

# **OUR VISION**

We envision a safe and positive future for all Texas children.

# **OUR MISSION**

The mission of Texas CASA is to support local CASA volunteer advocacy programs and to advocate for effective public policy for children in the child protection system.

#### **ACKNOWLEDGMENTS**

This resource book is the product of much hard work, collaboration and effort from a dedicated group of people across the CASA network over a three-year period. Thank you to everyone involved who made this resource possible!

#### **Local CASA Programs**

CASA of Brazos Valley/Voices for Children, Inc.

CASA of Central Texas

CASA of Collin County

CASA of Deep East Texas

CASA of the Coastal Bend

CASA of West Texas

CASA of Williamson County

Child Advocates of Fort Bend

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And a special thank you to everyone on the Texas CASA team.





The Meadows Foundation

STRENGTHENING THE VOICES OF CASA STATEWIDE

## WELCOME

The vision of Texas CASA is a safe and positive future for all Texas children. Turning this vision into a reality starts here with you. The resource book in your hands is your roadmap to ensuring that all Texas children are given the opportunities they deserve by turning the spotlight onto an often overlooked group – children and youth in long-term foster care.

These children are the most vulnerable of the vulnerable – their parents' rights have been terminated and they are now in the permanent care of the Texas child welfare system with the state as their legal parent. Their chance for finding a safe, loving home gets smaller and smaller with each passing day, month, and year that they languish in the system. For too many children, this is their path until they turn 18 years old and leave the system often unprepared for adulthood – facing a future of bleak outcomes like homelessness, incarceration and drug addiction.

This is not a future we would envision for our own children, and it is not one we can continue to allow for our children in care. That cycle ends now.





The state is not meant to be a permanent parent. Together, we can redirect the paths of children in long-term care by bringing back the urgency to their cases and by finding the right volunteers that will not rest until that child has a loving family and stable place to call home.

The purpose of this resource book is to provide you and your program the resources needed to recruit and train CASA volunteers to advocate for this often-forgotten group of children and youth, while also providing the advocates with the right tools to address the unique challenges of long-term care. The challenges these children face will require a different level of dedication dedication that comes from the CASA network at both the state and local level.

The CASA Way says that we will achieve what others think is impossible and that each of us is a part of the solution. I know we can, and will, get to a future where CASA is no longer needed because every child has the safe, loving home they deserve – and this future will take all of us.

Thank you for being a part of the solution.

Yours,

Vicki Spriggs Texas CASA CEO

# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

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# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

## INTRODUCTION

#### **IMAGINE THIS STORY...**

At five years old, you enter the foster care system through no fault of your own, but because you were abused and neglected by your parents. During the 12 months that Texas law allows your parents to work through services to address their struggles, you are confronted by many struggles of your own. But now, removed from your familiar environment and support system, you feel as though you endure these struggles on your own. During this year of upheaval, you meet with three different caseworkers, move to five different homes, attend two different schools, and swallow



All children deserve permanency, and we seek it for them with a sense of urgency.

four different types of prescribed psychotropic medications to settle what others describe as your "emotional issues." After celebrating your sixth birthday with strangers, your life is forever changed when your parents lose their parental rights, and a CPS caseworker tells you that you cannot return home.

Though your case will continue to be brought to the court, this might be the last time you see your attorney ad litem. If you were fortunate enough to have a CASA, the judge may tell the CASA that they must say goodbye, too. Again, you are in danger of losing one of the few, if not only, constant adult figures in your life, leaving you to enter the Permanent Managing Conservatorship (PMC) of the state, alone.

As a member of the CASA team, you know this story. This resource guide will help you change its ending.

According to the Department of Family and Protective Services (DFPS), of the total 30,540 children in the Texas foster care system on August 31, 2016, 36% (10,982) were in PMC, or long-term foster care. Only 39% (4,261) of these children in PMC had the steady, long-term support of a CASA volunteer. Though CASAs served on more than half of the DFPS cases that year, a considerable majority of those volunteers worked on Temporary Managing Conservatorship (TMC) cases.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup>Texas Department of Family & Protective Services, 2016 Annual Report & Data Book. <a href="https://www.dfps.state.tx.us/About DFPS/Annual Report/2016/">https://www.dfps.state.tx.us/About DFPS/Annual Report/2016/</a>

|  | Texas  |         |  | Texas  |         |
|--|--------|---------|--|--------|---------|
| FY2015   | Number | Percent | FY2016   | Number | Percent |
| Total Number of children<br>in Child Protective Services<br>(CPS) Conservatorship as of<br>August 31, 2015 | 29,705 |         | Total Number of children<br>in Child Protective Services<br>(CPS) Conservatorship as of<br>August 31, 2016 | 30,540 |         |
| Children in Permanent<br>Managing Conservatorship<br>as of August 31, 2015                                 | 11,791 |         | Children in Permanent<br>Managing Conservatorship<br>as of August 31, 2016                                 | 10,982 |         |
| Children in PMC served by CASA as of August 31, 2015   | 4,205  | 36%     | Children in PMC served by CASA as of August 31, 2016   | 4,261  | 39%     |

The goal of this resource guide is not simply to help balance the ratio of TMC to PMC court-appointed advocates, but to help you encourage and train volunteers to shift their attention from time-based goals to needs-based goals, which support all youth in the foster care system, including those in PMC. The needs-based goals discussed in this resource guide will help your staff and volunteers achieve the ultimate aim of CASA: to advocate for children's best interests and help children establish healthy adult connections that could lead to a safe and permanent home.

Every day that a child stays in the "permanent" managing conservatorship of the state is a day that they are less likely to find a permanent, responsible family or adult connection. The longer a child goes without healthy family connections, the less likely they are to experience educational success, the more likely they are to become homeless, and the more likely they are to become a part of the criminal

justice system. An advocate's need to help youth find permanency must be urgent, and the time to cultivate a strong base of PMC advocates is now.

## How to Use This Resource Guide

Texas CASA's three-year PMC Project set out to recognize best practices for volunteers to support children in PMC and for staff to support those volunteers. Though the material that informs this resource guide came out of close observation of staff and volunteers who work on PMC cases, the resources have practical, meaningful application for both PMC and TMC cases.

As you read the recommendations outlined in this guide, please keep the following in mind:

 It may be tempting to focus on the differences between TMC and PMC and conclude that volunteers fall into two separate categories with two different sets of responsibilities, needs and strategies; but



#### TEXAS CASA PMC RESOURCE GUIDE

it is important to remember that all CASA volunteers share a common mission: to provide constancy for youth who have been abused and neglected while advocating for services and placement in safe, permanent homes.

- 2. The strategies and best practices specific to PMC build on those shared by TMC.
- 3. Many of the strategies and best practices most associated with PMC, specifically those pertaining to Family Finding and a focus on needs-based goals, should be emphasized to all volunteers as early as recruitment and throughout their work with CASA.
- 4. According to the Kids Count Data Center, the United States foster care system is comprised of 48% females and 52% males. To avoid sexist language, we will alternate between the feminine and masculine singular pronouns, chapter by chapter.
- 5. For stylistic purposes, we use the terms child(ren) and youth synonymously and to refer to all those served by the child welfare system (all people from infancy to age seventeen).

The tools within this resource guide will help you coach CASA volunteers to not only advocate for youth, but empower youth to advocate for themselves. In addition to providing information on volunteer retention and training in PMC, the guide offers tips for transitioning current volunteers from TMC to PMC cases. Furthermore, it will help you teach CASAs to use Collaborative Family Engagement (CFE) tools so that youth establish an extended family support network before leaving the child welfare system. While noting important differences between TMC and PMC cases, this guide will show you that your program already possesses many of the building blocks essential to the creation and development of a successful PMC volunteer base.

This resource guide has been structured for ease of accessibility. If you are unfamiliar with PMC, you may prefer to begin with **Chapter 1: Getting Started**, or you can skip ahead to chapters more directly relevant to your program's needs. In each section, convenient, step-by-step instructions will help you put research into action, and icons point out important information throughout the text. In the appendices, you can quickly look up unfamiliar words in the glossary, photocopy handouts and worksheets for advocates, and find resources for additional information and support.

Educating your staff on the specific challenges and strategies for PMC cases will facilitate your volunteers' ability to help children advocate for themselves and find safe, permanent homes, no matter how long it takes. Thank you for helping children in foster care to not just survive, but to thrive.

# **KEY**



Unless otherwise noted, these resources may be found in the appendices.

- How To
  Step-by-step instructions to follow best practices.
- Try This

  Quick tips and other advice for putting our research into action.
- Say
  Suggestions for phrasing.
  - Advocates Ask
    Commonly asked questions by
    advocates and helpful responses.
  - CFE
    Content related to Collaborative
    Family Engagement.

# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

# **CHAPTER 1: GETTING STARTED**

Whether you seek to further develop your understanding of Permanent Managing Conservatorship (PMC), cultivate a strong base of volunteers for PMC, or provide volunteers with strategies to help children establish meaningful adult connections, you already possess many of the resources you need to get started. The challenge is how to best utilize them. This chapter provides background information on PMC, current best practices, and tips for gathering resources to fit the needs of your program.

### **OBJECTIVES**

After reading this chapter, you should be able to:

- Understand the similarities and differences between Temporary Managing Conservatorship (TMC) and Permanent Managing Conservatorship (PMC) cases
- Recognize the particular challenges faced by children in PMC status
- Identify and access resources for site-specific information gathering and best practices



I can tell you that CASA is the most impactful social service helping my abused and neglected children because CASA gives my children hope."

Judge Richard Garcia
 Associate Judge of the Bexar County Children's Court

## How to Get Started

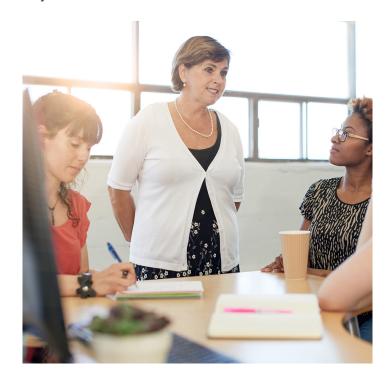
The following steps have been identified through Texas CASA's PMC Pilot Project as best practices. They are recommendations. Ultimately, you should structure your approach to best fit the needs of your program. Additional information about each step can be found in the pages that follow.

- **Step 1:** Assign one or more staff members to serve as PMC team lead or PMC Subject Matter Experts (SMEs).
- **Step 2:** Understand the elements of advocating for PMC cases.
- **Step 3:** Gather information about PMC cases in your region.
- **Step 4:** Interview members of CASA staff who have worked on PMC cases.
- **Step 5:** Schedule a meeting between your program's PMC team lead or SMEs and Child Protective Services (CPS).
- **Step 6:** Begin incorporating PMC material into volunteer recruitment, pre-service training, volunteer retention, and continuing education materials.

# Step 1: Assign one or more staff members to serve as PMC team lead or PMC Subject Matter Experts (SMEs).

If it suits the needs of your CASA program, designate a specific PMC team lead to oversee training and support for advocates volunteering on PMC cases. Another helpful approach might be to develop one or more members of your team as PMC subject matter experts (SMEs). The sooner you establish someone in the PMC leadership role, the sooner your program can develop effective strategies for handling PMC cases.

For more information on SME training, please refer to **Chapter 3: Training & Continuing Support**.



## Step 2: Understand the elements of advocating for PMC cases.

What exactly is Permanent Managing Conservatorship, and how does it come into effect? When Child Protective Services (CPS) determines that it is not safe for a child to live with her parents or legal guardian, CPS petitions a court to remove the child and requests Temporary Managing Conservatorship (TMC). If TMC is granted, CPS takes legal custody of the child and places her in a temporary living arrangement with a certified caregiver or an approved family member. TMC can last up to one year, unless a court extends it for another six months. If, by the end of TMC, the child has not achieved permanency, the child enters into the state's Permanent Managing Conservatorship (PMC).

#### How does PMC differ from TMC?

The change from TMC to PMC is significant in children's lives, as their living conditions continue to be in flux for an indefinite

# Permanent Managing Conservatorship (PMC) is a

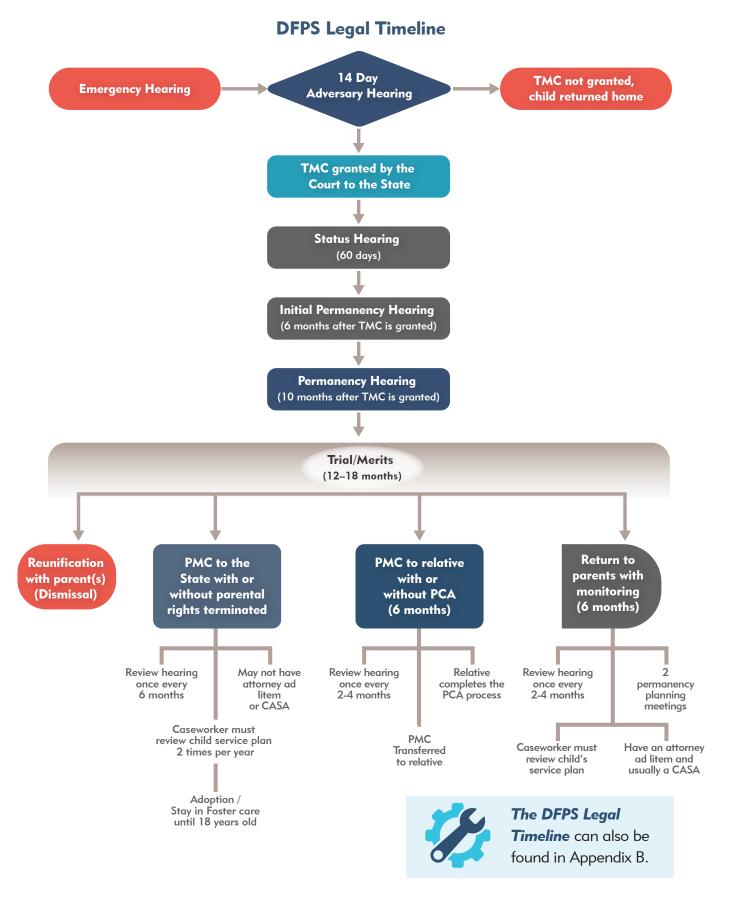
legal term used in Texas child protection cases. It means that a judge appoints a person to be legally responsible for a child without adopting the child. The court can give PMC to someone other than a parent, including CPS, a relative or a close family friend. As is with TMC cases, the court decides the rights and responsibilities of the caregiver, depending on the specific situation.

period of time. When PMC is assigned to CPS (also described as "PMC to the state"), one of two outcomes arises: PMC to the state with termination of parental rights, or PMC to the state without termination of parental rights. All children in the managing conservatorship of the state may live in the foster care system or with a responsible family member or other caring adult, but only children whose parents' rights have been terminated may be eligible for adoption. Children in PMC whose parents or guardians retain parental rights are at risk of languishing in foster care until they turn 18 years old. However, there may be instances when retaining parental rights is in the child's best interest.

Other significant differences between PMC and TMC exist when it comes to the frequency of court deadlines and CPS involvement.

#### Court & Internal DFPS Deadlines - TMC vs. PMC

| Court & Internal DFPS Required Actions | TMC             | PMC             |
|--|-----------------|-----------------|
| Permanency Review Hearings             | Every 4 months  | Every 6 months  |
| Permanency Planning Meetings           | 2               | None required   |
| Status Hearings                        | 1               | None required   |
| Caseworker Reviews of Service Plans    | 4 in first year | 2 in first year |



When a case enters PMC, the children's support system might further deteriorate. It is up to the judge's discretion whether or not to remove both the CASA and attorney ad litem. Visits from primary caseworkers often become less frequent and less meaningful, mostly focusing on cursory casework. A 2010 study by Texas Appleseed explains, "Though the State's responsibility for the child's life and well-being does not change—and arguably increases—the attention paid to the child's case diminishes drastically."

# Advocates Ask

What's the difference between permanency and Permanent Managing Conservatorship?

Though PMC begins with Permanent, this legal term has little to do with permanency so long as a child remains in the custody of the state. In contrast, permanency is when a child finds a safe, forever home with a relative, a close family friend or other responsible adult who genuinely cares for her best interests. Until a child achieves permanency

nency, she remains in the foster care system and falls subject to its risks and inadequacies.

Permanency is the most important well-being issue for foster children because it removes them from foster care and places them into stable environments where they can better develop into successful adults. As former DFPS Commissioner John Specia testified, "I want good foster care, but the answer is permanency."<sup>2</sup>

No. It is the goal of all advocates, those on both PMC and TMC cases, to support children who have not yet achieved permanency. Permanency is achieved when the child is reunified with a parent, when guardianship is given to a relative or non-relative, or when the child is adopted. As the most important well-be-

Do my goals as an advocate change if the children enter PMC?

ing issue for foster children, permanency removes youth from foster care and places them into stable environments where they can better develop into successful adults. When you advocate for children in PMC, the opportunity for permanency extends beyond the typical 12 months of a TMC case, and you focus on creating and maintaining an extended network of support for children.

<sup>&</sup>lt;sup>1</sup>Improving the Lives of Children in Long-Term Foster Care: The Role of Texas' Courts & Legal System, Executive Summary (Texas Appleseed, 2010), https://www.texasappleseed.org/sites/default/files/34-FosterCareExecutiveSumWeb.pdf.

