bailey	Paternal step- grandparents	Yes	Yes	No
Michelle Lewis	Maternal aunt	Yes	Yes	Yes
Bernard Baker	Maternal grandfather			
Adrienne Lewis	Maternal grandmother	No	No	No
Sonya Smith	Maternal great aunt			
Nicole Harper	Paternal aunt	Yes	Yes	Yes
Mike Bailey	Paternal step uncle	Yes	Yes	Yes

#### Handout: Interviews with Relatives

#### Contacts

Jim Krasinski, Van's basketball coach

Jim has been surprised to hear that Van and their brother are in foster care. Jim coaching Van's basketball team and George has been the assistant coach for the last two years. Jim knows that George was struggling with Raymond's behavior, saying several times that he is "disrespectful." George had made a comment that he wished Raymond wasn't so lazy and had more of Van's work ethic, as Van is constantly trying to self-improve their basketball skill and schoolwork. Jim feels he has a good relationship with Van and would be interested in finding a way to support the family, especially finding a way to keep Van on the team this year. That said, he is not interested in placement or caring for the children in any way.

Michelle Lewis, Maternal Aunt

Michelle was in the hospital when the children came into care. She has called the office at least twice a week since that time. Michelle has expressed a desire to have placement of the children.

Michelle and her sister were close before Monica went to prison. The children, especially Van, have spent many weekends at her home. Michelle wanted to remain a part of the children's lives and even share child-caring responsibility with George when Monica went to prison, but George wasn't open to that. Michelle and George do not get along well, as Michelle believes George was cheating on Monica before they split.

Michelle is going through a breakup now and her partner has recently moved out of the apartment. She is looking for a second job after having a reduction in hours at her current job; she is the team lead at a supermarket.

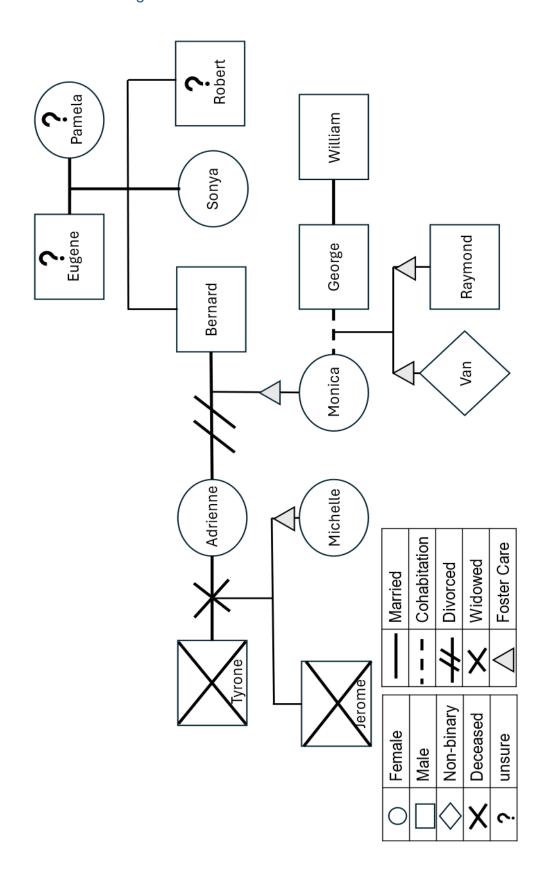
Mary Thompson, Van's friend Henry's mother

Mary called the office stating that she heard that Van was in foster care. She and her family are very interested in providing placement for Van, as they are such good friends with Henry. Mary is worried that Van living outside of the community and with someone they don't know is not good for them. Mary has three children ages 3 years, 7 years, and 14 years old. She is married and has more than adequate financial resources to care for Van. Mary has never met Raymond and based on what little she does know, she is not sure she can handle Raymond's ADHD behaviors.

