Comprehensive Assessment and Service Planning

Rhode Island Department of Children, Youth and Families
Policy: 700.0075
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The Rhode Island Department of Children, Youth and Families (the Department) is mandated by federal and state law and Department policy to make reasonable efforts to prevent the child's removal from his/her home, to reunify the child and family and to make and finalize an alternate permanent placement when the child and family cannot be reunited. The Department utilizes a comprehensive assessment and service planning process for each child and family receiving services from the initial point of contact throughout case closure. This process is guided by principles of family-centered, culturally competent practice and utilizes standardized tools at various points throughout the Department's involvement with a family. Family represents the focus of all work and family members are engaged through the development and implementation of any plan. The family is defined broadly and includes biological parents, adoptive families, extended kinship networks, legal guardians and foster families.

Staff engage families in accordance with the Department's vision, mission and family centered practice principles. (Refer to DCYF Policy 100.0190, Vision, Mission and Guiding Principles.) Department staff:

- Believe family engagement contributes to child safety, recognize that the family is the constant in the child's life and ensure that children maintain connections with those who matter to them;
- Partner with families and community providers through open, honest, respectful, ongoing discussions regarding rights, responsibilities, permanency, time frames and access to timely services to meet the safety needs of the children and families;
- Recognize and respect the racial, ethnic, cultural, sexual orientation and expression, special needs and socioeconomic diversity of all families and learn how such areas impact a family's parenting and decision making;
- Understand and incorporate the developmental needs of infants, children and adolescents and their families into service delivery systems;
- Link families to services that are flexible, culturally and linguistically competent and responsive to family needs;
- Continually assess family and child strengths, individual needs and modify plans accordingly; and
- Facilitate family and professional collaboration with formal, informal and natural supports, including family-to-family support and networking.

The comprehensive assessment and service planning identifies, considers and weighs factors that affect child safety, permanency and well-being. This process recognizes patterns in behavior over time and examines family strengths and protective factors to identify resources to support the family's ability to protect the children. A child is considered safe when evaluation of all available information leads to the conclusion that the child in his or her current living arrangement is not in immediate danger of harm and no interventions are necessary to ensure the child's safety. If the child is not safe, immediate interventions must be taken to ensure the child's safety. Safety interventions are responsive to the immediate and imminent danger of harm to the child and are not expected to impact identified risks of future harm. Risk assessments address the likelihood of future maltreatment. While safety concerns require immediate interventions to ensure that children are protected, risk of future harm is addressed over time with services that result in long-term positive behavioral changes.

Rhode Island General Law (RIGL) 42-72-10 and Department policy require a written Service Plan for the care and treatment of each child under the Department's supervision. Rhode Island Family Court Rules, Rules of Juvenile Proceedings: Rule 17C, requires a Service Plan be

submitted within thirty days when there is a finding of Dependency/Neglect/Abuse on a petition filed by the Department. If a child is placed in substitute care, federal law (42 USC 675) and federal regulations (45 CFR 1356.21) require that each Service Plan for the child must include specific information to determine the appropriateness of and necessity for out-of-home placement. The Fostering Connections to Success and Increasing Adoptions Act of 2008 (PL 110-351) amended 42 USC 671 to require the State to make reasonable efforts to place siblings removed from their home in the same foster care, adoption or guardianship placement or facilitate visitation or ongoing contacts with those that cannot be placed together, unless it is contrary to the safety or well-being of any of the siblings. PL 110-351 also requires the development of a transition plan for youth leaving the Department's care and the Patient Protection and Affordable Care Act (PL 111-148) amended 42 USC 675 to require that additional information be included in the transition plan. The Service Plan must include:

- A plan for assuring that the child receives safe and proper care and that appropriate services are provided to parents, child and foster parents;
- The health and education records of the child, to the extent available and accessible;
- Where appropriate, for a child age sixteen or over, a written description of the program and services which will help prepare the youth for the transition toward a self-sufficient and productive adult life; and,
- In the case of a child with respect to whom the permanency plan is adoption, guardianship or another planned permanent living arrangement (APPLA), documentation of the steps the agency is taking to find an adoptive family or other permanent living arrangement.

DCYF Policy 100.0055, Complaints and Hearings outlines the appeals process for parents/guardians and children, to the extent of their ability to participate, who disagree with portions of the Service Plan and wish to appeal its implementation.