<sup>&</sup>lt;sup>2</sup> M.D. et al v. Abbott, 2015 Texas. <a href="http://www.childrensrights.org/wp-content/uploads/2015/12/2015-12-17-Memo-opinion-and-verdict-of-the-court-2.pdf">http://www.childrensrights.org/wp-content/uploads/2015/12/2015-12-17-Memo-opinion-and-verdict-of-the-court-2.pdf</a>

### Why is urgency so important?

According to the 2010 Texas Appleseed study mentioned above, "there is often a sense that 'the clock stops ticking' when the child enters Permanent Managing Conservatorship" and the state often "just maintains them in foster care until they age out." The realities of aging out of the system can be devastating for youth. Every day that a child stays in "permanent" managing conservatorship is a day that she is less likely to reconnect with or find a permanent family connection. The longer a child goes without healthy family connections the less likely she is to experience educational success, the more likely she is to become homeless and the more likely she is to become a part of the criminal justice system. Though aging out of foster care might seem like a viable path for some children in foster care, it is a perilous one.

The clock is ticking. The time to help children in foster care is now, and the children in most need of your help are the ones most easily forgotten.

# Statistics to Share with Your Volunteers



- 25% of children in foster care will age out into homelessness at age 18.
- 40% of kids will not complete high school.
- 50% of girls in foster care will become pregnant by age 19.
- 74% of prison inmates were once in the foster care system.
- 80% of inmates on death row were once in foster care

# Permanency Essentials to Share with Your Volunteers

- All youth need supportive, lifelong connections with family and other adults.
- It is the job of child welfare advocates and our responsibility as CASAs to ensure that children maintain and build these connections.
- A permanency-driven focus is urgent and essential for the well-being of youth in the child welfare system.



# THE SOCIAL COSTS OF **FOSTER CARE**

By age 23, youth who aged out of foster care in the United States have fared far worse than youth raised in permanent homes.











































**JOBS** 





less likely to







**UNEMPLOYED** 

have earned

a high school degree or GED

> earned a 2- or 4-year

college **DEGREE** 

Sarah Virginia White for Parentage; Source: Chapin Hall 2010 http://www.chapinhall.org/sites/default/ files/Midwest Study Age 23 24.pdf

# What is Collaborative Family Engagement (CFE), and how does it support children in PMC?

One of the most essential things that volunteers can advocate for is the creation of a lifetime network: naturally occurring relationships with responsible family members, close family friends and other adults that will support youth after CPS and CASA are no longer involved. This work is being implemented in Texas through an approach called Collaborative Family Engagement (CFE).

CFE establishes a true team between CASA and CPS, who work together to complete the steps of Family Finding. CFE work should be done on a regular basis with youth in PMC to try to reconnect or strengthen their connections and find permanency with those the children know and love or those who have a connection to the children's biological or adoptive family. Open communication and collaboration are encouraged amongst the CFE team, which includes the CASA volunteer, who models the goal of establishing a community of support

Collaborative Family
Engagement (CFE) is
Texas's way of doing Family
Finding, which is federally
legislated under the 2008 Fostering

Connections to Success and Increasing Adoptions Act, the 2011 Children and Family Services Improvement and Innovations Act, and 2014's Preventing Sex Trafficking and Strengthening Families Act. This seven-step model, developed by internationally known permanency expert Kevin Campbell, is built on four core beliefs:

- 1. Everyone has a family that can be found if we try.
- 2. Loneliness can be devastating.
- 3. Being connected is important for belonging and well-being.
- 4. Connection to another person leads to better outcomes.

around the children and their families. Using tools and techniques focused on connection, engagement and an understanding of trauma, family members and other committed adults have the opportunity to become involved in the case much earlier, and participate in the planning and decision making for the children while they are in care.

Though CASA programs must attend specific training in order to officially practice CFE, all programs are encouraged to utilize some of CFE's connection and engagement tools. These will be discussed in Chapters 3 and 4.

# Step 3: Gather information about PMC cases in your region.

Collecting and analyzing data regarding the children in your coverage area is an effective way to identify themes and trends, anticipate necessary changes, and ensure that recruitment efforts will align with the needs of children in PMC. When possible, sort the data into two categories: children in TMC and children in PMC. Proximity to permanency can be difficult to delineate, but the needs are often different and the role of the volunteer varies depending on the status of the case.

### Sample PMC CASE REFERRAL FORM

| CASE INFORMATION  |   |  |  |  |
|---|---|--|--|--|
| Case Name:  | Case Nur                                | mber ·   | # of Children:                                 |  |
| Case worker: Phone:   |   |  | Email:   |  |
| Attorney ad litem: Phone:   |   |  | Email:   |  |
| -   | 10 000000000000000000000000000000000000 |  |  |  |
| PARENT INFORMATION  | '                                       |  | ,  |  |
|   |   | Father:  |  |  |
| Mother:   |   | . 13 - 1200 CM (2 of 2 o |  |  |
| Parental Rights Terminated:  Contact Info:  |   | Parental Rights Terminated:  Contact Info:             |  |  |
| Notes:  |   | Notes:   |  |  |
| Notes.  |   | Notes.   |  |  |
| Children Information  |   |  |  |  |
| Children Information  |   |  |  |  |
| Name :  | DOB:                                    | □ M □ F  | Placement:                                     |  |
| Name:   | DOB:                                    | M F  | Placement:                                     |  |
| Name:   | DOB:                                    | <u> M</u> F  | 第1 日 : (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) |  |
| Name:   | ame: DOB: M F Placement:                |  |  |  |
| Case Notes  |   |  |  |  |
|   |   |  |  |  |
| Family Connections  |   |  |  |  |
| Name :  | Relationship                            | :  | Notes:   |  |
| Name:   | Relationship                            |  | Notes:   |  |
| Name :  | Relationship:                           |  | Notes:   |  |
| Name:   | Relationship:                           |  | Notes:   |  |
| YOUTH INFORMATION (14 YEAR  | S OLD AND LI                            | P) Check comple  | ted areas                                      |  |
| ☐ Child plan/transitional plan has ☐ PAL ☐ Circle of Support ☐ Youth provided ID, Birth Certific ☐ Other: | been created a                          |  | - Tea areas                                    |  |
|   |   |  | The Sample PMC Case                            |  |



# Step 4: Interview members of CASA staff who have worked on PMC cases.

Staff members who have worked on PMC cases are excellent resources for information about program needs.

If you do not already have collective data on your program's volunteers, create a common form for all advocate supervisors to record this information. It will help you to better understand your volunteer pool and to identify trends and diversity gaps. Relevant information may include:

- Age
- Gender
- Race, ethnicity
- Religion and other cultural affiliations
- Employment (previous employment if retired)
- Length of time with CASA
- Number of cases worked as a CASA
  - TMC:
  - PMC:

# Step 5: Schedule a meeting between your program's PMC team lead or SMEs and Child Protective Services (CPS).

When seeking feedback on how CASA can most effectively take on more PMC cases, elicit input from other parties involved: CPS, attorneys and judges. An efficient way to initiate this conversation with CPS is to ask if the PMC team lead can attend a CPS unit meeting to discuss the role of CASA.

This meeting is also a good time to discuss the CFE framework. CASAs and caseworkers should collaborate to ensure

If you are not already doing so, you should begin gathering and writing up PMC referrals. Case Referral Forms can be a useful resource for information about children in PMC in your region. As you look at these forms, note whether the children share a foster placement or if they have been separated. Additionally, you should look for any family connections that could be utilized in Family Finding.

Form a focus group of CASA advocate supervisors and current volunteers on PMC cases. Share previous findings about PMC statistics in your area, and then discuss issues pertinent to your program's work on PMC cases.

Host an open house and invite CASA staff, CPS, attorneys, judges and anyone else involved in child welfare cases to discuss the role of CASA in supporting children in PMC.



every child in care develops and maintains a sense of belonging, connections and lifelong relationships, as well as a chance at finding and sustaining meaningful connections with family members and loved ones.

Step 6: Begin incorporating PMC material into volunteer recruitment, pre-service training, volunteer retention and continuing education materials.



Suggested Focus Group
Questions: The Volunteer Experience in
PMC provides useful sample questions
that will help you learn more about how to
support volunteers serving on PMC cases. It
can be found in Appendix B.

The more familiar advocates are with PMC and its terminology, the more likely they will be to consider working on a PMC case and remain on their case until children attain permanency. You don't need to wait until your training materials have been formally revised. Specific examples of PMC material integration will be discussed in **Chapter 2: Volunteer Recruitment & Retention**, and **Chapter 3: Training & Continuing Support**.

The time to start emphasizing the need to support children in PMC is now, so let's get started!

### **CONCLUSION/NEXT STEPS**

Now that you've identified the first steps toward strengthening your program's support system for children in PMC, it's time to recruit advocates. **Chapter 2** will show you how.



All PMC children shall be entitled to an attorney ad litem and a CASA volunteer, as well as any other representative appointed to TMC children that the Special Master determines is necessary for PMC children's safety and well-being."

- Judge Janis Jack in her December 2015 ruling against the Texas foster care system

# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

# **CHAPTER 2: VOLUNTEER RECRUITMENT & RETENTION**

Recruiting effective volunteers is one of the most critical and challenging tasks CASA programs face. With the intent to see youth through to permanency, CASA volunteers endeavor to build trusting relationships with children in foster care, many of whom may have experienced significant relationship struggles. This is why it is so important to recruit and retain volunteers who truly want to be connected with these youth, and who see the importance of making more connections for them. This chapter provides strategies for effective marketing, recruitment and screening for volunteers, as well as suggestions for volunteer retention, so that you can help volunteers advocate for positive permanency for their youth.

### **OBJECTIVES**

After reading this chapter, you should be able to:

- Recognize the characteristics of effective volunteers for Permanent Managing Conservatorship (PMC) cases
- Identify recruitment and marketing strategies pertinent to your program's needs
- Speak clearly and cogently about PMC with potential volunteers
- Implement retention strategies to ensure that volunteers are not only present, but effective



I can tell you that one of the most inspirational moments I have had with recruitment has also been one of the most challenging—which is telling the 'PMC story.' This is because people who are not familiar with the child protection system think that once a child enters, they exit just as quickly. Telling the story of a child 'lost' in the foster care system can be motivating for some people and discouraging for others. The most important thing to reinforce is that all children need a CASA, and there are specific things a person can do to advocate for them."

Anna Muñoz
 Permanency Supervisor, Texas CASA

### RECRUITMENT

The aim of recruitment is to attract potential volunteers who feel a sense of urgency to advocate for children and youth in foster care until permanency is achieved. Recruitment content—that is, the content expressed in marketing materials, at recruitment events and at information sessions for potential volunteers—needs not be specific to Temporary Managing Conservatorship (TMC) or PMC, but recruiters should seek out volunteers whose interests make them ideal for serving on PMC cases.

# The Ideal Volunteer Profile

CASA volunteers share many important qualities, but some of their individual preferences may make them most effective on PMC cases.

| TMC  | вотн   | PMC  |
|--|--|--|
| interested in courtroom advocacy                     | stabilizing and nurturing force<br>to children | interested in relation-<br>ship-building   |
| want to work with a<br>child from the begin-<br>ning | assertive and open-minded                      | <ul> <li>interested in having a<br/>holistic role with advoca-<br/>cy in multiple areas of a<br/>child's life</li> </ul> |
| want a concrete time commitment                      | strong communication skills                    |  |
|  | express initiative                             |  |
|  | display sound judgment                         |  |
|  | have good relationship-building<br>skills      |  |
|  | have a trauma-informed focus                   |  |
|  | interested in research and investigation       |  |



The PMC-specific strategies detailed in this chapter build on best practices applicable to all advocates. For more comprehensive information on recruitment and retention, please refer to **The Art of Coaching for Volunteer Retention** or **The Art of Recruitment: Engaging Volunteers Who Own Your Mission.** 

# **Recruiting for Diversity**

A child can be best served by a CASA volunteer who is culturally competent and has personal experience in the child's own culture. Children in the foster care system come from a diverse array of cultures and identities, therefore it is important that each CASA program reflect that diversity in its volunteer population.

#### National CASA defines diversity broadly to include:

- race
- gender
- religion
- national origin
- ethnicity
- sexual orientation
- socioeconomic status
- the presence of a sensory, mental, or physical disability

The organization also values diversity of viewpoints, life experiences, talents and ideas.

### CASA Programs in Texas – Volunteer Demographics 2015

In Texas, 8,476 active volunteers served with a CASA program in 2015.

| GENDER     | AGE         | ETHNICITY           |
|------------|-------------|---------------------|
| 83% female | 29% age 60+ | 74% Caucasian       |
| 17% male   | 23% 50-59   | 14% Latino/a        |
|            | 19% 40-49   | 8% African American |
|            | 15% 30-39   | 8% Asian            |
|            | 13% 21-29   |                     |

Recruitment of volunteers who reflect the diversity of the foster care population requires a deliberate approach and targeted strategies. Simply recruiting volunteers from diverse communities does not necessarily yield a diverse group of volunteers. Our outreach must be tailored to each audience.



### **Tips for Recruiting for Diversity**

 Track data on volunteers and kids in PMC, and customize recruitment efforts accordingly so that ultimately your core volunteer group reflects the population your program serves.



- Review the demographic data of the PMC youth in your area of service, and compare it to that of the CASA volunteers in your region.
- Track data on volunteers and PMC youth, and customize recruitment efforts accordingly so that ultimately your core volunteer group reflects the population they are serving.
- Create a marketing plan that utilizes social media to conduct outreach to a diverse group of potential volunteers. Ensure that pictures/stories, etc. of volunteers reflect racial, ethnic and gender diversity.
- Partner with organizations that serve and/or focus their services on diverse people to create volunteer recruitment opportunities.
- In your next focus group meeting, review the table below and discuss specific ways to address these issues in recruitment materials and events.<sup>1</sup>

#### Reasons Ethnic & Racial Minorities Don't Volunteer

| Problem  | Solution |
|--|----------|
| Lack of knowledge about the issues   |          |
| Concern about being singled out as the "token" minority volunteer              |          |
| Lack of time   |          |
| A cultural emphasis on serving one's family rather than the community at large |          |
| Economic reasons   |          |
| Never being asked to volunteer   |          |



Suggested Focus Group Questions: Volunteer Recruitment and Retention for PMC Cases in Appendix B provides questions about your program's current recruitment efforts for PMC cases.

<sup>&</sup>lt;sup>1</sup>National CASA Association. Recruiting Volunteers of Color. <a href="http://www.casaforchildren.org/site/c.mtJSJ7MPlsE/b.5466357/k.34E3/Recruiting Volunteers of Color.htm">http://www.casaforchildren.org/site/c.mtJSJ7MPlsE/b.5466357/k.34E3/Recruiting Volunteers of Color.htm</a>

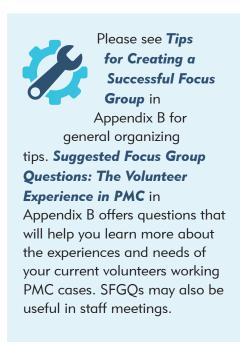
### **Focus Groups**

If you haven't already formed a focus group of advocates and advocate supervisors with PMC experience, now is an excellent time. This group could discuss what is different for them on PMC cases, what drew them to their particular cases, and the advice they would share with other volunteers and staff. You could also conduct one focus group with TMC volunteers and a second one with PMC volunteers. Ask both groups the same questions, and then compare answers to learn more about the different skills, strategies and challenges of each volunteer group.

# Strategies for Effective Recruitment of Volunteers for PMC Cases

Though we do not recruit specifically "for PMC" or "for TMC," certain recruitment strategies can help attract qualified volunteers to PMC cases.

- Form a focus group to discuss your program's current recruitment efforts for PMC cases.
- Get supervisors with PMC experience involved in face-to-face recruitment. Whenever possible, bring these supervisors into interviews and, if a candidate seems interested in PMC, ask the supervisor to quickly follow up with a phone call or personal email. This is an effective way to share honest, meaningful information about PMC with the volunteer.
- Discuss PMC cases during the recruitment stage so that potential volunteers become familiar with them from the very beginning of their CASA experience. Staff will be able to build on the candidates' knowledge of PMC during training, and upon graduation, volunteers will be able to make a more informed decision about the type of case they want.
- Watch your language! The specific words, phrases and descriptors we use when speaking with volunteers can lay a critical foundation for volunteer expectations.
  - Introduce the concept of permanency from the very beginning. When prospective volunteers first hear about TMC, the word temporary stands out, which sets the expectation for a short-term commitment. Discuss the urgent need for volunteers to help children attain permanency so that volunteers focus on long-term, needs-based goals.
  - Emphasize the hope that potential volunteers will commit to being an advocate for the child, and that no one can know if that child will be in the temporary or permanent care of the state.
  - Get comfortable with using everyday language when talking about PMC. Use the term "long-term foster care" as opposed to the acronym PMC. Incorporate this language into marketing materials.



## Telling the Story about All Kids in Foster Care

TMC: "Children are removed from their home due to abuse and neglect. CASA is appointed by the court to provide recommendations while a system (CPS) acts as the temporary guardian for the children. This helps the parents to focus on services needed to address the reasons the children were removed from their home. CASAs not only provide recommendations but also voice concerns regarding what is in the best interest of the children they are appointed to."

**PMC:** "When children cannot return home, the state then becomes their legal parent. These children become at risk for staying in foster care long-term. CASA can help these children reconnect with family, find legal or emotional permanency, and, if they are old enough, provide guidance on being an adult."