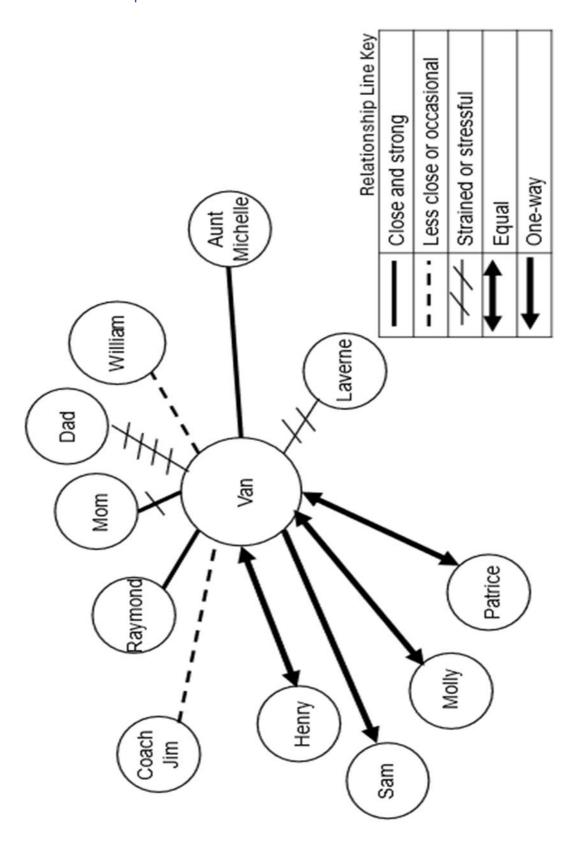
Nicole Harper, Paternal Aunt

Nicole indicated that she had not seen the children for several years, as she lives in New York and the family doesn't get together often due to do lack of financial resources. Nicole knows that things haven't been easy for George since he has had the children full-time. Nicole is interested in coming to NC to get the children and bringing them back to NY with her until "everything gets sorted out."

Handout: Monica's Genogram



Handout: Van's Eco-Map



Activity:	<b>Engaging</b>	Relatives
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PI	an	an	eng	agei	ment	call
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In your groups, choose two relatives to engage.

 1.

 2.

Working with a partner, plan your engagement call for one of the relatives or kin listed above. Consider:

- Placement
- CFT Meeting Participation
- Safety Network Support
- Relational, Cultural, and Legal Permanency Contributions

You are encouraged to employ Principles of Partnership and solution-focused questions. You have seven minutes to plan for your engagement call.

Use this space for engagement call planning:				

## Roleplay an engagement call

In your small group, one pair will role-play the first call while the second pair observes and keeps time.

Social worker: using your plan, engage the relative in the child's permanency planning process.Relative: respond as the relative might, asking at least one question of the social worker.

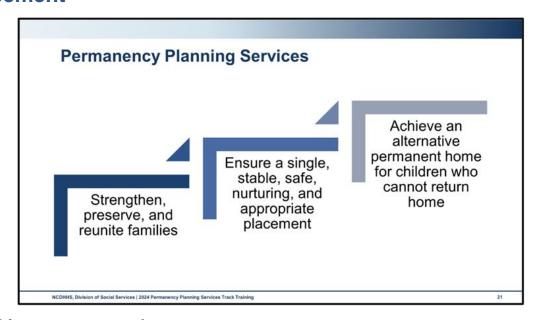
**Observers:** Keep a five-minute timer and let the pair know when the time is up.

When time is up, the pairs will switch places and repeat the process.			
Use this space for observations and reflections on this skills practice exercise.			

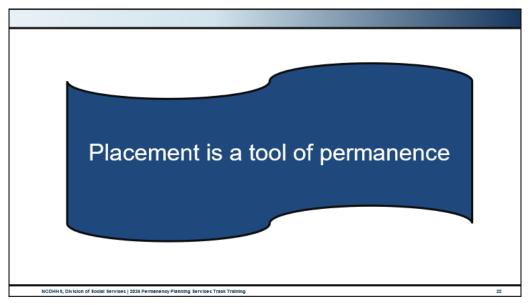
#### Reflections and Check-In

Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any "aha moments."