Related Procedures

Child Protective Services Child Safety Assessment
Child Protective Services Intake Summary
Juvenile Correctional Services Initial Assessments
Family Story, Risk and Protective Capacity Assessment and Service Plan

Related Policies

Removal of Child from Home
Intake Process - Child Welfare (Non Child Abuse/Neglect) Matters
Intake Process for New Cases Resulting from Completed Child Abuse/Neglect Investigation - Indicated Case
Juvenile Probation Supervision
Clinical Services at the Rhode Island Training School
Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services Worker Client Contact
Locating and Engaging Absent Parents
Rhode Island Children's Information System (RICHIST)
Supplemental Security Income
Complaints and Hearings
Visitation Policy
Vision, Mission and Guiding Principles

Related Staff Protocol

~~Annual Credit Report for Youth 16 and Older~~

Child Protective Services Child Safety Assessment

Procedure from Policy 700.0075: Comprehensive Assessment and Service Planning

A. A Child Safety Assessment is completed during each investigation to determine if a child or youth is likely to suffer maltreatment in the immediate future, guide and document decision making in the removal or return of a child to the child's family during investigations and guide decision making on child safety factors, that if not addressed, pose a safety threat to a child.

1. Child Protective Investigator (CPI) completes a Child Safety Assessment (DCYF #184) during each investigation for children at home.
2. CPI completes a Safety Assessment - Investigation Institutional (DCYF #184A) for children living in foster care.
3. The RICHIST generated DCYF #184 and DCYF #184A are created through the Investigation window as part of the investigation process (refer to RICHIST Window Help: Child Safety Assessment Window [Investigative]).
4. Responsibilities of the CPI during a CPS Investigation are outlined in DCYF Policy 500.0075, Removal of Child from Home.

B. A Safety Plan is developed when a safety threat has been identified in the DCYF #184 or #184A and a protective intervention is put into place to remediate the unsafe condition.

1. The Safety Plan contains one or both of the following elements depending on the individual safety needs of each child in the family:
    a. In-Home Safety Plan is developed when the protective capacity of the parent or caregiver can be enhanced or supported to create safety for the child.
    b. Out-of-Home Safety Plan is developed if reasonable efforts have been unsuccessful in preventing the removal of the child from the home, or:
        i. Existing protective capacity of the parent or caregiver cannot be enhanced or supported to provide for the child's safety; or
        ii. There is no parent or caregiver to provide for the child's safety needs.
2. The safety plan is implemented and active as long as threats to child safety exist and caregiver protective capacities are insufficient to assure a child is protected.
3. The Safety Plan is the initial stage of the comprehensive family assessment process and contains information that must be reviewed at critical points through the Department's involvement and documented in the family's Service Plan
4. The safety plan must be well planned and then written in a detailed manner. Each safety plan:
    a. Specifies any foreseeable danger threats.
    b. Identifies how the foreseeable danger will be managed including:
        i. by whom
        ii. under what circumstances and agreements
        iii. with specification of time requirements, availability, accessibility and suitability of those involved.
    c. Considers caregiver awareness and acknowledgement of safety threats and caregiver acceptance and willingness for the plan to be implemented.
    d. Includes how the plan will be overseen by Department staff across divisions.

Child Protective Services Intake Summary

Procedure from Policy 700.0075: Comprehensive Assessment and Service Planning

A. Communication between the initial Child Protective Investigator (CPI) and Intake staff occurs upon case transfer to Intake. This ensures that the safety threats identified during investigation and the safety plan are fully communicated to and understood by the Intake worker receiving the case.

1. In addition to transmission of necessary documentation, the primary staff assigned to the family engages Department workers, family members, caregivers, formal providers, informal providers and natural supports to the family in the ongoing monitoring of safety management.
2. The safety plan is updated, if appropriate, to reflect the protective interventions in place to ensure child safety and manage risk factors.

B. Intake staff completes the RICHIST-generated Intake Summary (DCYF #071) as part of the intake process for non-child abuse/neglect matters and new cases resulting from completed or pending child abuse/neglect investigations. Refer to DCYF Policy 600.0000, Intake Process – Child Welfare (Non-Child Abuse/Neglect) Matters, and DCYF Policy 600.0005, Intake Process for New Cases Resulting from Completed Child Abuse/Neglect Investigation – Indicated Case.