**Advocacy:** "Regardless of whether children's time in foster care is short-term or long-term, CASA provides a vital role in advocating for the best interests of those children. Our volunteers become a part of a team that provides common sense recommendations and keeps a spotlight on the concerns and children's needs."

Be careful with the language you use to distinguish between children in PMC and those in TMC.
 PMC and TMC are legal terms and should not be used as adjectives to describe children. Children are children. They should never be defined by their status. The same is true for their advocates.

| Don't Say        | Say   |
|------------------|---|
| "PMC kids"       | "children in long-term<br>foster care"<br>"children in PMC legal<br>status" |
| "TMC volunteers" | "volunteers on TMC cases"   |

• Speak in open and neutral language about the families of children in PMC. It should never be assumed that advocates will not have to engage with the parents, extended family members, or community members that are involved and care about the child, just because a final order has been made. Speaking to family and other people connected to the child will help volunteers get a holistic view of the needs and interests of the child.



It's highly likely that your volunteers' stories have already been impacting their family members, friends and colleagues. Host a gathering for advocates working PMC cases to which they each bring one guest. In addition to providing a short, informative presentation on the organization, offer drinks, snacks, games and other activities so that people can get to know each other and the agency. Make sure each quest leaves with a schedule of upcoming pre-training sessions and instructions on how to sign up. Follow up with a phone call to each guest to see if they have any questions.

- Use statistics and impactful stories to illustrate the need for volunteers with an interest in a long-term, comprehensive advocacy role.
- Hold formalized recruitment events at a variety of times in order to accommodate a variety of schedules. For example, people who work full-time jobs may only be able to meet in the evening, whereas stay-at-home parents may only be available when their children are at school.
- Begin screening volunteers for PMC cases during the interview. Some CASA programs have found that people who are high energy, self-driven, and not easily discouraged are well suited for PMC cases. Relevant questions and discussion points include:
  - Describe your work style.
  - Tell me about your ability to relate to children and older youth.
  - Are you called to a specific population?
  - How do you feel about trying to reconnect or strengthen a child's connections and find permanency with those the child knows and loves?
  - How do you feel about helping children make connections with their original biological or adoptive family?
  - Provide a sample scenario: A child was five years old when his parents lost their parental rights, and he has spent the last 10 years in the foster care system.
    - Now that the child is 15, would the safety concerns be the same as when he was five?
    - Could the parents' situation have improved over the last decade?
    - Would you have maintained connection with extended family during these last 10 years?
    - How might a connection with extended family benefit the 15-year-old now?

During the interview, make sure to pay attention to the questions the candidates ask of you. Sometimes the questions potential volunteers ask can reveal more than their responses.



# How to Incorporate the PMC Story into Marketing Materials

- Gather your staff to discuss current recruitment messages and compose a clear and convincing message pertaining to PMC. Remember to watch your language! (See Watch Your Language Tip Sheet in Appendix B).
- Select appropriate photos that portray a diverse range of kids and volunteers when it comes to age, gender, race and ethnicity.
- 3. Try to keep your marketing and recruitment strategies consistent, and make only gradual changes so that the community will not be confused about the CASA mission.

# Advocates Ask

Volunteering takes a lot of time, and I have a full-time job. Aren't most advocates retired?

You're right—volunteering is a big commitment, but most of our volunteers are employed or already deeply involved in their communities.

What about people with families? Maybe I should wait until my kids are in college . . .

Actually, many of our volunteers are active parents. They organize their schedules so they can fulfill their responsibilities to their children at home and to the children in their cases.

I'm a retired, 67-year-old, white grandmother. Do you still want me for your team?

YES! BRING
YOUR FRIENDS!

Wait, kids can be in care for longer than a year?

Yes. If a judge terminated parental rights, and the State becomes their parent, then it is the State's (CPS) responsibility to find permanency for them, regardless of how long it takes.

If a child can be in foster care for multiple years, am I expected to stay with that child? I thought this was a one-year commitment.

CASA volunteers will be supported throughout this process. Our hope is that we will find a forever home for all children in foster care. Although it may take longer than 12 months, know that we will make decisions together as a team and help support you, whether you decide to remain on the case or not. Of course, we prefer that you would stay until the child finds permanency and the case is closed. If you feel certain that you can only commit for a year, then you might be best suited for a TMC case.



Additional resources related to recruitment include: *Minimum Expectations* of Service to a Case and CASA Pre- or Post-Interview Questions, found in Appendix B.

#### RETENTION

Though all volunteers share the goal of permanency, youth may spend years in PMC before they find a safe forever home. Therefore, volunteers on PMC cases may need to spend years advocating for their children, helping them establish healthy relationships for lifelong support, and preparing them for adulthood. Many retention strategies apply to volunteers for both TMC and PMC cases, and some addi-

# Two key aspects of retention should be monitored:

- Keeping volunteers on the case until permanency is achieved
- 2. Ensuring that volunteers continue to be effective throughout the PMC case

tional strategies specific to PMC may improve the likelihood of volunteers to stay with their children until they achieve permanency, no matter how long it takes.

# Keeping Volunteers on the Case Until Permanency Is Achieved

Retention goals and strategies should be the same regardless of the type of case on which the volunteers serve. When volunteers feel supported and appreciated, and see that they are making a real difference for a child, then they are more likely to want to stay with the children on their case and the CASA program. Still, for the purpose of this PMC resource guide, keeping volunteers on the case refers to helping volunteers transition with their children from TMC (short-term foster care) to PMC (long-term foster care).

The transition from TMC to PMC, legally, is fairly easy for volunteers to understand. The difficult part is deciding which types of advocacy need to change and which stay the same. When children transition into PMC of the state, they confront a new traumatic experience. In some cases, the children associate the volunteer with this new trauma because the volunteer was involved in the case.

Advocates who transition with their children from TMC to PMC must undergo a "change in mindset." This means volunteers will need to look at the case from a more trauma-informed lens and be prepared for changes in the children's behavior, such as an increase in acting out and a decrease in trust. It may help to remind these volunteers



# How to Help Volunteers Transition from TMC to PMC Cases:

- Advocate supervisors should begin discussing the transition with the volunteer as soon as CPS has determined that they are recommending parental rights be terminated. This could happen as early as six months into the TMC case. CASA volunteers need to know the next steps, including how to get connected with the child's new caseworker.
- 2. Advocate supervisors should help volunteers practice and prepare for the tough conversations they might have with the children on their case whose parents' rights have been terminated.
- Create and provide a brief training session for advocates whose cases have recently transitioned from TMC to PMC.
- 4. Immediately connect the transitioning advocate to an advocate experienced with PMC.
- Provide outstanding support.See the next section of this chapter.

that some children in transition lash out at their CASAs because the volunteers are often the only constant person in their lives.

# Ensuring Volunteers Continue to Be Effective Throughout the PMC Case

Volunteers must not only be present but also actively focused on comprehensive advocacy for their children's immediate and long-term needs. For volunteers assigned to older youth, this advocacy means helping teenagers gain the knowledge and life skills necessary to be successful adults. Permanency is an urgent need and not a guarantee, so even volunteers who are assigned to young children in long-term foster care must be prepared to appreciate small victories and endure large setbacks for an indeterminate and often lengthy amount of time.

Retention means keeping volunteers with the organization. Building and maintaining a strong relationship of trust and support between advocates and their supervisors is vital. When advocates feel supported and valued, they are more likely to be successful and take on a new case when their current one ends.

# Advocates Ask

The children in my case have been lashing out at me since they entered PMC. Sometimes, they don't even seem to trust me anymore. What's going on?

Transitioning from TMC to PMC is an additional traumatic experience for children in foster care. You have been the only constant in these children's lives, so they are expressing these behaviors to you. Changes in behavior are normal, but keep an eye on them to make sure they don't continue to worsen. Trust is often a challenge for children in foster care. The children might worry that you will leave them, too. Reassure them that you are committed to serving as their advocate.

Ask advocate supervisors to review current caseloads to consider CASAs who might be effective on PMC cases or could transition with their cases from TMC to PMC. Supervisors should ensure that they discuss long-term foster care with these volunteers so they become better familiar with PMC and its related responsibilities for advocates.



# **Tips for Maintaining Advocate Effectiveness**

- Hold a focus group with your volunteers who have been involved with CASA the longest, with the objective of learning about successful retention strategies.
- Elicit feedback from youth in PMC. The information obtained in interviews can be useful for learning about volunteer effectiveness and current needs of youth in PMC.
- Practice volunteer-matching. When volunteer interests and skills align with aspects of their case, volunteers will feel more valuable and thus more invested.
  - The information gathered from focus groups
    with youth in PMC can assist with volunteer
    matching. Use the discussion questions to identify common themes in topics such as needs,
    gaps, effective relationship-building strategies, ideal volunteer qualities, and highly valued
    activities and experiences.
- Cultivate a volunteer-centered culture in which advocate supervisors get to know their volunteers personally: their personalities, motivations, working styles, and preferred methods of dealing with stress and challenges.
- Create multiple, meaningful interactions between advocate supervisors and volunteers via advocate support conferences, informal one-on-one meetings, and team meetings with CASA supervisors and multiple volunteers.
- Cultivate a network of support for volunteers
   through the Peer Coordinator Model, and host
   special events that bring volunteers on PMC cases together with time to connect and form
   lasting bonds.
  - In the Peer Coordinator Model, new volunteers have a more experienced volunteer help with their case to make sure they feel confident and supported.
- Implement a graduated training program and different volunteer levels. For example, consider
  creating several levels based on volunteer experience, such as CASA I, II, III, and IV, with each
  level requiring more training and responsibilities. This approach functions in lieu of the Peer
  Coordinator Model. It may provide additional motivation and create an opportunity for some
  volunteers to stay longer and do more.
- Complete regular, recurring activities to support volunteer effectiveness on PMC cases.

For a best practice

please see Guidance

approach and

for Getting Feedback from PMC

Youth: Lessons learned from

**HCCASA** in Appendix B.

# Regular, Recurring Activities to Support Volunteer Effectiveness on PMC Cases

| Activity  | Frequency                              | Purpose   |
|---|--|---|
| Advocate supervisor connects with volunteer (email okay)  | Monthly                                | Opportunities for individual case planning and for supervisor to understand volunteer's motivation and satisfaction level; reminds volunteer that advocate supervisor is readily available for assistance |
| Advocate supervisor holds face-to-face meetings with each of their volunteers   | Quarterly or before each court hearing | More focused and<br>meaningful opportunities for<br>individual case planning and<br>for supervisor to understand<br>volunteer's motivation and<br>satisfaction level                                      |
| Advocate supervisor<br>holds Advocate Support<br>Conferences or team<br>meeting inviting all of their<br>volunteers   | Quarterly                              | Opportunity for team building, round table discussions and peer coaching; engage volunteers by including CASA updates (local and state level)   |
| Volunteers on PMC cases recommit themselves to the children in their assigned case. Possible activities include a swearing-in celebration or a volunteer appreciation lunch/dinner. | Annually                               | Helps to sharpen the volunteer's sense of responsibility to remain an active advocate   |
| Advocate supervisor conducts formal evaluation on the volunteer's effectiveness   | Annually and at end of case            | Ascertain whether volunteer is being effective and highlight accomplishments (e.g. continuous training hours completed)   |



Information collected in the *Advocate Support Conference Form*, found in Appendix B, is useful during volunteer meetings and evaluations.

#### **CONCLUSION/NEXT STEPS**

The most important factor in successful recruitment and retention is that you clearly communicate the volunteer's roles and responsibilities. Purposefully recruit volunteers who have the necessary skills, abilities, compassion and commitment required to maintain a long-term relationship with children in foster care.

In pre-service training and throughout the volunteers' work on the case, advocate supervisors must help volunteers understand that there is a need for CASAs on PMC cases. We must reverse the thought that PMC cases need less work, advocacy and attention. The clock doesn't stop ticking for kids in foster care, and the urgency and need is even greater in a PMC case.

Recruitment and retention are never-ending tasks, yet when effectively executed, they will make a tremendous difference in the success of volunteers and their assigned cases. Once the processes for recruitment and retention have been refined and are successful, the next essential element is training: high-quality, targeted and meaningful training that produces volunteers who not only feel competent but also have the skills to perform across multiple areas for the children who need them.





# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

#### **CHAPTER 3: TRAINING & CONTINUING SUPPORT**

Training is a critical component of what we do at CASA, and the effectiveness of our training programs has a direct impact on the lives of the youth our volunteers serve.

While the mission of our volunteers is the same for youth in both Temporary Managing Conservatorship (TMC) and Permanent Managing Conservatorship (PMC), youth in long-term foster care (PMC) require additional services and types of advocacy with which volunteers must be familiar. It is crucial that PMC-specific pre-service training is provided to all volunteers, not only because youth in TMC may enter PMC, but also because many best practices pertaining to PMC, particularly Collaborative Family Engagement (CFE), benefit youth in TMC as well. This chapter provides strategies for training volunteers and staff to advocate for youth in long-term foster care.

#### **OBJECTIVES**

After reading this chapter, you should be able to:

- Incorporate PMC-specific training topics into volunteer pre-service training
- Identify topics to discuss in PMCfocused training sessions as part of ongoing training
- Introduce staff and volunteers to the CFE framework and demonstrate Family Finding tools
- Prepare staff to become Subject Matter Experts (SMEs) in PMC



We are seeing children growing up in the foster care system with the state acting as their parent for years, and this is unacceptable. Children need a safe, permanent home to thrive, and by testing new strategies, we are improving our advocacy for a group of children that has suffered for too long."

Vicki SpriggsCEO, Texas CASA

<sup>&</sup>lt;sup>1</sup>"Texas CASA Calls on Community to Serve as a Voice for Vulnerable Children During National Foster Care Month." Business Wire, May 22, 2017.



For detailed tips on general training strategies, such as audience engagement and teaching diverse learners, please see **Mastering the Art of Training and Facilitation**, a five-volume guide produced by Texas CASA and made available on CASA College.

#### **VOLUNTEER TRAINING**

We highly recommend integrating PMC content—such as legal definitions, the differences between TMC and PMC, and the different issues and corresponding needs faced by youth in long-term foster care—into volunteer training. Select the approach that best suits the needs of your program.

## Integrate PMC & CFE Content into Pre-service Training



A smooth integration of PMC content into pre-service training is our preferred approach because it prepares all volunteers to advocate for youth in foster care no matter how long they will remain in state custody. Early introduction and practice of CFE empowers all volunteers to collaborate with CPS as best they can. This helps volunteers engage in family connection and engagement work from the moment they are appointed to the case, both TMC and PMC.

The following best practices may be easily incorporated into the evolving National CASA curriculum.

## Why Training in PMC Is Important for All Volunteers

- Many youth in TMC transition to PMC.
- Collaborative Family Engagement (CFE) practices benefit all children in state custody and should begin as soon as possible.



#### General Tips for Training on PMC

- Interweave PMC language into your existing pre-service training.
- Use current examples that illustrate advocating for youth in PMC.
- Introduce information about CFE to demonstrate its importance from the very beginning.

## Approaches to Training on PMC

- Integrate PMC content into preservice training, topic by topic.
   For example, this means that when you discuss how youth move through the child welfare system, you discuss examples of youth in TMC and in PMC cases.
- Add a PMC-specific training session to pre-service training.
- Include sessions on PMC issues in in-service or ongoing training.
- Offer separate training sessions for volunteers who are assigned to PMC cases or who stay with a case that transitions to PMC.

#### Introduce the CASA/GAL volunteer role in PMC cases

- Use child abuse data from your community.
- Highlight the number of children in PMC in your community using common language such as "long-term foster care."
- Provide a list of acronyms used in child welfare, and include PMC and CFE terms.
- Give an example of the best interest principle as it pertains to youth in PMC.
- Articulate the need for advocacy while emphasizing important boundaries between volunteers and the youth they serve.



## Say

"Though a judge may have ruled that the children are not able to return home to their parents, they have a right to a safe, permanent home as quickly as possible, no matter how long it takes."

"A volunteer is not meant to be a savior, but instead, an advocate who is there to help build lifelong connections for the child. Under no circumstances should you take the child into your home, provide shelter for the child, take them out with their own family, or take the child on an overnight outing."





An **Acronyms Sheet** can be found in Appendix B.

#### Explain the legal process in the child welfare system and PMC

- Distribute copies of the PMC timeline, and reference it as a visual aid.
- Describe the child's journey through the child welfare system, and explain how children in TMC can enter PMC:
  - PMC with Termination of Parental Rights
  - PMC without Termination of Parental Rights (one or both parents)
  - PMC to a Relative/Fictive Kin with or without Permanency Care Assistance (PCA)
  - Joint Managing Conservatorship (JMC) with Parent(s)
- Discuss the topic of permanency. (Refer to Chapter 1 for more information.)
  - Positive permanency: As defined by the state of Texas, positive permanency means to reunify children with their
    - parents, transfer custody to relatives or achieve legal adoption. CASA volunteers seek positive permanency for all youth.

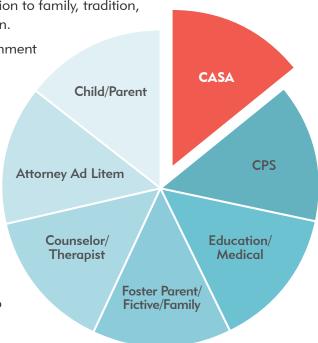
• Cultural permanency: A continuous connection to family, tradition, race, ethnicity, culture, language and religion.