## **Placement**

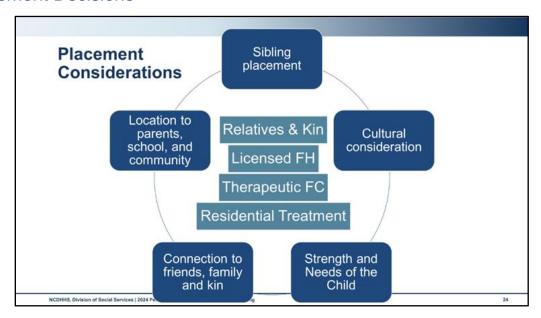


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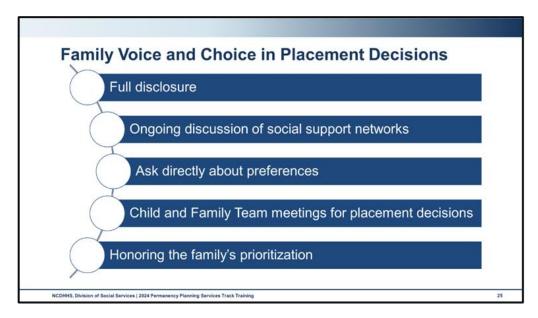
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## **Placement Decisions**



Legal basis for sibling placements: The Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351, requires that agencies make reasonable efforts to place siblings removed from their home in the same foster care, adoptive, or guardianship placement unless it is contrary to the safety or well-being of any of the siblings to do so.

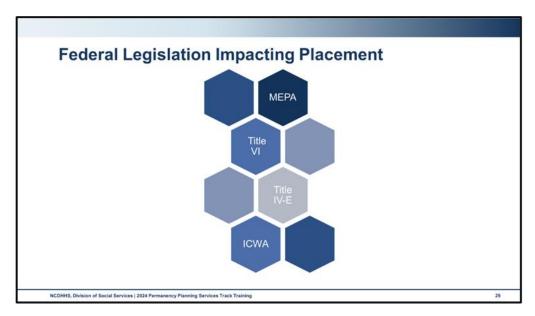
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How have you	practiced center	ing the voice a	and choice of far	milies in placement
decisions?				

How does centering family voice and choice impact th	

How does centering family voice and choice impact the quality and sustainability of children's and youths' placements?



Use this space to record notes.				

## Video: Cultural Matching in Foster Care – A Child-Centered Approach

<u>Cultural Matching in Foster Care – A Child-Centered Approach</u>

Use this space to record notes.		

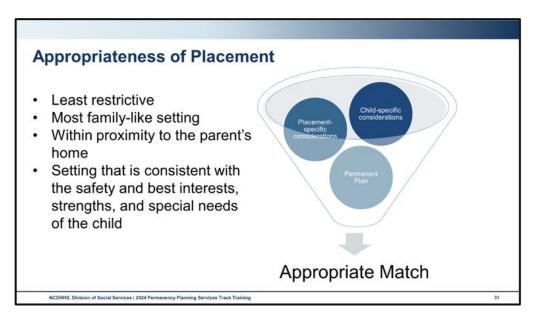
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How can you maintain cultural connections for children placed into foster care?

# Activity: Getting to Know the Child or Youth

nat is importa cision?	ant to know abo	ut a child or y	outh when m	naking a plac	ement
w can you le	arn this informa	ation from ch	ldren and yo	uths?	

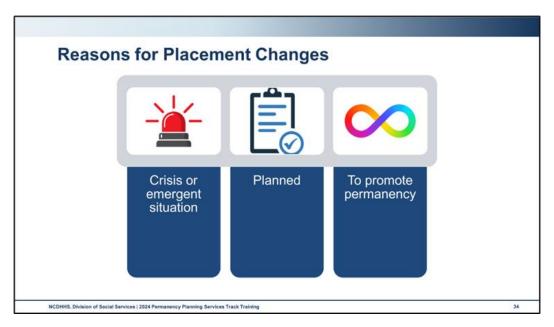


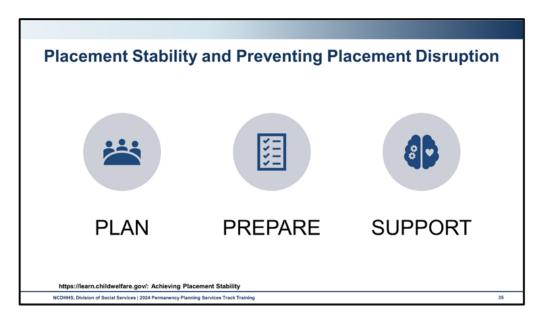


Use this space to record notes.			