C. The DCYF #071 builds upon the safety plan outlined in the Child Safety Assessment (DCYF #184) or Child Safety Assessment – Investigation Institutional (DCYF #184A) completed during the investigation. Refer to RICHIST Window Help: Intake Summary. The DCYF #071 and contains a summary of:

1. Identifying family information on active and inactive children
2. Current agency involvement and identification of issues impacting family functioning
3. Prior DCYF history
4. Risk factors and interventions
5. Protective capacity
6. Family strengths,
7. Formal and informal supports
8. Receptiveness to intervention and
9. The disposition of the case.

D. The family may be assigned to a Family Services Unit or Juvenile Probation for further services or closed to the Department. The family may be referred to:

a. Family Community Care Partnership with an agreed upon risk management plan. Refer to Family Care Community Partnership (FCCP) Practice Standards.

b. Another community partner.

E. If the family becomes active, information from the DCYF #071 pre-fills into the RICHIST-generated Family Story (DCYF #148-A) and Risk and Protective Capacity Assessment (DCYF #148-B). Refer to Procedure: Family Story, Risk and Protective Capacity Assessment and Service Plan.

Juvenile Correctional Services Initial Assessments

Procedure from Policy 700.0075: Comprehensive Assessment and Service Planning

A. Juvenile Probation and Parole

1 A Probation Risk/Needs Assessment is used to identify risk to the community relating to the youth placed on Probation as well as family needs for the necessary supervision level of the youth. Refer to DCYF Policy 800.0005, Juvenile Probation Supervision.

2 Juvenile Probation staff completes:

a. The RICHIST generated Probation Risk/Needs Assessment upon assignment to a youth and quarterly throughout the length of time the youth is on Probation. Refer to RICHIST Window Help: Probation Risk/Needs Assessment Window and Probation Risk/Needs Re- assessment Window.

b. The Family Story (DCYF #148 A) and Risk and Protective Capacity Assessment (RPCA) (DCYF #148 B). Refer to Procedure: Family Story and Risk and Protective Capacity Assessment.

B. Rhode Island Training School (RITS)

1 The RITS Intake process is outlined in DCYF Policy 1200.1100, Clinical Services at the Rhode Island Training School. Intake includes but is not limited to administration of the:

a. Massachusetts Youth Screening Instrument Version 2 (MAYSI-2)

i. The MAYSI-2 determines the presence of acute mental health issues which may require prompt intervention for residents.

ii. The MAYSI-2 is administered by RITS staff to youth within forty- eight hours of detention.

b. A validated assessment which

i. Evaluates a broad spectrum of mental health and substance abuse issues to determine necessary levels of treatment and placement of youth sentenced to the RITS.

ii. Is completed by the RITS Clinical Social Worker within thirty days of a youth's adjudication to direct service planning.

2 The Family Story (DCYF 148 A) and Risk and Protective Capacity Assessment (RPCA) (DCYF #148 B) are completed. Refer to Procedure: Family Story and Risk and Protective Capacity Assessment.

Family Story, Risk and Protective Capacity Assessment and Service Plan

Procedure from Policy 700.0075: Comprehensive Assessment and Service Planning

A. The documents used in the assessment process are the Family Story (DCYF-148-A) and the Risk and Protective Capacity Assessment (RPCA) (DCYF-#148-B).

1. The Family Story is a social and assessment summary that is continually developed throughout Department involvement and includes:
    a. Information relating to agency involvement
    b. Parent and child history,
    c. Family network,
    d. Current assessment,
    e. Current progress and
    f. Case transfer/closure.
2. The RPCA is a tool used to identify within the family situation validated risks that, if present, may contribute to child maltreatment or repeat maltreatment. The RPCA also identifies protective capacities to mitigate these risks.

B. The assessment is completed in partnership with the Department worker, child (if age appropriate), parent(s)/caregiver(s), formal providers, informal providers and natural supports to the family.