- Relational permanency: An emotional attachment between the youth and caregivers and other family members – ranked as the most important type of permanency by youth in foster care in California.<sup>2</sup>
- Our goal for every child in PMC is to have at least one, but ideally all, of the types of permanency, knowing that each case is different and each child has different needs.
- Introduce the people and organizations involved in a case, define their individual roles, and describe these participants as members of a team that must work together to serve the best interests of the youth.

## Advocates Ask

Could I invite the children in my case over for Thanksgiving or to go trick-or-treating with my kids?

Your heart is in the right place, but imagine how a child in foster care might feel seeing you with your family and then returning to their placement alone. This could cause additional trauma and therefore should be avoided.



<sup>&</sup>lt;sup>2</sup> Robin M. Sanchez, "Youth Perspective on Permanency" (California Permanency for Youth Project, 2004).

#### Discuss issues in understanding youth in PMC

- Emphasize the feeling of powerlessness as experienced by youth in PMC by exploring the concepts of attachment and separation.
- Use Maslow's Hierarchy of Needs to discuss the needs of children in PMC.
  - How might being in PMC affect a child's hierarchy of needs?
- Stress the importance of cultural competence when considering adoption options for youth in PMC.
  - "What is the impact of stereotyping?"
  - "What do you think it means to be culturally competent?"
  - "What can we do to advocate for children to be adopted by a family of a different race, ethnicity, religion, culture or sexual orientation?"

#### It is important to remember that some Native Americans have a strong bias against adoption, and certain tribes do not approve of adoption.<sup>1</sup>

- Remind volunteers that youth are better off in a safe and stable home that meets the Minimum Sufficient Level of Care (MSLC) standard than in foster care.
- Discuss psychological and educational issues for youth in PMC, and emphasize the importance of educational records (the green binder).
  - "How might trauma specifically impact children in PMC?"
  - "How might multiple moves affect the educational development of children in PMC?"



#### **Seat Separation Anxiety**

- After a class break, assign volunteers new seating arrangements. Move volunteers completely around the room, far away from their original seats. Or, after the class starts, instruct a few participants to move seats.
- Identify their new "assigned" seats abruptly and without explanation. When these participants begin to gather their materials, tell them they may only bring two items.
- When they reach their new seats, tell them that this is their new seat and that they can never return to their former seat. If anyone tries to ask a question, either ignore them or say that there isn't any time for questions because you have a lot to cover today.
   Resume your training as normal.
- After everyone settles back into the session, abruptly move someone again. This time, there's no time for them to bring anything with them.
- Begin a discussion of attachment and separation by asking participants how they feel about being moved without any information about why that seat was chosen.
- Remind volunteers that children, especially those in PMC, do not get to choose their placements and often endure multiple moves.
- Define attachment, separation and resilience, and use these terms as you describe examples of PMC cases in your area.
- Ask volunteers to consider how young children and older youth might experience attachment differently.

<sup>&</sup>lt;sup>1</sup> Adoption Exchange Association, "Families for Native American children," Adopt US Kids, https://www.adoptuskids.org/adoption-and-foster-care/overview/who-can-adopt-foster/families-for-native-children.

#### Explain methods of practicing the CASA/GAL role on a PMC case

- Review a PMC court report with volunteers by using a recent report from your community or the outline to the right.<sup>2</sup>
- Explain the Needs Assessment and Action Plan form using an example of a case in your area. Use the Advocacy Checklist to fill in the plan.

#### Pull it all together

- Host a volunteer panel and Q&A session, and include at least one volunteer with experience in PMC.
- Remind volunteers to attend in-service and ongoing training sessions on issues especially relevant to PMC.

## Add a PMC-specific Training Session to Pre-service Training

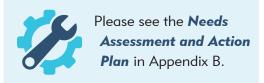
Some CASA programs have found success in creating focused PMC training sessions within their pre-service curriculum. In these training sessions, all volunteers spend approximately two hours closely studying the unique characteristics and challenges of a PMC case.<sup>34</sup>



## Suggested PMC Court Report Outline

- Child/Situation
- Placement History
- Permanency Plan
- Summary of Contacts by CASA
- Case Summary
  - Placement
  - Education
  - Medical / Psychological
  - Criminal Issues
- Areas of Concern
- Recommendations

Use volunteer panels with a variety of differences (age, race, tenure with CASA, work experiences, retired/full-time work, TMC/PMC case) so that potential volunteers recognize the variety of cases and that anyone can be a CASA volunteer.



<sup>&</sup>lt;sup>2</sup>PMC Court Report Outline by CASA of Central Texas, Inc.

<sup>&</sup>lt;sup>3</sup>PMC Training Outline by Child Advocates San Antonio.

<sup>&</sup>lt;sup>4</sup>PMC Training Topics by CASA of Central Texas, Inc.

#### Include Sessions on PMC Issues in In-service & Ongoing Training

In-service or ongoing training should include topics relevant for PMC cases and can take into account volunteer requests for information.

#### Ways to Elicit Information from Your Volunteers as a Means of Informing Your Training Practices

- Utilize focus groups/open forums with volunteers and youth (separately) to determine what topics are needed.
- Use training evaluations to determine which trainings have proven useful for volunteers.
- Tap into knowledgeable volunteers as a resource to provide in-service training, accessing the special skills of your top volunteers for the benefit of all.

## Ways to Connect Active Volunteers to Helpful PMC Content

- Ask supervisors to notify volunteers on PMC cases when relevant in-service trainings occur.
- Use various formats for ongoing training, including in-person sessions, online trainings, videos and community resources.



#### **PMC Training Outline**

- CPS timeline
- Defining PMC
- Case transition from TMC to PMC
- Court timeline
- Permanency Care Assistance (PCA)/Adoption
- People involved in youth's life
- Role of volunteer on PMC case
- Advocating for youth in PMC
- Communicating with young adults
- Education topics
- Medical diagnoses
- Circle of Support
- Documents for older youth
- Preparation for adult living
- Transition planning

#### **PMC Training Topics**

- Permanency Care Assistance (PCA)/Adoption
- Extended foster care
- College visits
- Preparation for Adult Living (PAL) classes
- Circle of Support
- Transitional Living Programs
- Residential Treatment Centers

#### Topics for In-service & Ongoing Training in PMC

- Skills for working with foster youth
  - Life skills: goal setting, planning of the future (college, military enlistment, work), self-esteem, self-care, self-image, mental health care, self-advocacy, PAL benefits
  - Adoption resources/TARE (Texas Adoption Resource Exchange)
  - Attachment in children during PMC
  - Resilience under stress
  - Sibling bonding
  - Fight, flight or freeze a trauma-based approach
  - Defining permanency/permanency values
  - Collaborative Family Engagement (CFE)
  - Placement changes for children in foster care
  - Promoting placement stability
  - Personal safety: trafficking, runaways
  - Psychotropic medications
- Skills for volunteers

Training evaluations are an invaluable tool to ensure that trainings are useful. Evaluations allow volunteers to provide feedback about the trainer, the material, and how they will use the information in their advocacy work.



Please see
Appendix B for a
blank template of
the **CASA Training Evaluation**.



- CFE Tools:
  - o Finding, engaging and connecting with the youth's family
  - Using creative tools to elicit the voice and story of the youth
  - o Forming a network of support around the youth
- Communication and relationship building
- Self-care: combatting loneliness, compassion fatigue, secondary trauma
- How to work with professionals: CPS, teachers and other education providers, attorneys, mental health providers, physicians
- How to build social connections: biological parents, foster parents, community relations
- Legal outcomes
- Cross-cultural awareness and managing inherent biases
- Trauma-informed care
- Finding and using options less restrictive than guardianship
- Understanding Residential Treatment Centers (RTCs)

It's important to keep in mind that training needs will vary depending on whether the youth are close to permanency, whether parental rights have been terminated, or whether the youth are in PMC of the state without termination of parental rights. Maintaining close communication with your volunteers through focus groups, interviews, etc. will help you identify the individual training needs of your volunteers based on the needs of the youth to whom they are assigned.

#### STAFF TRAINING

It is important to ensure that CASA staff are well-versed in the needs of youth in PMC and that they are trained to give advice and provide resources to volunteers. Depending on the needs of your particular program, you may choose to have your full staff or a designated few become Subject Matter Experts (SMEs) in PMC.

## Responsibilities of a SME in PMC include:

- Attending all additional PMC training offered by your program and Texas CASA
- Staying up-to-date on focus group data and the needs of your population in PMC
- Communicating with other local programs about their PMC programs to stay abreast of new trends and trainings
- Training other staff and consulting on PMC cases as needed
- Helping to train CPS staff, attorneys ad litem and other stakeholders on the purpose of having a CASA volunteer assigned to PMC cases

## Topics SMEs should be trained on and able to offer coaching assistance include:

- Trust-Based Relational Intervention® (TBRI®)
- Collaborative Family Engagement (CFE)
- Post-judgment permanency options
- Life skills development
- Transitioning out of care
- How to define permanency
- Why permanency and urgency are important
- A timeline of court hearings for a PMC case
- A "typical" trajectory for youth in PMC
- The role of the CASA in a PMC case
- PMC Needs Assessment and Action Plan
- How youth in PMC are at risk of getting lost in the foster care system
- How CASA can advocate for adoption, whenever possible to a person known to the youth, or transferring PMC to a relative

Larger programs
that have a PMC
unit should have
all staff train to become
SMEs on PMC topics.
When feasible, this is a great
option because youth transfer
from TMC to PMC much
more often than people might
realize – and advocates must
be ready to meet their needs
at all times.



# TRAINING VOLUNTEERS & STAFF IN COLLABORATIVE FAMILY ENGAGEMENT (CFE): IMPORTANCE, CONCEPTS & TOOLS

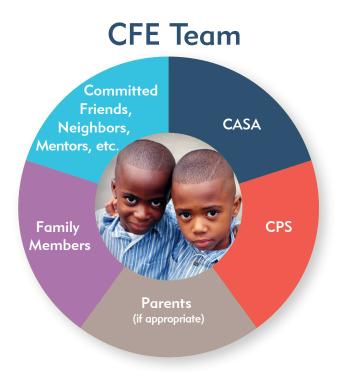


One of the most important things that volunteers can advocate for is the creation of a lifetime network of naturally occurring relationships with responsible family members, close family friends and other adults that will support youth after CPS and CASA are no longer involved. This work is being implemented in Texas through an approach called Collaborative Family Engagement (CFE).

#### The Importance of CFE

CFE efforts are important for all youth in foster care because they deserve strong, healthy lifelong connections with responsible adults and family members. This is why we recommend pre-service training that follows or includes CFE information, as appropriate for your program, for all new volunteers.

In order to formally practice CFE, CASA programs must undergo specific training and participate with their CPS counterparts. However, any CASA program may utilize the engagement and connection tools of CFE that are recommended in this resource guide, which greatly facilitate the volunteer's ability to advocate for youth.





For general information on CFE, please refer to **Chapter 1: Getting Started**. For specific examples of how CFE tools can facilitate advocacy, please refer to **Chapter 4: Advocacy**.

# Parents (if appropriate) Committed Friends, Neighbors, Mentors, etc.

#### The Concepts of CFE

CFE establishes a true team between CASA and CPS, who work together to complete the steps of Family Finding. CFE work should be done on a regular basis with youth in PMC. The primary objective is to strengthen youths' connections and find permanency with responsible adults who have a relationship with them or their biological or adoptive family.

Open communication and collaboration are encouraged amongst the CFE team, which includes the CASA volunteer, and models the goal of establishing a community of support around the youth and their families. Using tools and techniques focused on connection, engagement and an understanding of trauma, family members and other committed adults have the opportunity to become involved in the case much earlier, and participate in the planning and decision making for the youth while they are in care.

The child should have a lifetime network of support, regardless of whether they find permanency with their biological or original adoptive family, other caring adult, a connection from CFE or age out of the system into adulthood.

#### Training in the Tools of CFE

#### **CFE Training in CASA Programs that Are Official CFE Sites**

If your program is formally involved as a CFE site, it would be beneficial to share information with advocates about your involvement to-date. Discuss the following topics during pre-service and/or in-service training:

- The CFE Team
- What to do if they are assigned a CFE case
- Using CFE connection and engagement tools on all cases, even if not formally assigned as a CFE case
- Use of social media, and any related policies your program may have
- Availability of toolkits
- CFE family meetings
- Upcoming opportunities for training

## Training in CFE Tools for CASA Programs Not Officially Involved as CFE Sites

If your program is not yet involved as a CFE site but you are interested in incorporating concepts of CFE into your advocates' practice, the CFE framework offers several resources and connection tools available to facilitate advocacy.

#### Resources

From Place to Place

This 80-minute documentary introduces the importance of connection for youth in PMC.

#### GenoPro

This genogram software helps advocates and caseworkers build family trees for youth. Advocates enter the youth's family information into the program, and GenoPro creates a genogram (or family tree). Genograms support positive identity in youth and assist advocates and caseworkers in searching for family connections.

GenoPro has been purchased by Texas CASA and is available for free download: <a href="www.genopro.com/download/SiteLicense/InstallGenoPro.CASA.exe">www.genopro.com/download/SiteLicense/InstallGenoPro.CASA.exe</a>

A copy of the GenoPro Guide is available on the Texas CASA website.

Host a screening of the the documentary **From Place to Place**, and follow-up with discussion and Q&A with advocate supervisors experienced in PMC and/or CFE.



An abbreviated, 20-minute version of **From Place to Place** can be found on YouTube:

https://www.youtube.com/watch?v=98UIV-gsE2I&feature=youtu.be.

Discussion questions and more information can be found at: <a href="https://www.fromplacetoplacemovie.com">www.fromplacetoplacemovie.com</a>

#### Ancestry.com

This popular website helps volunteers learn about relatives and genealogical histories, and it can be used to build a family tree for their youth.

#### Seneca Search

A Seneca Search completes a search of multiple public databases and, in a matter of hours, returns a report of names and contact information of people related to the youth. The cost of \$25 per search saves many hours of time.



Texas CASA has a license for Ancestry.com. Please call Texas CASA at (512) 473-2627 for updated login information.

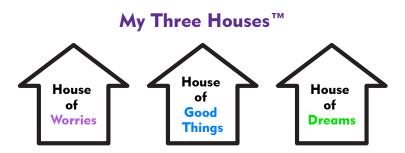
Complete the Seneca Search online: https://online.senecacenter.org/www/public/familyfinding/requestform.aspx\_Please refer to the Seneca Search Guide in Appendix B to help you understand and interpret your received Seneca Search.

#### **Connection & Engagement Tools**

The success of the tools in this section comes from their nature as *activities*, opportunities for CASA volunteers and youth to actively connect through discussion and a cooperative task. The volunteer's act of inviting and providing space for the youth to talk enables the volunteer to build a relationship with the child. The physical product of the activity assists the volunteer in connecting and engaging with the youth's family and extended network as well as identifying areas of need.

#### My Three Houses<sup>™</sup>

This activity asks children to identify and articulate for the volunteer the aspects of their lives that are worries, good things and dreams. My Three Houses $^{\text{TM}}$  can be completed on paper or through an app that can be downloaded to the volunteer's tablet.





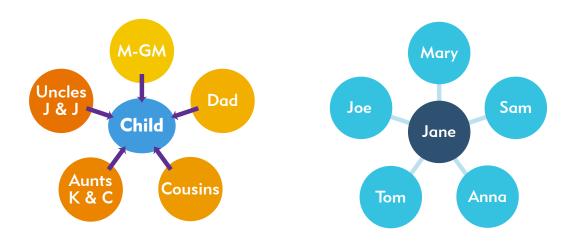
The advocate and child can revisit this activity during later visits. "I remember that we didn't get to finish this activity last time. Do you have anything to put in your House of Dreams this time?" or "I remember that you were really worried about \_\_\_\_\_ the last time we were together. Is that still in your House of Worries?"



For comprehensive instructions and a direct link to the app download, please visit <a href="https://www.mythreehouses.com">www.mythreehouses.com</a>.

#### Ecomaps

Within the context of child advocacy work, an ecomap depicts the relationships that surround a young person. The visual aid helps both the advocate and child to recognize the sources of her relationships.



#### Create an Ecomap with Youth in PMC

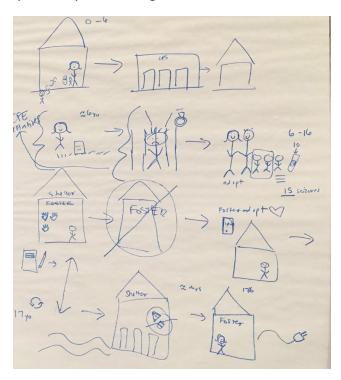
- Draw the ecomap on a piece of paper or create one in a Word document by selecting Insert SmartArt Graphic, Relationship, Basic Radial. The Basic Radial begins with four people, but more can be added from the text box.
- 2. Begin with the youth's name in the middle, and then ask age-appropriate versions of the following questions:
  - "Who is important in your life?"
  - "What groups or activities do you participate in? What memberships do you hold?" (For example: church, school, basketball team, neighborhood, choir, etc.)
  - "What does your typical day/week look like? Where do you go and whom do you see?"
- 3. Each person/area of life becomes its own circle surrounding the youth.