# **Placement Stability**







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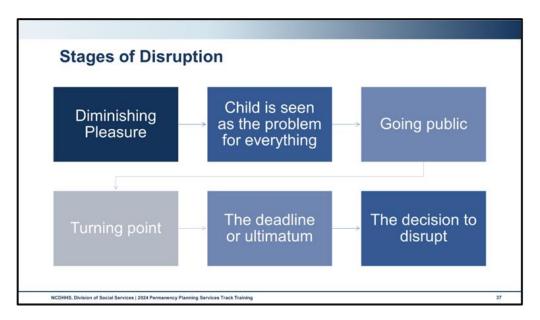
## Worksheet: Factors in Placement Stability

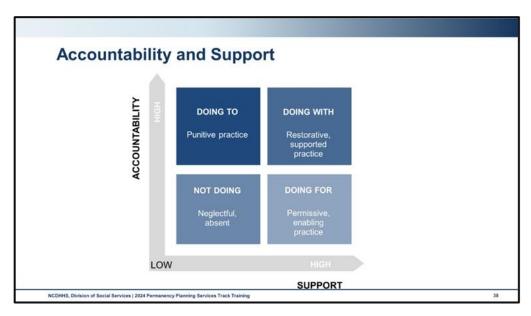
e Family

- Placement with relatives or kin
- Race of the resource family
- Number of children in the home
- Placement with siblings
- · Access to support system
- Attentiveness to caregiver-child relationships

## Organizational

- Social Worker turnover
- Social Worker cultural humility
- Knowledge of the child and understanding of specific needs Parental substance use disorder





## Skills Practice: Accountability and Support-Case Scenario

Laverne calls you to let you know that she is having doubts about continuing placement with Van, although she feels things are going okay with Raymond. Laverne shares that Van has been "smart-mouthed" with her, meaning Van has rolled their eyes, huffed in response to directives, and has made statements like, "You aren't my parent," or "What do you even know about this?" when Laverne is trying to be understanding or give advice. Laverne said that Van has been refusing to do chores and when Laverne insists, Van has been walking out of the house. Although this is in accordance with their plan for de-escalation and although they are staying in the neighborhood, Laverne feels like they are ignoring Laverne's calls and texts to return. Laverne took Van's phone as punishment and Laverne is "at her wit's end" with this disrespect.

Laverne said that most recently, Van accused her of babying Raymond. Van made a statement to the effect that Laverne punishes Van for everything and lets Raymond get away with everything. Laverne said she does more for Raymond because he is young and has ADHD, so he cannot control himself. When asked how Laverne responds when Raymond doesn't do his chores, Laverne says she reminds him and does them with him to make sure they are done properly. Laverne says she hasn't had to take away privileges for Raymond like she does for Van because Raymond does them with her support.

Consider	these statements and whether you agree, partially agree, or do not agree:			
• La	verne is at risk of "doing to" Van and engaging in more punitive practices.  verne may be more permissive with Raymond, doing for him and practicing vaccountability.			
	verne may need support to implement a more balanced, restorative approach th both children.			
What act	tions can be taken to increase accountability?			
What actions can be taken to increase support?				

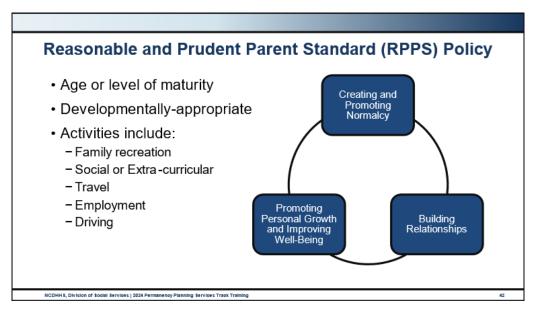
Stage of disruption:

# Reasonable and Prudent Parenting Standard

Video: Adoptive Family: Negotiating "Normal"

Adoptive Family: Negotiating "Normal
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Use this space to record observations and reflections from the video.		