1. The assessment of safety and risk and subsequent decisions are made while considering the child's need for permanency and well-being and occur throughout the duration of the family's involvement with the Department, specifically at critical decision points including, but not limited to:
    a. Initial opening to the Department,
    b. Change in family circumstances,
    c. Change in placement of child(ren) and
    d. Reunification and case closure.
2. The Family Story and RPCA are completed for all families receiving services through Family Services Units (FSU) and for all families of youth active with Juvenile Correctional Services (JCS) including youth assigned to a Probation Unit and adjudicated Rhode Island Training School (RITS) residents. Refer to RICHIST Window Help: Family Story and RICHIST Window Help: Risk and Protective Capacity Assessment.
    a. For families open to the Department as a result of a Child Protective Services (CPS) investigation relating to an allegation of child abuse and/or neglect, the assessment process:
        i. Includes parent(s)/caregiver(s) who have contact with the child and are providing care.
        ii. Is used to assess every child in the household at the initial assessment and formal six month re-assessments.
        iii. Is used to re-assess risk on every child in the household prior to reunification or significant changes in family situation.
    b. For families open to the Department for issues that do not involve a CPS investigation relating to an allegation of child abuse and/or neglect (Truancy, Wayward, Delinquency, Drug Court, Children's Behavioral Health or JCS):
        i. The assessment process includes parent(s)/caregiver(s) who have contact with the child and are providing care.
        ii. The assessment process is used with every active child in the household at the initial assessment and formal six month re-assessments.

iii. The assessment process is used with every active child in the household prior to reunification or significant changes in family situation.

iv. Documentation for Paragraph B-2-b, ii and iii, includes the status of a child's substance use, mental health and developmental stability, educational stability, medical/dental needs and vulnerability and self protection.

v. Inactive children are screened for safety, risk and well-being at the initial assessment and formal six-month re-assessments;
documentation of results is included in a Case Activity Note.

c. In dual supervision cases, staff communicate and collaborate around casework responsibilities and decisions. Refer to Policy 800.0000, Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services.

3. The primary service worker must attempt to engage all members of the family in the assessment process and document efforts in a case activity note. The primary service worker completes as much of the DCYF #148-A and #148-B as possible to effectively evaluate and address risk factors requiring the Department's involvement.
4. Once termination of parental rights occurs, the Family Story (DCYF #148-A) and RPCA (DCYF-# 148-B) become child specific and documentation on each inactive child and parent(s)/caregiver(s) is no longer required.
5. Assessment of safety and assessment of risk are two distinct, yet integrated critical functions in child protection. Communication between the Intake staff and ongoing primary service worker is critical and occurs upon case transfer to ensure that the safety threats identified during investigation and/or intake and the safety plan are fully communicated to and understood by the primary service worker receiving the case assignment.
    a. In addition to transmission of necessary documentation, the primary staff assigned to the family engages Department workers, family members, caregivers, formal providers, informal providers and natural supports to the family in the ongoing monitoring of safety management.
    b. The safety plan is updated, if appropriate, to reflect the protective interventions in place to ensure child safety and reduce risk of future maltreatment.

C. The Service Plan is time-limited, individualized and strength-based and addresses:
1. How the family will mobilize their strengths and protective capacities to mitigate behaviors identified through the assessment process that contributed to child maltreatment and Department involvement.
2. Necessary behavior changes linked to risk factors that affect safety, permanency and child well-being and identifies the mutual responsibilities and expectations of each parent, child, the Department and formal, informal and natural supports toward achieving the identified permanency goal.
3. Conditions of probation and the major factors that affect community safety for youth involved in Juvenile Corrections.
4. Action steps, in language the family can understand, to provide detail on the services and supports that are available to assist the family to reach the behavior change goal.
5. Refer to RICHIST Window Help: RPCA Link to Service Plan and RICHIST Window Help: Service Plan Procedures.

D. Engaging family systems and collateral contacts during assessment and service planning
1. Department staff must make every effort to personally interview family members, including children, in the family's home, when appropriate. If not appropriate,

worker documents reasons in the DCYF record. Refer to DCYF Policy: 700.0165, Worker Client Contact.

2. Ongoing communication and visits with the family, including individual, parent/child and/or family interviews are utilized to continuously gather information and assess family dynamics and functioning relating to safety and risk.