See **Ecomap Instructions** in Appendix B. For online creation tools, please visit <a href="https://www.smartdraw.com/ecomap/">www.smartdraw.com/ecomap/</a>.

#### Mobility Mapping

One of the most effective connection and engagement tools volunteers can use to better understand the youth they are working with and their needs is a mobility map.



If age-appropriate, the youth should stand up and draw or write down the requested information for the following activities. Putting the marker in the youth's hand gives the youth authority over their experience and agency to make decisions. It can also help with memory recall.

"We're going to do something a bit different today and draw a big picture of the story of your life. We're going to try and focus on all the positive or good things but if something sad comes up we can draw that too, that's up to you. I am going to ask you some questions and then you will draw out the answers. Is that okay with you?"

Mobility mapping is meant to be fun, but painful memories may arise that could upset the youth. If something upsetting comes up for the young person, ask them how (or if) they would like to draw this on their map, and then move on. Advocates should plan ahead to ensure that a support person is available to the youth after the activity is completed.



For detailed instructions and specific questions to guide this activity, please see the *Mobility Mapping How-To Guide* in Appendix B.

#### Genograms

Genograms promote positive identity in youth and assist advocates and caseworkers in searching for and organizing family connections.



You can use the GenoPro or Ancestry.com resources or Google "my family tree" (then select Images) for a variety of printable templates appropriate for youth of all ages.

What if my teen doesn't want to draw her houses or talk about her family?

Once you, the advocate, are familiar with the concepts and goals of these tools, you can be flexible and creative to adapt them for your youth. Ask them to draw something else—their various teams, school, favorite holidays, or their pets,

for example. Also, some teens are more confident in their tech skills than their drawing skills and might prefer to work on a tablet or laptop.

#### **CONCLUSION/NEXT STEPS**

The more comprehensive your pre-service and ongoing training are, the better prepared your volunteers will be to advocate for the youth they serve. Detailed material, made relevant and accessible through local examples and first-hand experience from volunteers working on PMC cases, strengthens your volunteer base as a whole and improves the likelihood that volunteers will remain with a case until permanency is achieved.

When new volunteers take on their first cases, they will begin the process of getting to know the youth and determining how best to advocate for their individual needs. The next chapter discusses specific ways that volunteers can support youth across many dimensions of their lives.





# KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

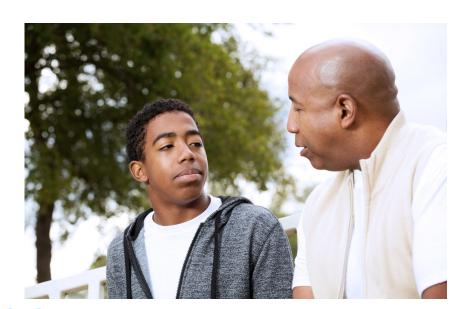
#### **CHAPTER 4: ADVOCACY**

Here is where the volunteer's real work begins: advocacy. Advocacy is speaking and acting on behalf of the interests of the disadvantaged. As CASAs, we promote, protect and defend youth in the child welfare system. CASAs are advocates in action, and the desire to actively support abused and neglected children and youth is what compels our volunteers to make the initial inquiry, participate in pre-service training, and ultimately, sign on for their first case—but after our volunteers pledge to advocate for the youth in their case, an important question arises: How do we advocate for youth in the foster care system?

#### **OBJECTIVES**

After reading this chapter, you should be able to:

- Explain the purpose, procedure and implementation of the PMC Needs Assessment and Action Plan
- Recommend actions of advocacy to volunteers and volunteer supervisors
- Guide volunteers on how to promote self-advocacy in youth



The work of these CASA volunteers is not easy, often filled with roadblock after roadblock... Yet, one of the things we hear from these dedicated volunteers the most is 'I want to do more.'"

Vicki SpriggsCEO, Texas CASA

<sup>&</sup>lt;sup>1</sup>Vicki Spriggs, "Change Starts with the Child," January 24, 2017, Texas CASA, <a href="https://texascasa.org/change-starts-with-the-child/">https://texascasa.org/change-starts-with-the-child/</a>.

Many types of strategies for advocacy are similar for youth in TMC and those in PMC. Still, youth in PMC require additional support that addresses needs that arise from being in long-term foster care, particularly the need to get out of foster care and into a forever family. For youth in PMC, the clock does not stop ticking just because the TMC case has ended. For these children in particular, urgency is paramount, and it is often the CASA volunteer who must become the driving force of this urgency.

#### THE PMC NEEDS ASSESSMENT & ACTION PLAN

The most effective way for a volunteer to plan and implement an advocacy strategy is to complete the PMC Needs Assessment and Action Plan (NA/AP). This two-part form requires the volunteer to first understand the youth's history and individual needs before the volunteer determines a specific plan to address those needs.

When the legal timeline slows down, the PMC Needs Assessment and Action Plan helps to amplify the CASA volunteer's clock and voice.



## How to Complete the PMC Needs Assessment & Action Plan (NA/AP)

- **Step 1**: Have the volunteer identify the youth's needs by reviewing personal case history:
  - Read the CPS case file (again if needed)
  - Review previous court documents and CASA reports
  - Contact and meet with extended families of support, including teachers, therapists and others who have first-hand experience with the youth.
- **Step 2**: Set up a meeting with the volunteer to complete the NA/AP.
- **Step 3**: Discuss the case and organize thoughts into the Needs Assessment portion of the form.
- **Step 4**: Review the Needs Assessment portion of the form to determine time-sensitive actions/goals in the Action Plan portion of the form.
- Step 5: Revisit the form, at least quarterly, to ensure that goals are being met in a timely manner.

If volunteers struggle with **Step 1**, connection and engagement tools are an excellent way for the volunteer to both get to know the youth's individual needs and begin the important process of relationship-building with youth (see **Chapter 3** for resources and instructions). They can also use the **Advocacy Checklist** in Appendix B.



For comprehensive information on advocating for older youth, please see the **Permanency Planning Toolkit: A Framework for Serving Older Youth in Care**, produced by Texas CASA and available on CASA College.

A blank template of the **Needs Assessment and Action Plan** can be found in Appendix B.

#### SELF-ADVOCACY: EMPOWERING YOUTH IN FOSTER CARE

Self-advocacy is a critical component of problem-solving skills and, ultimately, adulthood. Though specific actions of self-advocacy will vary across domains, certain core behaviors and attitudes have universal application. Through discussion, practice, and example, volunteers must encourage youth to take the following actions of self-advocacy:

- Speak up for themselves
- Describe their strengths, needs and wishes
- Take responsibility for themselves
- Find out about and exercise their rights
- Obtain help or know whom to ask if they have a question or problem



#### **Strategies for Building Youth Self-Advocacy**

- Ask the youth to create and fill in two columns: strengths and areas for growth. Acknowledge each of his observations and discuss strategies for using the left column (strengths) to bolster the right column (areas for growth).
- Remind the youth that asking for help is an effective strategy. Use yourself as an example and model this behavior whenever possible. Praise him for speaking up when he needs help.
- When a problem arises, give the youth a chance to solve it before stepping in.
- Identify or connect the youth with an appropriate mentor.

The self-advocacy skills we need to teach youth will vary depending on factors such as age, gender, personality and situation. Regardless of the variables, all youth must know how to advocate for what they need and how to adjust their advocacy strategies based on what they need.

#### HOW TO ADVOCATE FOR YOUTH IN LONG-TERM FOSTER CARE

The following sections describe specific types of advocacy needs and strategies. Each area of advocacy—social, lifetime network, psychological, educational, medical, placement, legal, cultural and young adult—pertains to an important element of a child's identity and contributes to his overall health and happiness. Therefore, each area requires volunteers' careful consideration throughout their time on the case.

Each section coincides with a "Needs Type" section on the PMC Needs Assessment and Action Plan and includes tips about how to determine needs, how the volunteer can advocate for the youth, and how the youth can best advocate for themselves.

A note about point-of-view: The material is written from the point of view of the supervisor, in order to provide ready instruction for volunteers. Because volunteers must focus on the individual needs of each child in their assigned sibling group, the tips refer to one child.

#### Social Advocacy

Social needs pertain to all of the youth's social relationships, including friendships, bullying, romantic relationships and mentor connections.

#### **Identifying Social Needs**

- Complete a connection and engagement tool such as My Three Houses<sup>™</sup>, an ecomap, or a
  mobility map (See Chapter 3 for resources and instruction).
- As you develop a connection with the youth, you should ask questions about his social relationships. Older youth may be reluctant to discuss romantic relationships, but most everyone will discuss friendships (if they have them).
- Be an active listener. If the youth does not want to discuss specific relationships, ask him about his weekend and listen for clues about his social life.
- Ask questions that demonstrate that you are listening to the youth. Use names of friends and enemies. Ask follow-up questions about any issues that generate a negative reaction from the youth, and avoid questions with yes/no/fine answers.



- Don't ask: Are you having any trouble with bullying? or How are you doing at school, socially?
- Instead try: Who do you hang out with at lunch? or I haven't heard you mention [friend's name] for a while. When was the last time you hung out?
- Be observant. Consider his hygiene, especially if he is older or just beginning puberty. Could poor hygiene be negatively impacting his ability to secure friendships?
- Ask caregivers, teachers, coaches and guidance counselors about the youth's social interactions at school and in extracurricular activities.

#### Addressing Social Needs - Volunteer

- Notify the caregiver, teachers, and other relevant people if the youth is being bullied or if you have a concern about the influence of a particular friend or group.
- Discuss hygiene needs with the caregiver.
- If siblings have been separated into different placements, set up sibling visits, if not in person then via Facetime or Skype. Many sibling groups are separated over their years in foster care, and sibling contact may be the only connection the youth may have with their family.
- Introduce the youth to available extracurricular activities that may be of interest to him, particularly team sports that will expose him to others his age and open opportunities for more friends and mentors (coaches, arts instructors, etc.).
- If your youth identifies as LGBTQ, make yourself open to discussing issues particular to this population, and connect him with reputable LGBTQ support and peer groups.



Please refer to Appendix B for a copy of the *Transitional Living Worksheet*. This document helps youth identify their needs and alerts the volunteer to areas in need of attention.

#### Addressing Social Needs - Youth

- Teach the youth about proper hygiene.
- Role-play or discuss responses to bullying or peer pressure with the youth.
- Role-play or discuss ways for the youth to introduce himself or engage with new acquaintances.

### Lifetime Network Advocacy



Lifetime network needs pertain to the youth's connection with people who could serve as part of his forever network—people who will offer support and care for him unconditionally, forever. A forever network of support may include his biological family (potentially even the parents), members of his faithbased community, coaches, neighbors, friends and teachers, among many others who are committed to being in the youth's life for the long term. Membership in a lifetime network will vary greatly depending on the youth and whom he would like to include.

#### **Identifying Lifetime Network Needs**

- Complete a connection and engagement tool such as My Three Houses<sup>™</sup>, an ecomap, a mobility map, or a genogram (See **Chapter 3** for resources and instruction.)
- As you create a family tree (genogram) with your youth, ask him about other elements to add to the drawing that belong near the tree or help his tree grow. For example, a friend from church might be a watering can, or a neighbor might be a flower.

#### Addressing Lifetime Network Needs - Volunteer

- Reach out to non-family members whose names brought up positive associations during connection and engagement tool creation, and determine the health of these connections.
- Work with the youth to identify a Circle of Support (COS) that includes both family and non-family members. COS meetings are facilitated by CPS but are led by the youth, so early youth-involvement is important.
- Connect the youth with a mentor, particularly someone whom the youth has mentioned with positive associations and can regularly model successful life practices.
- Ensure that the youth has contact information for everyone in his COS and has the ability to connect with these people via phone or email.

#### Addressing Lifetime Network Needs - Youth

- Teach the youth to articulate his needs and desires to people within his COS.
- Encourage older youth to take initiative and to contact their mentor or COS at appropriately regular intervals.

#### **Psychological Advocacy**

Psychological needs pertain to issues of identity, attachment and anything else that might affect the youth's mental state.

#### **Identifying Psychological Needs**

- Read through the youth's health passport and psychological evaluations.
- Discuss youth's current state and progress with the therapist.

#### Addressing Psychological Needs - Volunteer

- Read up on the youth's current medications:
  - Is the youth taking all prescribed medications?
  - Does the youth require all prescribed medications?
  - Do any medications interact?
- Ensure that the youth has received every necessary psychological evaluation and that any recommendations were followed up on.

According to the American Academy of Pediatrics, "Mental and behavioral health is the largest unmet health need for children and teens in foster care."
Up to 80% of children in foster care have significant mental health issues, compared to approximately 18-22% of the general population.

- Recognize signs and possible consequences of trauma on the youth and his family.
  - If the youth has a therapist, speak to the therapist about completing the Adverse Child-hood Experiences (ACE) questionnaire to determine the youth's ACE score. Visit this site to get more information: https://www.cdc.gov/violenceprevention/acestudy/index.html
  - Read up on ACE scores and mitigating factors.
  - Articulate the youth's needs to teachers, caregivers and other relevant adults.

#### Addressing Psychological Needs - Youth

- The youth should take note of any changes in his mental or physical states and should notify relevant adults when changes are concerning. Changes to pay attention to may include but are not limited to changes in energy level, mood, sleeping or eating patterns.
- Older youth should know the following information pertaining to their medical needs:
  - Diagnoses
  - Medication: reason for taking medications, dosage and possible side effects
  - Doctor's name and contact information
  - Where and how to fill prescriptions

#### Table 1: Domains of Impairment in Children Exposed to Complex Trauma

#### I. Attachment

Uncertainty about the reliability and predictability of the world

Problems with boundaries Distrust and suspiciousness

Social isolation

Interpersonal difficulties

Difficulty attuning to other people's emotional states

Difficulty with perspective taking

Difficulty enlisting other people as allies

#### II. Biology

Sensorimotor developmental problems Hypersensitivity to physical contact Analgesia

Problems with coordination, balance, body tone

Difficulties localizing skin contact

Somatization

Increased medical problems across a wide span, e.g., pelvic pain, asthma, skin problems, autoimmune disorders, pseudoseizures

#### III. Affect Regulation

Difficulty with emotional self-regulation Difficulty describing feelings and internal experience Problems knowing and describing internal states Difficulty communicating wishes and desires

#### IV. Dissociation

Distinct alterations in states of consciousness Amnesia

Depersonalization and derealization

Two or more distinct states of consciousness, with impaired memory for state-based events

#### V. Behavioral Control

Poor modulation of impulses Self-destructive behavior

Aggression against others

Pathological self-soothing behaviors

Sleep disturbances

Eating disorders

Substance abuse

Excessive compliance

Oppositional behavior

Difficulty understanding and complying with rules Communication of traumatic past by reenactment in

day-to-day behavior or play (sexual,

aggressive, etc.)

#### VI. Cognition

Difficulties in attention regulation and executive functioning

Lack of sustained curiosity

Problems with processing novel information

Problems focusing on and completing tasks

Problems with object constancy Difficulty planning and anticipating

Problems understanding own contribution to what

happens to them

Learning difficulties

Problems with language development

Problems with orientation in time and space

Acoustic and visual perceptual problems

Impaired comprehension of complex visual-spatial

patterns

#### VII. Self-Concept

Lack of a continuous, predictable sense of self

Poor sense of separateness Disturbances of body image

Low self-esteem

Shame and guilt

Source: Cook, A., Blaustein, M., Spinazzola, J., & van der Kolk, B. (Eds.) (2003). Complex trauma in children and adolescents. National Child Traumatic Stress Network A foster care alumni study performed by Casey Family Programs in 2003 found significant disparities in mental health between foster care alumni and the general population. The report, assessing the Effects of Foster Care: Mental Health Outcomes from the Casey National Alumni Study, compared 1,087 former foster youth and 3,547 adults from the general population matched for age, gender and race/ethnicity, and identified the following findings:

| Mental Illness                 | % of Foster Care<br>Alumni | % of General<br>Adult Population |
|--------------------------------|----------------------------|----------------------------------|
| Post-Traumatic Stress Disorder | 21.5                       | 4.5                              |
| Major Depressive Episode       | 15.3                       | 10.6                             |
| Modified Social Phobia         | 11.9                       | 8.9                              |
| Panic Disorder                 | 11.4                       | 3.6                              |
| Generalized Anxiety Disorder   | 9.4                        | 5.1                              |
| Alcohol Dependence             | 3.7                        | 2.0                              |
| Drug Dependence                | 3.6                        | 0.5                              |
| Bulimia                        | 2.9                        | 0.4                              |

#### **Educational Advocacy**

Educational needs pertain to issues involving school and learning, including special education, tutoring, and state testing currently known as STAAR.

#### **Identifying Educational Needs**

- Read through the youth's green binder (education binder/records), and determine whether he is working at grade level and whether he is on track to advance to the next grade or graduate.
- Determine whether the youth requires special services.
- Discuss the youth's progress, strengths and areas in need of improvement with teachers.
- Have an informal and candid conversation with the youth about his experiences in school.



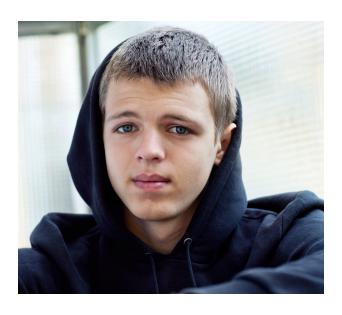
What are your favorite and least favorite subjects, and why? What are you really good at learning/doing? What do you wish you were better at learning/doing?