## Handout: Applying the Reasonable and Prudent Parenting Standards (RPPS)

#### Applying the Reasonable and Prudent Parent Standard

- 1. Is this activity reasonable and age-appropriate?
- 2. Are there any foreseeable hazards?
- 3. How does this activity promote social development?
- 4. How does this activity normalize the experience of foster care?
- 5. Will this activity violate a court order, juvenile justice order, a safety plan, a case plan, or a treatment plan or person-centered plan (PCP)?
- 6. Will this activity violate any policy or agreement of my licensing agency or the child's custodial agency?
- 7. If appropriate, have I received consultation from my case worker and/or the child's caseworker?
- 8. If able and appropriate, have I consulted with this child's birth parents about their thoughts and feelings about their child participating in this particular activity?
- 9. Will the timing of this activity interfere with a sibling or parental visitation, counseling appointment, or doctor's appointment?
- 10. Who will be attending the activity?
- 11. Would I allow my birth or adopted child to participate in this activity?
- 12. How well do I know this child?
- 13. Is there anything from this child's history (e.g. running away, truancy) that would indicate he may be triggered by this activity?
- 14. Does this child have any concerns about participating in this activity?
- 15. Has this child shown maturity in decision making that is appropriate for his age and ability?
- 16. Does this child understand parental expectations regarding curfew, approval for last minutes changes to the plan and the consequences for not complying with the expectations?
- 17. Does this child know who to call in case of an emergency?
- 18. Does this child understand his medical needs and is he able to tell others how to help him if necessary?
- 19. Can this child protect himself?
- 20. When in doubt, refer to number 7.

Adapted from Florida's Caregiver Guide to Normalcy

http://www.kidscentralinc.org/caregiver-guide-to-normalcy/

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Activity:	Whose	Decision	Is It A	anyway?
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When deciding if activities and engagements are normal for children and youth in foster care, who decides what is "normal"? Respond to each statement read by the training facilitator.

se this space to record notes.	

### Reflections and Check-In

Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any "aha moments."

# **Placement Learning Lab**

Skills Practice: Matching Strengths to Needs

#### Scenario:

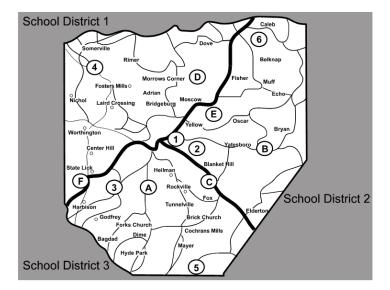
You are a permanency planning worker in a medium-sized county. Six situations occur on one day that bring children into care. No kinship care alternatives were available for any of these children. Your county has six foster homes immediately available. All these foster homes have successfully parented foster children in the past.

## Follow the steps below to identify the best placement match for each child:

- Identify the strengths of each foster home
- Identify at least one stressor or burden that would need to be taken into consideration in placing a foster child in that home
- Agree on which foster placement match would be in the best interest of each child.
- Identify the support or training the family might need to increase the likelihood of maintaining the placement.

## Children:

- 1. Infant boy, Black, HIV positive, positive toxicology report at birth. Brought into care for neglect.
- 2. Sibling group, Black, 2-year-old boy and 3-year-old girl. Well bonded with each other. Brought into care for neglect.
- 3. Adolescent boy, 14 years old, white. Playing on his high school baseball team. Brought into care for abuse.
- 4. Girl, 9 years old, white. Brought into care after sexual abuse by stepfather.
- 5. Boy, 6 years old, Black. Diagnosed with ADHD. Brought into care for abuse.
- Twins, 7-year-old girls, Hispanic. Speak Spanish as their primary language, but both understand some spoken English. Have been in several schools already this year, as their parents are migrant farm workers. Brought into care for neglect.



## Resource (Foster) Parents:

Fost	er	Pai	rei	nt	Α.
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Black male, 36 years old. Director of Boys and Girls Club. Former college athlete, still participates in sports activities. Divorced, has joint custody of his 7-year-old daughter for whom he pays child support, although his ex-wife lives in another state. Prefers ages 5-21. Has two bedrooms available. Income: \$44,000. In school district number three.

Strengths	Stressors or Barriers

#### Foster Parent B:

White lesbian couple, 36-year-old pharmacist and 34-year-old computer programmer. Have been together for seven years. Two children of their own: a boy, 2 years old, and a girl, 4 years old. Active in community justice issues. Supportive family and friends. Have one bedroom available. Licensed for three children. Combined income: \$97,000. In school district number two.