3. Coordinated meetings occur with formal providers, informal providers and natural supports to the family throughout the Department's involvement to capture comprehensive information about the family and to ensure ongoing family engagement. Meetings occur at a location appropriate to the family's needs. A signed Authorization to Obtain or Release Confidential Information (DCYF #007-A and DCYF #007-B) must be obtained when appropriate.
   a. The capacity to participate varies among children. Most school-aged children can participate to some extent if they are verbal and understand most of the events occurring in their lives.
   b. As age appropriate, the primary service worker:
      i. Consults the child on the child's goals and services
      ii. Reviews the plan with the child to ensure the child's input
      iii. Explains the plan and terms used in language the child can understand,
      iv. Includes the child in periodic service planning meetings and
      v. Includes the child in the Administrative Reviews as appropriate. Refer to DCYF Policy700.0030, Administrative Review.

4. The Department is responsible to locate and engage absent parents. Efforts to engage and re-engage the family are documented in the DCYF record. Refer to DCYF Policy 700.0235, Locating and Engaging Absent Parents.

5. If a putative father notifies the Department that he may be the father of a child in care, steps must be taken to determine paternity. Once paternity is established, the father is included in the assessment and service planning process.

6. The Department assists with federal benefits as appropriate and in conformance with DCYF Policy 1000.0005, Supplemental Security Income (SSI).

E. Information collected by the Department relating to the family is entered into RICHIST. Refer to DCYF Policy 700.0100, Rhode Island Children's Information System (RICHIST).

F. The Primary Service Worker(s) obtain signatures on the Service Plan to confirm that all parties participated in the development, review and revision of the plan and were provided the opportunity to agree or disagree with the content.

1. Each party signing the Service Plan has the right to disagree with the content of the plan and appeal implementation of the plan. Refer to DCYF Policy 100.0055, Complaints and Hearings.
   a. The primary service worker explains the Department's appeal procedure to the parents and child, to the extent of his/her ability to understand, at each signing of the Service Plan (DCYF #032).
   b. The primary service worker assists each parent and child to participate in the appeal process by providing at a minimum:
      i. DCYF form #016, Formal Request for Hearing,
      ii. Instructions for completing the form, and
      iii. Guidance as to how to process the appeal through the various stages.

2. The following individuals sign the Service Plan:
   a. Parents/guardians
   b. Children twelve years of age or older (with capacity to participate)
   c. Primary service worker(s) and supervisor(s)

d. ~~Foster parents or provider agency representatives who are involved in the development of the Service Plan and are directly responsible to provide the services prescribed in the Service Plan~~

e. Department staff person, other than the primary service worker, who is involved with the family

f. Pre-adoptive parents in cases where parental rights have been terminated and the child is in a pre-adoptive home where the foster parents have initiated the adoption process

G. Timeframes for completion, review and approval of the Service Plan:

1. FSU and Juvenile Corrections youth assigned to Probation

a. The initial DCYF #032 is completed by the assigned primary service worker within sixty days of removal from the home or assignment to FSU/JCS.

b. If adjudication occurs on a Dependency, Neglect and/or Abuse petition prior to the timeframe above, the Service Plan is developed and submitted to the Family Court within thirty days of the adjudication.

c. Subsequent Service Plans are completed by the assigned primary service worker at six month intervals or within thirty days of a change in the permanency goal.

d. For a child active in FSU/Probation where child abuse or neglect is subsequently indicated, the primary service worker makes any needed changes in an existing DCYF #032 within thirty days of the completed investigation.

e. Transition planning occurs during the timeframe outlined below in K.

2. RITS adjudicated residents:

a. The initial Service Plan (DCYF #032) is completed thirty days following adjudication for adjudicated residents.

i. The DCYF #032 is developed during the initial service planning meeting, during which the treatment team examines all material gathered during intake.

ii. The treatment team is chaired by the Clinical Director or his or her clinical designee and includes the Unit Manager, a member of the education/vocational education staff, the Clinical Social Worker, a Juvenile Program Worker (JPW), the resident, the resident's parents/guardians and other resource personnel, including, as appropriate, a psychiatrist, psychologist, physician or other staff.

iii. The Family Story (DCYF 148 A) is prepared for this meeting and includes, but is not limited to, social history, family background, educational and vocational, behavioral, medical, applicable psychological, psychiatric and neurological information.

iv. For residents who are eligible for Special Education Services, the Service Planning and Individual Education Plan (IEP) processes are closely coordinated.

b. The primary JCS worker is responsible for creating and maintaining the DCYF #032 for the resident in RICHIST.