#### Addressing Educational Needs - Volunteer

- Partner with the youth's teachers, counselors, campus administrators and the Education Decision Maker (EDM), who makes day-to-day education-related decisions.
- Attend all Admission, Review, and Dismissal (ARD) and Individualized Education Plan (IEP)
  meetings. If CASA is appointed as the surrogate parent, he or she becomes a member of
  the ARD committee.
- Advocate for consistency in school placement.
- If the youth must change schools, help him to be enrolled in his new school as quickly as possible and ensure a prompt transfer of education records.
- Advocate for and locate opportunities for needed tutoring services.
- Consider putting self-advocacy goals into the youth's IEP (if he has one).
- Expose the youth to the idea of going to college and the importance of college-preparedness.
  - Help him prepare to take college entrance exams
  - Search for scholarships online
  - Attend a college fair
  - Attend tours of colleges
  - Complete the Free Application for Federal Student Aid (FAFSA)
  - Help him with college essays
- Learn about and advocate for state-funded educational benefits, such as the Education and Training Voucher (ETV), College Tuition and Fee Waiver, and DFPS college scholarships through the Preparation for Adult Living (PAL) program.

#### Addressing Educational Needs - Youth

- Encourage the youth to:
  - Ask teachers for help and, when needed, attend after-school tutoring sessions.
  - Identify his socio-economic and professional aspirations and explore the type of education or training required to meet those goals (college, trade school, etc.).
  - Attend all meetings that concern his educational progress, including IEP meetings (if he has an IEP).



#### **Medical Advocacy**

Medical needs pertain to the youth's past and current diagnoses, medications, and medical review. Many of these tips are relevant to psychological advocacy as well.

#### **Identifying Medical Needs**

- Review medical records. Check the youth's Health Passport by asking the DFPS caseworker or Medical Consenter for access.
- Familiarize yourself with the youth's developmental stage.
- Especially for younger children, compare the youth's abilities and behaviors with age-appropriate milestones.
- Determine whether the youth is sexually active. Approaches and responses will vary from person to person.
- While you should not provide contraception for youth, you must be prepared to answer questions pertaining to sex or provide relevant resources for information.

#### Addressing Medical Needs - Volunteer

• Determine if additional medical interventions are needed. This can be done by raising discussion topics and asking questions such as:



- Tell me about your experience in the classroom.
- Do you have any trouble seeing the whiteboard at school? (Does the youth need prescription lenses?)
- Is your teacher easy to understand? (Does the youth need a hearing aid, or does the youth need medication to stay focused?)
- Read up on the youth's current medications:
  - Is he taking all prescribed medications?
  - Does he require all prescribed medications?
  - Do any medications interact?
- Participate in or receive information regarding all medical reviews.
- Advocate for older youth to have access to their Health Passport.
- If youth is at least 16 years old, help the court determine if he is ready to assume the responsibility of being his own medical consenter.

#### Addressing Medical Needs - Youth

- Remind the youth to take note of any changes in his mental or physical states, and that he should notify appropriate adults when changes are a concern.
- Older youth should know medical information on their Transitional Living Plan, such as:
  - Diagnoses
  - Medication: reason for taking meds, dosage and possible side-effects
  - Doctor's name and contact information
  - Where and how to fill prescriptions
  - How to receive Medicaid

#### Important Developmental Milestones by the end of ...

| 3 months  | 7 months   | 1 year  |
|---|--|---|
| <ul> <li>begins to babble</li> <li>brings hand to<br/>mouth</li> <li>first smile</li> </ul> | <ul> <li>babbles chains of sounds</li> <li>can tell emotions by tone of voice</li> <li>develops full color vision</li> <li>responds to own name</li> <li>transfers object from hand to hand</li> </ul> | <ul> <li>bangs two objects together</li> <li>crawls forward on belly</li> <li>cries when parent leaves</li> <li>finds objects even when hidden under two or three covers</li> <li>finger feeds him/herself</li> <li>reaches sitting position without help</li> <li>responds to "no"</li> <li>says "dada" and "mama"</li> <li>walks holding on to furniture</li> </ul> |

| 2 years  | 3 years   | 4 years   | 5 years   |
|--|---|---|---|
| <ul> <li>begins make-believe play</li> <li>begins to run</li> <li>begins to show defiant<br/>behavior</li> <li>begins to sort by shapes and<br/>colors</li> <li>says 2-4 word sentences</li> <li>turns over container to pour<br/>out contents</li> <li>walks alone</li> <li>walks up and down stairs<br/>holding on to support</li> </ul> | <ul> <li>can ride a tricycle</li> <li>expresses affection openly</li> <li>sorts objects by shape and color</li> </ul> | <ul> <li>cooperates with other children</li> <li>uses scissors</li> <li>walks up and down stairs without support</li> </ul> | <ul> <li>dresses and<br/>undresses without<br/>help</li> <li>uses a fork, spoon<br/>and (sometimes)<br/>a knife to eat</li> </ul> |



The **Developmental Milestones Checklist** is based on information from the CDC website (https://www.pbslearningmedia.org/resource/hs11.living.gen.birth.lpdevelchild/the-developing-child/#.WZJ3BFGGNPY)

#### **Placement Advocacy**

Placement needs pertain to issues involving the youth's current placement, such as the meeting of basic needs and the transition plan.

#### **Identifying Placement Needs**

- Consistently review and assess the following:
  - Current placement of the child to ensure safety and progress
  - Possibilities for other placements, particularly with someone within the youth's lifetime network
- When completing connection and engagement tools such as My Three Houses<sup>™</sup> or Mobility Mapping, take note of comments about placement caregivers.
- Meet with the youth at their current placement. Observe the conditions of the placement and the caregivers' interactions with youth and other members of the household.

#### Addressing Placement Needs - Volunteer

- Keep permanency in mind, knowing that just because a foster home is strong and committed to caring for the child does not mean that permanency has been, or will be, achieved.
- Research other options for placement, while being aware of the needs of the child, including the placement's cultural relevance and competency.
- Remember that a family is not a physical place (a house). Use the term "forever family" when discussing the goals of advocacy work.
- Ensure that kinship placements receive kinship funds: financial support available through the Permanency Care Assistance (PCA) program.
  - If the youth is 16 or older when PMC is transferred to kin, PCA benefits may continue to the youth's 21st birthday.
- Guide older youth through the process to obtain Preparation for Adult Living (PAL) services.
- If you believe the youth may make an effort to connect with family members after he ages out of care, try to make these connections well ahead of this time. This will ensure that interactions are "kept above ground" and can be monitored for safety and appropriateness, and that the youth can be supported throughout this process.

#### Addressing Placement Needs - Youth

- For older youth that have not received permanency, a plan should be developed that helps identify services that will assist them in transitioning out of foster care. These areas/services may include:
  - Transitional living/independent living
  - Getting a job
  - Positive support systems such as their lifetime network

#### Legal Advocacy

Legal needs pertain to issues involving the court, such as hearings and the enforcement of legal rights and requirements.

#### **Identifying Legal Needs**

- Ask youth and placements if the attorney ad litem is visiting or making contact with the
  youth. If not, this allows CASA to have the conversation with the attorney or provide information in the court report.
- If parental rights have been terminated, parents have the right to file an appeal. Check with the courts to confirm if an appeal has been filed.
- If the youth is in also involved with Juvenile Justice, connect with the Crossover team to ensure proper coordination of services.
- Discuss the option of Extended Foster Care (EFC), a voluntary program that offers opportunities to continue foster care placement for youth turning 18 in DFPS care. This program also helps to facilitate the transition to independence with DFPS supervision.

#### Addressing Legal Needs - Volunteer

- Use court reports to make recommendations:
  - To keep the attorney ad litem on the case
  - For more frequent hearings, such as every three months
- Advocate for the youth's right to attend his hearings, and help him to attend. Texas law allows for youth to be present.
- Teach the youth about his legal rights and how to discuss them in a positive, constructive way.
- In PMC cases without termination of parental rights (TPR) it is important to review the pros and cons of the TPR ruling as the case progresses. Sometimes, it may not be in the youth's best interest to keep parental rights intact.

#### Addressing Legal Needs - Youth

- Invite the youth to attend PMC hearings whenever possible and appropriate.
- Assist the youth in requesting court records to educate himself on his case.
- Answer any questions the youth may have about his various legal cases (family court, any juvenile justice involvement).
- Ensure the youth knows who his attorney ad litem is and how to contact him or her.



#### **Cultural Diversity & Inclusion Advocacy**

Cultural diversity and inclusion needs pertain to issues involving the youth's culture - such as traditions, values, foods, religious practices, sexual orientation and gender identity.

#### **Identifying Cultural Needs**

- Ask the youth about valued traditions, holidays, foods or music shared by his family and friends, and gather information about them.
- If completing a mobility map, ask the youth questions about his cultural practices and holidays throughout the activity.



Do you remembering celebrating any holidays? What holidays did your family celebrate?
 How would you draw that on your map? Who would all be a part of this celebration? Tell me more about...

#### Addressing Cultural Needs - Volunteer

- Educate the youth's placement and caregivers about his cultural needs, especially dietary, personal hygiene and gender identity-related needs.
- Recognize and celebrate cultural holidays with the youth. Send him a card or take him to a cultural celebration.
- Connect the youth with people who share his culture and/or language.
- Help the youth to introduce cultural traditions and celebrations with his placement or with friends at school.
- If the youth is Native American, familiarize yourself with the Indian Child Welfare Act (ICWA) and make sure that its requirements are met.
- If the youth is LGBTQ, familiarize yourself with local groups to connect him with that help LGBTQ youth have a sense of normalcy.

#### Addressing Cultural Needs - Youth

 Role-play or discuss how the youth can educate others about his cultural needs and traditions.





#### Young Adult Advocacy

Young adult needs include life skills, applying to college, obtaining and navigating important legal documents, and anything else that will help older youth transition to adult living.

#### **Identifying Young Adult Needs**

- Ask the youth what his goals are (personal, professional, economic, etc.) and how he plans to reach them.
- Make a calendar with the youth to help him reach his identified goals. Document on the
  calendar what tasks need to be completed, when and by whom. Make this calendar for as
  far out as the youth would like, but typically a six-week period is recommended.

#### Addressing Young Adult Needs - Volunteer

- Ensure that the youth understands that after he transitions out of foster care, CPS and CASA will no longer be involved. Explore worries or concerns the youth may have about this. Identify the supports the youth receives from CPS and CASA that will need to be made up for elsewhere.
- Guide older youth through the process to obtain Preparation for Adult Living (PAL) services.
- Connect youth to foster care alumni groups, such as the Foster Care Alumni of America.



- Ensure that the lifetime network is in place around the youth and that they will be actively involved in the youth's life when and after he transitions out of foster care.
- Follow other recommendations for older youth as described in Lifetime Network Advocacy and Educational Advocacy.

#### Addressing Young Adult Needs - Youth

- Help the youth to advocate for a copy of his birth certificate, Social Security card, and Texas ID, which can be done as soon as he turns 16 years old.
- Follow other recommendations for older youth as described in the Lifetime Network Advocacy and Educational Advocacy sections above.
- Introduce the youth to the nearest PAL Center so he knows where he can go for support after he leaves foster care.
- Remind youth that his Transitional Living Plan contains useful information for future planning.

#### **CONCLUSION/NEXT STEPS**

There are many online resources for advocacy and self-advocacy skills. Some offer actual lessons, and many focus on children and youth with specific disabilities. A simple Google search for "advocacy skills" or "self-advocacy skills" will produce a large selection from which to choose. Texas CASA has and will continue to identify and create resources for advocacy. Please explore these resources on CASA College or contact Texas CASA directly for further guidance.



## KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

#### **CLOSING**

#### REMEMBER THE STORY FROM THE BEGINNING OF THIS RESOURCE GUIDE?

We started this resource guide by walking in the shoes of a child who lost everything. The moment a child's parents' rights are terminated marks the beginning of her tumultuous journey through long-term foster care, a journey in which the only consistency is its inconsistency. Foster parents come and go, as do caseworkers and teachers – maybe even her siblings get sent to other placements – and her life in the state's custody is legally designated as "permanent."

You, as a CASA team member, now have the roadmap to change this story's ending. CASA must strive for positive permanency, so that no child has to face the struggles of an overburdened system on their own – and this resource guide provides you and your program with the tools needed to recruit and train volunteers who will be strong, dedicated advocates for children in long-term care.

By implementing these strategies into your program's operations, these children will feel the strong support of an advocate who will reignite the urgency to find positive permanency, help them build connections and positive relationships, or prepare for a successful adulthood. Together, we can prevent more children from languishing forgotten in long-term care.

We at Texas CASA see you, the staff of the local CASA programs across the state, as vital members of our team dedicated to advocating for the needs of children in foster care. As you continue your advocacy work, please continue to tell us what works, what you need and what questions you have. We are always striving to find the best resources and strategies in order to provide the highest level of advocacy for our kids and care, and we need your support and feedback. Your voice matters!

Thank you for all of the work that you do to support the needs of children in foster care. However their stories may start, together, we can advocate for the best possible ending and a true beginning of a healthy, connected, positive life.

#### **TEXAS CASA**



STRENGTHENING THE VOICES OF CASA STATEWIDE

## KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

#### **APPENDIX A: SOURCES & READING**

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#### **Training Resources for PMC**

#### Skills for Your CASA Child/Youth:

#### 1. Adoption Resources/TARE

Adoption Events from TARE: <a href="https://www.dfps.state.tx.us/Adoption\_and\_Foster\_Care/About\_TARE/Adoption/events.asp">https://www.dfps.state.tx.us/Adoption\_and\_Foster\_Care/About\_TARE/Adoption/events.asp</a>

Adoption Agencies: <a href="http://www.arrow.org/services-programs/foster-care/training-calendars/">http://www.arrow.org/services-programs/foster-care/training-calendars/</a>; <a href="http://www.pathway.org/nesourcesadopt.html">http://www.pathway.org/nesourcesadopt.html</a>

CASA College: Adoption Advocacy <a href="http://texascasa.staging.wpengine.com/learning-center/resourc-es/adoption-advocacy/">http://texascasa.staging.wpengine.com/learning-center/resourc-es/adoption-advocacy/</a>

#### 2. Defining Permanency

Permanency Values: <a href="http://texascasa.staging.wpengine.com/learning-center/resources/download-resources-permanency-values-training/">http://texascasa.staging.wpengine.com/learning-center/resources/download-resources-permanency-values-training/</a>

National Resource Center for Permanency and Family Connections Permanency Toolkit: <a href="http://www.nrcpfc.org/toolkit/youth-permanency/">http://www.nrcpfc.org/toolkit/youth-permanency/</a>

#### 3. Life Skills

CASA College: Adult transition <a href="http://texascasa.org/learning-center/resources/casa-college-fea-tured-webinars/#october">http://texascasa.staging.wpengine.com/learning-center/resources/topics/transitioning-youth/</a>

Training for youth: <a href="http://www.lifeworksaustin.org/lifeskills">http://www.lifeworksaustin.org/lifeskills</a> training.html

Foster youth college planning guide: <a href="http://dcfs.lacounty.gov/edu/docs/Foster%20Youth%20Planning%204%20College%20Guide.pdf">http://dcfs.lacounty.gov/edu/docs/Foster%20Youth%20Planning%204%20College%20Guide.pdf</a>

Research on foster youth employment: <a href="http://www.clasp.org/resources-and-publications/files/Youth-Employment-Systems-1.pdf">http://www.clasp.org/resources-and-publications/files/Youth-Employment-Systems-1.pdf</a>

Military enlistment for foster youth guide: <a href="https://www.nrcys.ou.edu/images/yd-pubs/JoiningtheMilitaryedc508.pdf">https://www.nrcys.ou.edu/images/yd-pubs/JoiningtheMilitaryedc508.pdf</a>

Article on self-esteem for at-risk youth:  $http://digitalcommons.uconn.edu/cgi/viewcontent.cgi?article=1009&context=nera_2008$ 

Statistics on mental health: http://www.nccp.org/publications/pub 929.html

Risks and protective factors for mental health: <a href="http://youth.gov/youth-topics/youth-mental-health/">http://youth.gov/youth-topics/youth-mental-health/</a> risk-and-protective-factors-youth

#### 4. Collaborative Family Engagement/Family Finding

Candice Dosman, CFE Manager <a href="mailto:cdosman@texascasa.org">cdosman@texascasa.org</a>

Family Search and Engagement webinar: <a href="http://www.ocwtp.net/Family%20Search%20and%20Engagement/player.html">http://www.ocwtp.net/Family%20Search%20and%20Engagement/player.html</a>

Actual sites: Seneca search, Ancestry, family finding site,

#### 5. Risks

Sex Trafficking training calendar: <a href="http://www.safvic.org/schedule/list.asp">http://www.safvic.org/schedule/list.asp</a>

DFPS page and resources on trafficking: <a href="https://www.dfps.state.tx.us/txyouth/safety/human-trafficking.asp">https://www.dfps.state.tx.us/txyouth/safety/human-trafficking.asp</a>

Runaway resources: <a href="http://www.nrcdv.org/rhydvtoolkit/fysb-initiative/">http://www.nrcdv.org/rhydvtoolkit/fysb-initiative/</a>