Strengths	Stressors or Barriers

### Foster Parent C:

Couple in their late 60s whose own children are grown. Own their farm and still maintain a small garden. Husband, white. Wife, Asian. Married when husband was overseas in the military. Have some income from rental property and Social Security. She had been a childcare provider, and he had been a farmer and part-time inspector in the local processing plant. They have a 5-year-old male foster child who is developmentally delayed. Prefer children ages 3-10. Have two bedrooms available. Licensed for three children. Do not want a sexually abused child. Combined income \$48,000. In school district number three.

Strengths	Stressors or Barriers

#### Foster Parent D:

White male, 34 years old. Manager of a large bookstore. Plays with a local jazz ensemble. Has a roommate who is a 26-year-old graduate student from India. The Indian roommate works part-time and has a girlfriend who does not live with him. Neither man has children of his own. Has one bedroom available, licensed for two children, ages 2-21. Prefers male children. Does not want children with intellectual disabilities. Income: \$39,000. In school district number one.

Strengths	Stressors or Barriers	

Foster	Parent	F:

Black female, 41 years old. Divorced with one 10-year-old son. Works in a hosiery mill. Lives in public housing in the same small town where her parents live and has a good relationship with them. Active in her Baptist church. Receives child support. Licensed for four children, ages infant and up. Has two bedrooms available. Does not want a child with severe medical problems but will accept a child with a sexual or physical abuse history. Income: \$33,000. In school district number two.

Strengths	Stressors or Barriers

## Foster Parent F:

Married Hispanic couple, ages 31 and 28. Have two boys, ages 6 and 8. Husband is a nurse's aide in a retirement center and coaches Little League. Wife works part-time as a housekeeper in a hotel. Catholic. Licensed for three children, ages infant and up. Do not want child diagnosed with mental illness. Combined income: \$37,000. In school district number one.

Strengths	Stressors or Barriers

## **Best Placement Matches**

Child	Foster Parent	Training or Support Required
1. Infant Boy		
2. Sibling group		
3. 14 yr Boy		
4. 9 yr Girl		
5. 6 yr Boy		
6. 7 yr Twins		

## Worksheet: Transition Planning

The family and CFT have agreed to change the placement for the children to the home of their maternal aunt, Michelle. It is time to create the transition plan.

## <u>Preparation</u>

- Each group will be assigned a person whose perspective is essential to creating a solid transition plan.
- Utilizing the updated scenario information for this person, generate a list of factors to consider that represent this person's perspective.

Assigned Person	
Factors to consider for t	this person in transition planning

## <u>Transition Planning Discussion</u>

In this perspective-taking activity, a member of your group will act as a representative for your assigned person in the transition planning discussion.

- Perspective-taking requires that you share thoughts, feelings, and ideas that center on the perspective of the person you represent. This is not a role play.
- Use the list of factors to consider created to ground your perspective.
- Representatives share the perspectives of the assigned person only.

Discussion Observations				

## Debrief

How did your perspective change as a result of this skills practice exercise?			
What will you remember to do or try when having this conversation with families			
n the future?			

### Reflections and Check-In

Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any "aha moments."

# **End-of-Day-Values Reflection**

Use this space to record questions and reflections about what you have learned.

Planning Services.					
Use this space to record notes from the group conversation.					

In small groups at your table, share at least one value from this training today that will shape how you support and advocate for families in Permanency

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# **Appendix: Handouts**

Circles of Safety and Support	2
Applying the Reasonable and Prudent Parenting Standards (RPPS)	
Record of Reflections and Values	5

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**Appendix: Handouts** 

# Circles of Safety and Support

Circles of Safety and Support is a Safety-Organized Practice tool used to support families in identifying people in their network. This tool can be used with adults, youth, and children. The Circles of Safety and Support tool can be used on the very first visit with a family or at the point when you are starting to talk with family about the importance of involving a network of family and friends and involved professionals. Circles of Safety and Support helps workers to introduce and explore the idea of involving a network.

Outer Circle

Middle circle

Inner Circle

Inner Circle: Most supportive and knowledgeable

- Who knows everything about what we are worried about here?
- With whom do the children feel the most connected?
- Who are the first people you call when you are in need?

Be sure to acknowledge the family's ability to access support. Perhaps say, "How did you find the strength to reach out to them about this?"