c. The RITS Education Program representative enters educational information for the resident in RICHIST.

d. The Unit Manager is responsible for overseeing the implementation of the resident's Service Plan and for bringing it to the attention of appropriate staff.

e. The Service Plan is reviewed and, if appropriate, revised at the bi-monthly review meeting (refer to RICHIST Window Help: RITS ITP/Bi- Monthly Review Completion).

i. ~~A bi-monthly review is chaired by the Unit Manager and attended by the treatment team. This review is required for all adjudicated residents.~~

ii. The treatment team considers progress in locating community placements for residents and in providing other services prescribed in the DCYF #032.

iii. Unit Manager documents in RICHIST the date of the bi-monthly review, individuals who were invited and individuals who attended.

iv. The Clinical Social Worker revises the Service Plan, if appropriate.

f. A new DCYF # 032 is completed in RICHIST by the assigned primary service worker at six month intervals.

i. This generally occurs at the third bi-monthly review.

ii. A new DCYF #032 is also completed within thirty days of a change in the permanency goal.

g. Transition planning occurs during the timeframe outlined below in L.

3. In dual supervision cases, staff communicate and collaborate around casework responsibilities and decisions. Refer to DCYF Policy 800.0000, Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services.

4. Any change in the DCYF #032 which does not alter the permanency goal for the child is entered as an Addendum to the DCYF #032. Changes must be acknowledged by the signature of all parties who originally signed the DCYF #032. Refer to RICHIST Window Help FCRPCA/Service Plan Addendum.

5. Once a Service Plan is incorporated into a court order, any change in the plan must be put before the court in the form of a motion filed in advance of the court date. This motion is filed in conjunction with Department legal staff with notice provided to other involved parties.

6. The completed Service Plan is sent to the primary service worker's supervisor for approval.

H. Each Service Plan includes a Visitation Plan (refer to DCYF Policy 700.0040, Visitation Policy) if the child is in care including details specific to the following:

1. Parent/Guardian Visits

2. Sibling Visits

a. The Department must make reasonable efforts to place siblings together in the same foster care, adoption or guardianship placement unless it is contrary to the safety or well-being of any of the siblings.

b. If siblings cannot be placed together because it is contrary to the safety or well-being of any of the siblings or because a sibling is a RITS resident, the Department must make reasonable efforts to facilitate visitation or ongoing contacts with siblings that cannot be placed together.

I. Each Service Plan includes an Educational/Medical Statement, which contains federally required health and education information that must be provided to the foster care provider when a child enters placement. Required information includes:

1. Name and address of health and educational providers,

2. Grade level performance,

3. School record,

4. Educational stability:

a. Assurances that the child's initial and/or each subsequent 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 initial and/or each subsequent placement.

b. Assurances that the Department has coordinated with appropriate local educational agencies to:

i. ~~Allow the child to remain in the school in which the child is enrolled at the time of initial or each subsequent placement; or~~

ii. If remaining in such school is not in the best interests of the child, assurances that the Department and the local educational agencies provide immediate and appropriate enrollment in a new school, with all of the educational records of the child provided to the school.

iii. Reimbursement is provided to the foster care provider for reasonable travel for the child to remain in the same school he or she was attending prior to placement in foster care.

iv. Documentation to support if a child is not enrolled in school.

5. Record of immunizations.
6. Known medical problems.
7. Medication.
8. And any other relevant health and education information concerning the child deemed appropriate.

J. Each Service Plan includes a permanency goal specific to the family's situation including a projected date for achieving the identified permanency goal. The Department, in compliance with Federal Law, confers with the family to review the permanency plan of each child in placement at least every six months. Refer to DCYF Policy 700.0030, Administrative Review. Permanency goals include:

1. For a child remaining at home, the permanency goal is maintenance of the child at home.
   a. The child's safety must be assured.
   b. The Service Plan describes the services offered and provided to prevent removal of the child from the home including the individual services provided to each parent and child.
   c. When this goal is selected, worker determines if the child is at imminent risk to be placed in substitute care in RICHIST. Refer to RICHIST Window Help: Service Plan Window.
2. For a child in placement, the initial permanency goal is reunification in nearly all situations with specific exceptions as approved by the Family Court.
   a. Family reunification is the planned process of reconnecting children in out-of-home care with their families by means of a variety of services and supports to the children, their families, and their foster parents or other service providers.
   b. Service planning is directed toward addressing those behaviors associated with safety and risk factors which led to the child being removed from his or her home.
   c. The Department assesses and refers the family to the appropriate array of services to achieve reunification in the shortest time possible with consideration for the child's safety and well-being.
   d. The Service Plan is designed to achieve:
      i. a safe placement for the child in the least restrictive (most family- like) setting available
      ii. the proximity of the child's placement to the home of the parents, and
      iii. placement consistent with the best interests and special needs of the child.
   e. For youth sentenced to the RITS, the initial permanency goal is generally reunification. For youth transferring from FSU or Probation, the goal reflects prior history. At the discharge/transition meeting, an appropriate permanency goal is identified after a review of the youth's and family's needs.

3. ~~When reunification is not viable, adoption by relatives, foster parents, or a licensed adoptive resource is the preferred permanency goal. The Service Plan documents the steps to finalize a placement, including child-specific recruitment~~

efforts to facilitate an orderly and timely in-State and interstate permanency placement.

4. If the Department and the Family Court have determined that reunification and adoption are not viable permanency options and that it is in the best interest of the child to be placed with a kinship guardian, the Service Plan permanency goal is changed to guardianship. Refer to DCYF Policy, 700.0045 Legal Guardianship and Kinship Guardianship Assistance.
    a. The Service Plan documents the steps the Department has taken to determine that it is not appropriate for the child to be returned home or adopted.
    b. The Service Plan also addresses:
        i. The reasons for any separation of siblings during placement;
        ii. The reasons why a permanent placement with a fit and willing relative through a kinship guardianship assistance arrangement is in the child's best interests;
        iii. The ways in which the child meets the eligibility requirements for a kinship guardianship assistance payment;
        iv. The efforts the Department has made to discuss adoption by the child's relative foster parent as a more permanent alternative to legal guardianship and, in the case of a relative foster parent who has chosen not to pursue adoption, documentation of the reasons; and
        v. The efforts made by the Department to discuss with the child's parent or parents the kinship guardianship assistance arrangement, or the reasons why the efforts were not made.
5. Another Planned Permanent Living Arrangement (APPLA) includes; Permanent Placement with a Fit and Willing Relative, Planned Living Arrangement/ Independent Living, when appropriate for youth over age sixteen, and Planned Living Arrangement/Other.
    a. APPLA is a permanent placement for the child that identifies a lifelong connection.
    b. The Service Plan documents:
        i. The steps to finalize a placement including child-specific recruitment efforts to facilitate an orderly and timely in-State and interstate permanency placement when the permanency goal is or becomes APPLA.
        ii. Who will be the permanent connection for that youth, if identified, and how the Department is working to maintain that connection.
    c. APPLA is appropriate only when the Family Court has been provided with documentation that compelling reasons exist which make all other permanency options unacceptable. These reasons are re-examined at each Administrative Review and every permanency hearing to assess whether a more preferred permanency option is possible.
    d. ASFA indicates that a fit and willing relative can provide APPLA and that termination of parental rights does not have to occur within the allotted time frame if a compelling reason is provided to the Court.
        i. A relative may be fit and willing to care for the child without being prepared to consider legal guardianship or adoption.
        ii. When determining if placement with a fit and willing relative is appropriate, the worker must consider the relationship between the child and parent(s), the child and relative(s) and the relative(s) and the child's parent(s).

iii. ~~A compelling reason is documented and provided to the Court addressing the established relationships and why neither adoption nor guardianship is a viable permanency option.~~

K. Transition planning occurs during the ongoing assessment process. Service Plans are updated to reflect behavior changes and actions steps to achieve permanency for each child. In compliance with Section 475 of the Social Security Act, transition planning occurs and is documented in the Service Plan at minimum during the following timeframes:

1. For each child, age sixteen or older, the Service Plan includes a written description of the programs and services that will help the youth prepare for the transition from foster care to independence. Refer to DCYF Policy 700.0200, Independent Living. The Service Plan addresses:
    a. Housing
    b. Financial support
    c. Health care
    d. Education/vocation planning
    e. Procurement of necessary documents
    f. Personal community support systems
    g. Consumer Credit Report
        i. The primary worker contacts all three credit bureaus annually and documents result of credit check in the case record in compliance with DCYF Staff Protocol 1300.0000, Annual Credit Report for Youth 16 and Older.
        ii. Youth receive a copy of any credit report found, at no cost to the youth.
        iii. The primary worker notifies their supervisor, administrator and the legal department regarding any fraudulent information found.
        iv. The primary worker's administrator and the legal department will assist primary worker to resolve any issues on a youth's credit report.
        v. The primary worker assists each youth in understanding the credit report, any concerns with their credit, and how the Department is working to resolve these issues.
2. During the ninety-day period immediately prior to the date on which a youth in foster care will attain eighteen years of age, the primary service worker and, as appropriate, other representatives of the child, provide the child with assistance and support in developing a transition plan which is documented in the Service Plan. The transition plan is personalized at the direction of the child and is as detailed as the child may elect.
    a. The transition plan is focused around skills to gain independence and includes specific options on following areas:
        i. Housing
        ii. Health insurance
        iii. Education
        iv. Local opportunities for mentors and continuing support services
        v. Work force supports and employment services
    b. The transition plan includes information about:
        i. The importance of designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under RI law to make such decisions, and
        ii. Provides the child with the option to execute a health care power of attorney in accordance with RIGL 23-4.10-1 – 12.

iii. ~~The Department assists with federal benefits as appropriate and in conformance with DCYF Policy 1000.0005, Supplemental Security Income (SSI).~~

3. ~~Transitional planning for adjudicated residents of the RITS begins in the initial ITP meeting and is pursued consistently throughout the Bi-Monthly Review~~

process. The treatment team meets one to two weeks before the adjudicated resident's projected end of sentence to ensure that services identified during the ITP process and through the Bi-Monthly Reviews are in place to support the youth's transition. (Refer to RICHIST Window Help: Transitional Living & Discharge Plan Templates.)

a. The treatment team invites all providers of service to this meeting and ensures that the transition plan is comprehensive. The meeting includes any additional Departmental, provider agency and community resources necessary to support the resident's successful transition.

b. If the treatment team concludes that a resident has completed all required programming and has suitable discharge/transition plans in place, the team recommends to the Superintendent that the Family Court be petitioned to consider early release. This recommendation is accompanied by a report, which includes the post-release plan summarizing the resident's progress at RITS, specifying any community placements, noting where the resident will live upon release and what after-care programming the resident will receive, and setting out the grounds for the recommendation.

c. The treatment team may also conclude that the resident has critical treatment needs which cannot be met at the RITS and should follow the same plan as above to seek the child's release.

L. Distribution of the Family Story, RPCA and Service Plan

1. The primary service worker must use discretion to maintain the family's right to privacy. A signed Authorization to Release Confidential Information (DCYF #007 A) must be obtained when appropriate. Refer to DCYF Policy 100.0000, Confidentiality.
2. The Family Story, RPCA and Service Plan are included in referral packets for treatment providers and placement providers.
3. The Family Story, RPCA and Service Plan are accessible in RICHIST to quality assurance staff in the Department's Data and Evaluation Unit for review prior to scheduled administrative reviews or during routine child and family service reviews.
4. The original signed Service Plan is filed in the case record. A copy is given to the parents, and copies are provided to children, if age appropriate and to each outside agency involved in the development of the Service Plan or directly responsible to provide services prescribed in the Service Plan.
5. The Educational/Medical Statement is updated and provided to the foster parent/provider at the time of each placement. Federal Law requires the Department to provide, at no cost, a copy of the child's health and education record to the child at the time the child exits foster care at age of majority.
6. The Educational/Medical Statement is provided to the foster parents separate from the Service Plan if it is not appropriate for the caretakers to receive the entire Service Plan.
7. Copies of the Service Plan are periodically provided to the Family Court:
   a. Within thirty days of adjudication on a Dependency/Neglect/Abuse petition.
   b. No less than annually at the time of the Permanency Hearing. Refer to DCYF Policy 1100.0000, Obtaining Custody of Child through the Dependent/Neglect/Abuse Petition.
   c. At the time of the Family Court review of voluntary placements.
8. A copy of the Service Plan is given to the Court Appointed Special Advocate (CASA) or Guardian Ad Litem (GAL).