#### 6. Self-Advocacy and Circles of Support

Theory of and Resources on Self-Advocacy at all ages: <a href="http://texasprojectfirst.org/SelfAdvocacy.html">http://texasprojectfirst.org/SelfAdvocacy.html</a> Resources on Self-advocacy: <a href="http://www.parentcenterhub.org/repository/priority-selfadvocacy/">http://www.parentcenterhub.org/repository/priority-selfadvocacy/</a> Materials to Teach Self-Awareness and Advocacy: <a href="http://www.ou.edu/education/centers-and-part-nerships/zarrow/trasition-education-materials/me-lessons-for-teaching-self-awareness-and-self-advocacy.html">http://www.parentcenterhub.org/repository/priority-selfadvocacy/</a> Materials to Teach Self-Awareness and Advocacy: <a href="http://www.ou.edu/education/centers-and-part-nerships/zarrow/trasition-education-materials/me-lessons-for-teaching-self-awareness-and-self-advocacy.html">http://www.ou.edu/education/centers-and-part-nerships/zarrow/trasition-education-materials/me-lessons-for-teaching-self-awareness-and-self-advocacy.html</a>

DFPS Circles of Support page: <a href="https://www.dfps.state.tx.us/Child\_Protection/Youth\_and\_Young\_Adults/Transitional Living/circles of support.asp">https://www.dfps.state.tx.us/Child\_Protection/Youth\_and\_Young\_Adults/Transitional Living/circles of support.asp</a>

#### Skills for You as an Advocate/Staff:

#### 7. Communication and Relationship Building

Building Authentic Relationships with Youth at Risk webinar from Clemson: <a href="http://dropoutprevention.org/webcast/18-building-authentic-relationships-youth-risk/">http://dropoutprevention.org/webcast/18-building-authentic-relationships-youth-risk/</a>

Building Effective Youth Adult Partnerships publication: <a href="http://www.advocatesforyouth.org/publications-a-z/672-building-effective-youth-adult-partnerships">http://www.advocatesforyouth.org/publications-a-z/672-building-effective-youth-adult-partnerships</a>

Information on Communicating with Youth: <a href="http://www.charliea.com/dvd3.html">http://www.charliea.com/dvd3.html</a>

#### 8. Self-Care

Self-care for social workers: <a href="http://www.socialworktoday.com/archive/051214p14.shtml">http://www.socialworktoday.com/archive/051214p14.shtml</a> Information and resources on self-care: <a href="https://www.onlinemswprograms.com/in-focus/self-care-in-social-work-and-social-work-education.html">https://www.onlinemswprograms.com/in-focus/self-care-in-social-work-and-social-work-education.html</a>

Compassion Fatigue Awareness Project: <a href="http://www.compassionfatigue.org/">http://www.compassionfatigue.org/</a>
Social Isolation and Social Work: <a href="http://aaswsw.org/wp-content/uploads/2015/03/Social-Isolation-3.24.15.pdf">http://aaswsw.org/wp-content/uploads/2015/03/Social-Isolation-3.24.15.pdf</a>

#### 9. How to Work with Professionals

CASA College: Collaboration with CPS for Best Placement <a href="http://texascasa.staging.wpengine.com/learning-center/resources/casa-cps-collaboration-best-placement-practices/">http://texascasa.staging.wpengine.com/learning-center/resources/casa-cps-collaboration-best-placement-practices/</a>
CASA College: Webinar, Attorneys and CASA <a href="http://texascasa.staging.wpengine.com/learning-center/resources/attorneys-casa/">http://texascasa.staging.wpengine.com/learning-center/resources/judicial-perspective-casa-court-reports/</a>

#### 10. How to work with Social Connections

Articles from Child Welfare Gateway on working with bio families: <a href="https://www.childwelfare.gov/top-ics/outofhome/resources-foster-families/working-together-foster-families-and-birth-parents/">https://www.childwelfare.gov/top-ics/outofhome/resources-foster-families/working-together-foster-families-and-birth-parents/</a>
National Resource Center for Permanency and Family Connections resources: <a href="http://www.hunter.cuny.edu/socwork/nrcfcpp/info\_services/birth-family-issues.html">http://www.hunter.cuny.edu/socwork/nrcfcpp/info\_services/birth-family-issues.html</a>

#### 11. Cross-cultural awareness and removing bias

#### TEXAS CASA PMC RESOURCE GUIDE

National Resource Center for Permanency and Family Connections: <a href="http://www.nrcpfc.org/is/cultur-al-competence.html#wwv">http://www.nrcpfc.org/is/cultur-al-competence.html#wwv</a>

Texas CASA On-Demand trainings: <a href="http://texascasa.org/cultural-competency-on-demand-trainings-application/">http://texascasa.org/cultural-competency-on-demand-trainings-application/</a>

CASA college: LGBTQI training <a href="http://texascasa.org/learning-center/resources/casa-college-featured-webinars/#december">http://texascasa.org/learning-center/resources/casa-college-featured-webinars/#december</a>

Arrow Adoptions (scroll down): <a href="http://www.arrow.org/services-programs/foster-care/parent-train-ing-courses/">http://www.arrow.org/services-programs/foster-care/parent-train-ing-courses/</a>

#### 12. Trauma-Informed Care

TBRI practitioner list: <a href="https://child.tcu.edu/wp-content/uploads/2016/05/2016.05.17-TBRI-Practitioners.pdf">https://child.tcu.edu/wp-content/uploads/2016/05/2016.05.17-TBRI-Practitioners.pdf</a>

TBRI YouTube: <a href="https://www.youtube.com/watch?v=T43zJDgTNPA">https://www.youtube.com/watch?v=T43zJDgTNPA</a>

TBRI Video Collection: your local CASA program should have a set of TBRI videos you can use to train

DFPS TIC webinar: http://www.dfps.state.tx.us/training/trauma\_informed\_care/

Trauma Informed Care Consortium of Central Texas training calendar: <a href="http://www.traumatexas.com/trauma-trainings/">http://www.traumatexas.com/trauma-trainings/</a>

CASA College: Trauma informed advocacy webinar <a href="http://texascasa.staging.wpengine.com/learn-ing-center/resources/trauma-informed-advocacy/">http://texascasa.staging.wpengine.com/learning-center/resources/trauma-informed-advocacy/</a>; Impact of Trauma from Adverse Childhood Experiences <a href="http://texascasa.staging.wpengine.com/learning-center/resources/impact-trauma-adverse-childhood-experiences/">http://texascasa.staging.wpengine.com/learning-center/resources/impact-trauma-adverse-childhood-experiences/</a>

#### **Websites**

https://texascasa.org/

https://www.dfps.state.tx.us/Child\_Protection/

https://www.understood.org/en/friends-feelings/empowering-your-child/self-advocacy/theimportance-of-self-advocacy

https://www.dfps.state.tx.us/Adoption\_and\_Foster\_Care/About\_Adoption/pmc.asp

http://www.texasappleseed.org

http://www.fosteringsuperstars.org

 $http://qla.org.au/{\sim}qlaorg/PDF forms/Advocacy\%20 Info.pdf$ 

http://www.casala.org/health-advocacy

http://www.NCTSNet.org



#### Training Resource at a Glance

|    | Training  | Contact:  |
|----|---|---|
| 1  | Adoption Resources  | <ul><li>Local CPS Office</li><li>DFPS Post Adopt Support Services</li><li>Single Source Continuum Contractor</li></ul>  |
| 2  | Volunteer Coaching and Retention:<br>(motivating volunteers, supporting volun-<br>teers through challenges) | Texas CASA Local United Way Office  |
| 3  | Evaluating Volunteers   | <ul><li>Local University</li><li>Texas Evaluation Network</li></ul>   |
| 4  | Leadership/ Supervisor Training (including Effective Communication)   | <ul><li>Texas CASA</li><li>Local Nonprofit Leadership Organization</li></ul>  |
| 5  | Collaborative Family Engagement<br>(Family finding)   | Texas CASA  |
| 6  | Legal Advocacy:<br>Legal Rights for Children, New Laws  | <ul><li>Local Judges</li><li>Local Law School</li><li>Local attorneys</li><li>Texas CASA (LATs)</li></ul>   |
| 7  | Trust-Based Relational Intervention (TBRI) or<br>Trauma Informed Care                                       | <ul> <li>The Karyn Purvis Institute of Child Development with<br/>TCU</li> <li>TBRI Practitioner</li> </ul>   |
| 8  | Community Resource Coordination Groups (CRCG)   | United Way ( Call 2-1-1)  |
| 9  | Disabilities  | <ul><li>Disability Rights of Texas</li><li>Local Health and Human Service Program</li></ul>   |
| 10 | Resources for Older Youth   | <ul><li>Preparation for Adult Living</li><li>Texas Foster Youth Justice Project texasfosteryouth.org</li></ul>  |
| 11 | Immigration Laws<br>(specializations within CPS)  | <ul><li>Attorney</li><li>CPS Immigration Specialist,</li><li>Texas Foster Youth Justice Project</li><li>Mexican Consulate</li></ul>   |
| 12 | Cultural Competency   | Knowing Who You Are (racial and ethnic identity training)   |
| 13 | Human Trafficking   | <ul> <li>Local law enforcement Office</li> <li>Traffick911</li> <li>National Center for Missing &amp; Exploited Children</li> <li>Heidi Search Center</li> <li>The Internet Crimes Against Children Task Force<br/>Program</li> </ul> |
| 14 | Juvenile Justice (i.e. Crossover Youth)   | <ul><li>Local Juvenile Probation Office</li><li>Juvenile Criminal Attorney</li></ul>  |
| 15 | Compassion Fatigue  | <ul><li>Local Therapist</li><li>Superior Health (StarHealth)</li></ul>  |
| 16 | Standing Tall in Court- Testifying  | <ul><li>Local Attorney</li><li>District Attorney Office</li><li>CASA Staff/ Volunteers</li></ul>  |



STRENGTHENING THE VOICES OF CASA STATEWIDE

## KEEPING THE URGENCY FOR PERMANENCY: A RESOURCE GUIDE FOR SERVING YOUTH IN PMC

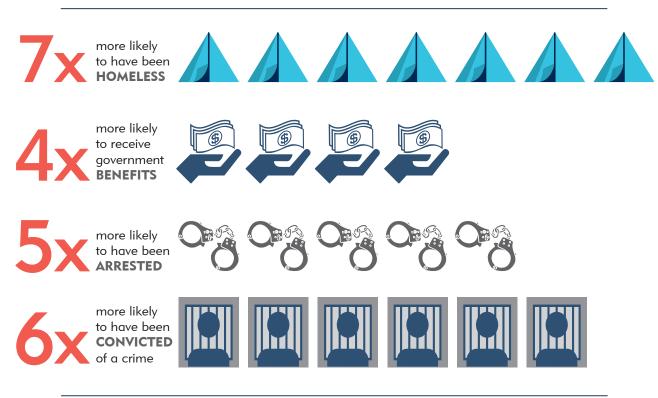
#### **APPENDIX B: RESOURCES, FORMS & TOOLS**

#### **DFPS Legal Timeline** 14 Day TMC not granted, **Emergency Hearing Adversary Hearing** child returned home TMC granted by the **Court to the State** Status Hearing (60 days) **Initial Permanency Hearing** (6 months after TMC is granted) **Permanency Hearing** (10 months after TMC is granted) **Trial/Merits** (12-18 months) Return to PMC to the **PMC** to relative Reunification parents with State with or with or with parent(s) monitoring without PCA (Dismissal) without parental (6 months) rights terminated (6 months) Review hearing May not have Review hearing Relative Review hearing 2 once every attorney ad once every completes the once every permanency 6 months litem 2-4 months PCA process 2-4 months planning or CASA meetings Caseworker must **PMC** review child service plan Caseworker must Have an attorney 2 times per year Transferred review child's ad litem and to relative service plan usually a CASA Adoption / Stay in Foster care

until 18 years old

# THE SOCIAL COSTS OF FOSTER CARE

By age 23, youth who aged out of foster care in the United States have fared far worse than youth raised in permanent homes.





Sarah Virginia White for Parentage; Source: Chapin Hall 2010 <a href="http://www.chapinhall.org/sites/default/files/Midwest\_Study\_Age\_23\_24.pdf">http://www.chapinhall.org/sites/default/files/Midwest\_Study\_Age\_23\_24.pdf</a>

#### Sample PMC CASE REFERRAL FORM

#### CASE INFORMATION

| Case Name         | Case Number | # of Children: |
|-------------------|-------------|----------------|
| Case worker:      | Phone       | email          |
| Attorney ad litem | Phone       | email          |
|                   |             |                |

| Case worker.                 |                    |                     | erran      |   |
|------------------------------|--------------------|---------------------|------------|---|
| Attorney ad litem Pr         |                    |                     | email      |   |
|                              |                    |                     |            |   |
| PARENT INFORMATION           |                    |                     |            |   |
| Mother:                      |                    | Father:             |            |   |
| Parental Rights Terminated:  |                    | Parental Rights T   | erminated: |   |
| Contact Info                 |                    | Contact Info        |            |   |
| Notes:                       |                    | Notes:              |            |   |
| Children Information         |                    |                     |            |   |
| Name                         | DOB                | M F                 | Placement  |   |
| Name                         | DOB                | M F                 | Placement  |   |
| Name                         | DOB                | M F                 | Placement  |   |
| Name                         | DOB                | □ M □ F             | Placement  |   |
| Case Notes                   |                    |                     |            |   |
|                              |                    |                     |            | 1 |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
|                              |                    |                     |            |   |
| amily Connections            |                    |                     |            |   |
| Name                         | Relationsh         | in                  | Notes:     |   |
| Name                         | Relationsh         | -                   | Notes:     |   |
| Name                         | Relationsh         | •                   | Notes:     |   |
| Name                         | Relationsh         | -                   | Notes:     |   |
|                              | <u>I</u>           |                     |            |   |
| OUTH INFORMATION (14)        | YEARS OLD AND      | UP) Check complet   | ted areas  |   |
| Child plan/ transitional pla | n has been created | l and kept current. |            |   |
| PAL                          |                    |                     |            |   |

| ] Child plan/ transitional plan has been created and kept current |
|---|
| PAL   |
| Circle of Support   |
| Youth provided ID, Birth Certificate, SSN Card                    |
| Other:  |

#### Tips for Creating a Successful Focus Group

- Before you begin selection of your questions, be sure to define the purpose (i.e. objectives) of the focus group.
- Ideally you should ask three to six questions depending on topic. Order the questions from general to specific.
- Focus groups should consist of six to twelve people. Generally, fewer than six participants tends to limit the conversation and larger than twelve can feel overwhelming and voices get lost. Tip: you should *invite* more than twelve to allow for no-shows.
- Gather information about the people in your focus group. This information may be helpful when evaluating focus group recommendations.
   For example, if your focus group is comprised of volunteers working on PMC cases, you may wish to collect the following data:
  - o Age
  - Gender
  - o Employment (previous employment if retired)
  - Length of time with CASA
  - Number of cases worked as a CASA (distinguish between PMC and TMC cases)

The following questions are recommended for volunteer focus group discussions. Feel free to include only the ones pertinent to your program and to create your own questions as well.

- 1. Are you currently a CASA on a PMC case? If so, why did you choose a PMC case?
- 2. What pre-training, if any, did you receive that prepared you specifically for PMC cases?
- 3. What training *in addition to pre-service* training have you received to help with PMC cases? Can you provide any suggestions for additional resources, services, or on-going trainings?
- 4. What would have been helpful before being assigned your first PMC case?
- 5. What do you think are some key issues volunteers face when deciding to work with PMC children or youth?
- 6. What issues have been prevalent among the children in PMC you've served?
- 7. What would you like to know regarding children in PMC? (e.g. advocacy, resources, services, statistics, etc.)
- 8. When is the best time to receive training on advocating for children in PMC, in pre-service training or on-going training?
- 9. What is your biggest unmet need you have in advocating for children in PMC?
- 10. What are some of the pros and cons of working on a PMC case?

The following questions are recommended for staff group discussions, but they can be rewritten for volunteers. Feel free to include only the ones pertinent to your program and to create your own questions as well.

#### General PMC Recruitment/Marketing:

- 1. Do we regularly review what type of media coverage our program receives, and how do we evaluate the effectiveness of that media?
- 2. What events do we have that target specific groups of volunteers by characteristics such as age, gender, ethnicity, etc.?
- 3. How does our recruitment message emphasize the well-being needs of children while in care and the urgency of work that can be done to secure for them forever homes and families?
- 4. Do we have an annual recruitment plan? If so, do we review it periodically throughout the year?
- 5. Do we have a committee or individual person focused on recruitment and retention of volunteers for PMC cases?
- 6. Do any of our marketing materials reference PMC or Collaborative Family Engagement, even indirectly?
- 7. How does our recruitment message emphasize the need to advocate for children and help them develop extended families of support until permanency is achieved?
- 8. How do we evaluate the effectiveness of our message? Do any applicants approach CASA with an interest in advocating on PMC cases?
- 9. What reasons do volunteers give for not wanting to take a PMC case?
- 10. For what reasons do volunteers "leave" a TMC case when it becomes PMC?

#### Pre-service Training:

- 1. At what point do we introduce volunteers about to PMC? (one time or continuous)
- 2. Do we reference PMC in our pre-training interview?
- 3. Do we conduct a survey with volunteers after their pre-service training?
- 4. How does this information inform our future plans?

#### Retention of Volunteers for PMC Cases:

- 1. How and how often do we check-in with volunteers on PMC cases?
- 2. How do we determine volunteer effectiveness?
- 3. How do we ensure that volunteers feel part of the CASA team and remain motivated to do their best work?
- 4. What on-going training and other events are geared specifically for volunteers on PMC cases?