Middle Circle: Those who are supportive and somewhat connected

- · Who knows some things about these worries?
- Who support you a little?
- · With whom do your children feel some connection?
- Who knows a little about what is going on?

Outer Circle: Those who have little knowledge or create barriers

- · Who knows nothing about what is going on?
- Who creates challenges or barriers for your family?
- · Who have you not reached out to, but could see yourself reaching out to in the future?
- Who is willing to support <u>you</u> but you don't feel comfortable asking them?
- · Who is in your phone/contact list or on your social media?

Engaging parents/caregivers using the Circles of Safety and Support tool is a good first step to helping them understand what a safety network is and who needs to be a part of the safety planning process. Share with parents that the network is built by them and can include family, tribes, friends, neighbors, service providers, and others that they believe will be beneficial.

**Appendix: Handouts** 

If the family struggles to identify supports, consider the following:

- If you were in an accident and were taken to the hospital, who would you call to pick up your children from school?
- If your house was on fire and burned to the ground, who would you call?
- If you won the lottery, who would be the first person you call?
- Who would your children say they want to spend the night with if you needed to go out of town and couldn't take them with you?
- If you died tomorrow, who would you want to take your children in and care for them until they are adults?
- Who is someone who has shown a lot of interest and support to your children now or in the past? (teacher, neighbor, counselor, church member, someone you work with?)
- Who can help you move closer to your goals? (Boss, co-worker, counselor, neighbor, friend of a friend)
- Do you belong to a church, club, support group, sports team? If so, who are some people who have been there for you and your children?
- Who do you look up to? Who encourages you when you are having a bad day?
- Has there ever been a time you felt no one cared about you and your feelings?
   Who is someone who stepped up and made you feel better?
- Tell me about a time when things were working well for your family, what did that look like and who helped you and your children at that time?
- Who in your life has had a tragedy and you helped them through that difficult time?
- Create a family tree with the parent/caretaker and ask about communication and location of these individuals.

#### Source:

Using Circles of Safety and Support to Build Safety Networks with Families, Child Welfare Practice Manual Resources (December 2021). https://policies.ncdhhs.gov/wp-content/uploads/Resource Using-Circles-of-Safety-and-Support-to-Build-Safety-Networks\_June2024.pdf

## Applying the Reasonable and Prudent Parenting Standards (RPPS)

## Applying the Reasonable and Prudent Parent Standard

- 1. Is this activity reasonable and age-appropriate?
- 2. Are there any foreseeable hazards?
- 3. How does this activity promote social development?
- 4. How does this activity normalize the experience of foster care?
- 5. Will this activity violate a court order, juvenile justice order, a safety plan, a case plan, or a treatment plan or person-centered plan (PCP)?
- 6. Will this activity violate any policy or agreement of my licensing agency or the child's custodial agency?
- 7. If appropriate, have I received consultation from my case worker and/or the child's caseworker?
- 8. If able and appropriate, have I consulted with this child's birth parents about their thoughts and feelings about their child participating in this particular activity?
- 9. Will the timing of this activity interfere with a sibling or parental visitation, counseling appointment, or doctor's appointment?
- 10. Who will be attending the activity?
- 11. Would I allow my birth or adopted child to participate in this activity?
- 12. How well do I know this child?
- 13. Is there anything from this child's history (e.g. running away, truancy) that would indicate he may be triggered by this activity?
- 14. Does this child have any concerns about participating in this activity?
- 15. Has this child shown maturity in decision making that is appropriate for his age and ability?
- 16. Does this child understand parental expectations regarding curfew, approval for last minutes changes to the plan and the consequences for not complying with the expectations?
- 17. Does this child know who to call in case of an emergency?
- 18. Does this child understand his medical needs and is he able to tell others how to help him if necessary?
- 19. Can this child protect himself?
- 20. When in doubt, refer to number 7.

Adapted from Florida's Caregiver Guide to Normalcy

http://www.kidscentralinc.org/caregiver-guide-to-normalcy/

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## **Appendix: Handouts**

# Record of Reflections and Values

Reflection and End of Day Values Sheet			
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Reasonable Efforts	Two Level Decision-Making		

Reflection and End of Day Values Sheet				
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Self-Values Reflection	Reasonable Efforts	Two Level Decision-Making		