#### Watch your Language Tip Sheet

If you are using your own marketing materials and would like to incorporate PMC language, it is recommended that your staff:

- 1) Meet to discuss current recruitment messages and identify the best message(s).
- 2) Select appropriate photos that portray a diverse range of kids and volunteers when it comes to age, gender, race and ethnicity. The photos should convey that there are children of all ages in foster care that need a CASA volunteer. Photos of sibling groups should also be used when appropriate.
- 3) Keep your marketing and recruitment strategies consistent, and make only gradual changes so that the community will not be confused about the CASA mission.
- 4) Recruit volunteers that are well-suited for all cases, set their expectations appropriately and introduce the concept of permanency from the beginning.

Our choice of words, phrases and descriptors can lay a critical foundation for volunteer expectations. The first step is to get comfortable with using everyday language terms when talking about PMC. Use the term "long-term foster care" as opposed to the acronym PMC. Being upfront about the possibility of a long-term case helps set up expectations and is a good way to prepare a volunteer to be successful with a PMC case. Make the language reflect this wherever needed—on marketing, promotional materials, your website, etc. A volunteer should not expect a PMC case to resolve in a year, and ultimately, the best volunteer is one that hopes to be involved until permanency has been achieved. When using Collaborative Family Engagement (CFE) language, it should never be assumed or encouraged that advocates will not have to work or engage with the child's parents or extended family members just because a final order has been made. CFE offers and encourages an inclusive approach to involving parents, extended family and others in the life of the young person when it is in their best interest. Offering open and neutral language about the family of the young person will make it easier for an advocate to feel comfortable engaging with them, should that be appropriate.

#### Example of Recruitment Verbiage:

"As a CASA volunteer you will advocate for children in temporary foster care and/or children in long-term foster care. Children in long-term foster care can get lost in the child welfare system, and CASA can help make connections that can lead to a forever home."

#### Minimum Expectations of Service to a Case

#### The advocate will:

- a. Identify and advocate for the best interest of the child by obtaining first hand a clear understanding of the needs and situation of the child, by conducting an ongoing review of all relevant documents and records and by interviewing the child, parents, social workers, teachers and other persons to determine the facts and circumstances of the child's situation.
- b. Have regular and sufficient in-person contact with the child where they live to ensure in-depth knowledge of the case and make fact-based recommendations to the court. The CASA volunteer shall meet in-person with the child once every thirty (30) days at a minimum. An exception may be granted:
  - i. If the child(ren) are placed more than 1 but less than 3 driving hours away, CASA will meet in person with the child(ren) at least once every three months.
  - ii. If the child(ren) are placed more than 3 driving hours away, CASA will meet in person with the child(ren) at least once every six months.
  - iii. In addition to in-person contact, have other types of monthly age appropriate contact with the child(ren) including telephone calls, emails, video conferencing and letters as applicable for the child's age and interests.
- c. Communicate with the DFPS caseworker after appointment and at least one time per month for the duration of the case.
- d. Meet in person with the child's primary placement provider, in a timely manner, after placement occurs. Communicate with the placement provider at least once per month thereafter for the duration of the child's case.
- e. Advocate for the child's best interests in the community through regular contact (at least quarterly) with attorney ad litem, mental health, educational and other community systems to assure that the child's needs in these areas are met and seek cooperative solutions by acting as a facilitator among parties.
- f. Determine the child(ren)'s permanent plan, access the educational portfolio and health passport and make recommendations regarding permanency, and education and medical services, as appropriate.
- g. Appear at all hearings to advocate for the child's best interests and provide testimony as needed.
- h. Provide at every hearing reports which include findings and recommendations, including specific recommendations for appropriate services for the child and, when appropriate, the child's family.
- i. Participate in all case-related meetings.
- j. Monitor implementation of service plans and court orders assuring that court-ordered services are implemented in a timely manner and that review hearings are held in accordance with the law.
- k. Inform the court promptly of important developments in the case through appropriate means as determined by court rules or statute.

- I. Maintain complete records about the case, including appointments, interviews and information gathered about the child and the child's life circumstances and return all records to the program after the case is closed.
- m. Communicate at least once monthly with CASA coach-supervisor and participate in case conferences as scheduled.
- n. Participate in in-service trainings.

#### **CASA Pre and Post Interview Questions**

Below are 10 sample questions that can be included in the Pre or Post Training interview:

- 1. How would you describe your family growing up?
- 2. Will you be able to communicate with all parties even if you may not agree with their point of view?
- 3. Have you thought about how you would handle your feelings when working with abusive parents?
- 4. How do you feel about working with parents who have lost their parental rights to their children?
- 5. Are you aware that most children want to return home? How do you feel about this?
- 6. Do you feel comfortable working with people of different socioeconomic, religious, racial/ethnic backgrounds, political beliefs or gender identities? For example, do you feel like you can work with Muslims and Hindus, African-Americans, Latinos, Democrats, Republicans, and lesbian, gay, bisexual or transgender people?
- 7. How do you feel about trying to reconnect or strengthen a child's connections and find permanency with those the child knows and loves, or who have a connection to the child's original biological, or adoptive family?
- 8. Do you think that permanency by people who are not known to the child or are outside of the family circle (stranger adoption) should only be explored when all other family or fictive kin options have been exhausted?
- 9. Give me an example of a time when a child or teen really tried your patience. Specifically, tell me what happened. How did you respond to the situation? (If they don't have experience with a child/teen, ask about a situation when they were younger and required patience from adults.
- 10. What do you need in the initial training to prepare you to begin working a case? (Alternative question: Do you feel initial training prepared you to begin working a case?)

#### **CASA Pre and Post Interview Questions**

#### Scenario:

A child was 5 years old when their parents lost their parental rights, and they have spent the last 10 years in the foster care system:

Now that they are 15, would the safety concerns be the same as when they were 5? Could the parent's situation have improved over the last decade?

Would you have maintained connection with extended family during these last ten years? Would this benefit the 15 year old now?

#### Guidance for Getting Feedback from PMC Youth

Lessons learned from Hill Country CASA

#### Getting Feedback from Youth

HCCASA had a recent experience in getting quotes and feedback from older PMC youth for their upcoming branding and marketing campaign. They interviewed and photographed older PMC youth, with signed release from their caseworker. They recorded audio from their personal I-phone and then transcribed the interviews for useable quotes.

#### The HCCASA Process

HCCASA was very deliberate about their approach to getting feedback from older PMC youth. This experience thus has yielded some lessons learned and tips to how sites might organize getting feedback from PMC youth.

- Interviews should be conducted by someone that knows and preferably has a relationship with the youth.
- Have a set of open-ended questions that allow the youth to provide expansive answers.
- Start the interview slow with open ended questions about their CASA volunteer. This allows for the youth to put the interview in context of their CASA experience, rather than their general Foster Care experience.
- Suggest audio recording interviews to allow attention to be placed on following the flow of conversation, rather than trying to document what is being said.

#### Sample Questions used in HCCASA Interviews

It is important to remember the dynamics of the youth's case. Even though these questions were planned, it was important to <u>only</u> ask questions that applied to the youth. That is why having someone that knows and has a relationship with the youth a key piece of the process.

- Tell me about your CASA Volunteer?
- Tell me about how your CASA volunteer helped you maintain connections with people important in your life? Family Connections? Siblings? Home?
- What does a new CASA Volunteer need to know about Foster Kids?
- What are your plans after Foster Care?
- What role did your CASA volunteer have in your planning for your future?
- How many times did your caseworker/placements change while you were in care versus the amount of times you changed CASA workers?
- What does your CASA do for you?

<sup>\*</sup>denotes questions recommended by Texas CASA

- What does a new CASA Volunteer need to know about living in foster care?
- What are your plans after foster Care?
- What are your future plans?
- How many times did your caseworker/placements change while you were in care?
- Did you have a change in CASA Volunteer? How many?
- What types of things do/ did your CASA do for you?

<sup>\*</sup>denotes questions recommended by Texas CASA

#### **Advocate Support Conference**

To Be Conducted by Supervisor with Volunteer every 3 months of CASA Assignment

Discuss how the volunteer feels regarding their work on the case and the direction the case is

Volunteer:

Date appointed to case:

Supervisor:

Today's Date:

currently going.

been observed.

Case Name / Cause #:

| •   | Discuss whether they feel they have the support and tools they need to serve effectively as the CASA on this case. If not, discuss what additional supports they believe could be helpful to them. |  |  |  |  |  |
|---|--|--|--|--|--|--|
| Discuss continuing educ<br>helpful or most relevan  |  | nd provide suggestions related to what could be ork. |  |  |  |  |
| Rate the volunteer's ov                             | erall case performand  | e as it relates to:                                  |  |  |  |  |
|   | Score (scale 1 - 5):   | Notes:   |  |  |  |  |
| Professional Demeanor /<br>Interactions with Others |  |  |  |  |  |  |
| Timely Documentation (Court Reports)                |  |  |  |  |  |  |
| Completion of monthly and quarterly contacts        |  |  |  |  |  |  |
| Attendance at case-related meetings                 |  |  |  |  |  |  |
| Participation in Trainings and Continuing Education |  |  |  |  |  |  |
| Overall strengths that have                         |  |  |  |  |  |  |

#### **ACRONYMS SHEET**

|          | ACKONTWS STILLT                                    |
|----------|--|
| AAL      | Attorney ad Litem                                  |
| AAPLA    | Another Approved Planned Living Arrangement        |
| ARD      | Admission, Review, and Dismissal                   |
| ATP      | Authorization to Place                             |
| CASA     | Court Appointed Special Advocate                   |
| CCL      | Child Care Licensing (also called LCC)             |
| CFE      | Collaborative Family Engagement                    |
| COS      | Circle of Support                                  |
| CPA      | Child Placing Agency                               |
| CPOS     | Child Plan of Service                              |
| CPRF     | Child Placement Resource Form                      |
| CPS      | Child Protective Services                          |
| CPU      | Child Placing Unit                                 |
| CVS      | Conservatorship                                    |
| DFPS     | Department of Family and Protective Services       |
| DV       | Domestic Violence                                  |
| EDM      | Education Decision Maker                           |
| EFCP     | Extended Foster Care Program                       |
| ETV      | Education and Training Voucher                     |
| FAD      | Foster and Adoptive Home Development; Foster-Adopt |
| FBSS     | Family Based Safety Services                       |
| FGC      | Family Group Conference                            |
| FGDM     | Family Group Decision Making                       |
| FPOS/FSP | Family Plan of Service/Family Service Plan         |
| FTM      | Family Team Meeting                                |
| GAL      | Guardian ad Litem                                  |
| HSEGH    | Health, Social, Educational, and Genetic History   |
| ICPC     | Interstate Compact on the Placement of Children.   |
| IEP      | Individualized Education Plan                      |
| ISP      | Individualized Service Plan                        |
| JMC      | Joint Managing Conservator                         |
| LOC      | Level of Care                                      |
| MSL      | Minimum Sufficient Level                           |
| PAL      | Preparation for Adult Living                       |
| PMC      | Permanent Managing Conservator                     |
| PPM      | Permanency Planning Meeting                        |
| RAPR     | Refusal to Accept Parental Responsibility          |
| 1        |  |

| RODCAP | Relative and Other Designated Caregiver Assistance Program |
|--------|--|
| RTB    | Reason to Believe  |
| RTC    | Residential Treatment Center                               |
| SIL    | Supervised Independent Living                              |
| SSCC   | Single Source Continuum Contractor                         |
| TARE   | Texas Adoption Resource Exchange                           |
| TBRI   | Trust Based Relational Intervention                        |
| TLP    | Transitioning Living Program                               |
| TMC    | Temporary Managing Conservator                             |
| TPR    | Termination of Parental Rights                             |

# **PMC Needs Assessment and Action Plan**

Volunteer's Name Case Number: Child's Name:

deserve a safe, permanent, and loving home. We should no longer accept that a child should sit in foster care for years without a home. The most important role as a CASA volunteer is to help children in foster care find permanency with a sense of urgency. Discuss the many needs of the case (include caseworker, Ad Litem etc.) to develop an action plan that can be completed before your next court No matter what the age of your CASA child is, no matter what they've done, no matter the types of trauma they've dealt with, they hearing. The clock doesn't stop ticking for a child in foster care, so let's try to find them permanency within 12 months!

# Needs Assessment

| Needs Type:                     |  |  |
|---------------------------------|--|--|
| Social                          | Identify: Social relationships, bullying, friendships, romantic relationships, etc.                        |  |
| Family<br>Connection<br>Network | Identify: Connection with Bio family, including parents; neighbors, faith members, coaches, teachers, etc. |  |
| Psychological                   | Identify: Therapy, mental health history (child and family), identity, attachments                         |  |
| Educational                     |  |  |
| Medical                         | Identify: Diagnosis, medications, medical review   |  |
| Placement                       | Identify: current placement meeting basic needs of your child, Transition plans                            |  |
| Legal                           | Recommend more frequent hearings- every 3 month, different legal representation/ legal needs               |  |
| Cultural                        | Identify: Religious Connections, heritage connections  |  |
| Young Adult                     | Identify: does child have-Texas ID, PAL, COS, Positive Support System                                      |  |
|                                 |  |  |

# **Action Plan**

| Young Adult<br>Needs | Cultural Needs | Legal Advocacy<br>Needs | Placement<br>Needs | Medical Needs | Educational<br>Needs | Psychological<br>Needs | Family<br>Connection<br>Needs | Social Needs: | Advocacy                                  |
|----------------------|----------------|-------------------------|--------------------|---------------|----------------------|------------------------|-------------------------------|---------------|---|
|                      |                |                         |                    |               |                      |                        |                               |               | <u>Goal</u>                               |
|                      |                |                         |                    |               |                      |                        |                               |               | Timeline                                  |
|                      |                |                         |                    |               |                      |                        |                               |               | Resources Needed                          |
|                      |                |                         |                    |               |                      |                        |                               |               | Team Needed<br>(internal and<br>external) |
|                      |                |                         |                    |               |                      |                        |                               |               | <u>Challenges</u>                         |
|                      |                |                         |                    |               |                      |                        |                               |               | <u>Date</u><br>Completed                  |

#### **Advocacy Check List**

This checklist is to be used only as a resource tool to assist volunteers in their advocacy for children. The goal is that this checklist will help CASA volunteers identify the child's needs, and possible resources to address those needs while moving towards permanency with a sense of urgency.

| Social |   |
|--------|---|
|        | Advocate for child to engage in age-appropriate activities  |
|        | Identify the social relationships in the child's life (friendships, romantic relationships)   |
|        | Ask follow-up questions about any issues that generate a negative reaction from the youth (attempt to identify negative peer relationships) |
| Family | Connection Network  |
|        | Review service plan to ensure plan reflects the needs and reality of family.  |
|        | Use CFE tools (Seneca Search, EcoMap, and Mobility Mapping) to identify family connections  |
|        | Identify ways to maintain or build appropriate family connections   |
|        | Identify ways to achieve reunification or transferring PMC to relative/ fictive kin   |
|        | Help youth create lifetime network  |
|        | <ul> <li>Research case file to build full story</li> </ul>  |
|        | <ul> <li>Support naturally occurring connections</li> </ul>   |
|        | Serve as liaison between stakeholders—School, doctors, care givers, and others  |
|        | Support the child by listening and talking with them  |
|        | Promote sibling visits  |
|        | Ensure child has information, mementos or keepsakes about/from their family as  |
|        | appropriate- photo albums, pictures in frames, etc.   |
| -      | ological  |
|        | Identify psychiatric and psychological diagnosis, current and historical  |
|        | Identify medication history as well as prescribing physicians.  |
|        | Identify individual care plan to address psychiatric and psychological needs as well as education for family and/or care providers.         |
|        | Open communication with professionals regarding psychiatric and psychological needs.  |
|        | Review any assessments that have been completed, request them to be received and kept in file.  |
| Educa  | <i>,</i>  |
|        | Identify and obtain historical education information i.e. grade level, test results,  |
|        | ARD minutes and attendance records  |
|        | If child is not school age, possibly identify areas of need, which would qualify for  |
|        | Early Childhood Intervention (ECI) services   |
|        | Serve as a "certified" surrogate parent   |
|        | Meet with school personnel (teachers or counselors) to ensure that they understand the child's educational needs.                           |
| П      | Identify the role and work of the Education Decision Maker (EDM)  |

|       | Attend Admission, Review and Dismissal (ARD) meetings and assure information follows the child   |
|-------|--|
|       |  |
|       | Identify post-high school options for youth  |
|       | o PAL  |
|       | College Entrance Exams   |
|       | <ul> <li>FASFA/Scholarships</li> </ul>   |
|       | Advocate for the use of the Educational Passport when communicating with                         |
|       | caretakers   |
| Healt | h  |
|       | Check Health Passport and advocate for youth access, if appropriate                              |
|       | Request Medical Review information   |
|       | Address sexual reproductive health needs as appropriate  |
|       | ldentify if the child is not reaching development milestones                                     |
|       | Advocate for timely and accurate medical treatment   |
|       | Identify the following medical information:  |
|       | o Diagnosis  |
|       | Medications (reasons and side effects)   |
|       | Doctor information   |
| DI    | Monitor for appropriate use of medications   |
|       | ment Advocacy  |
|       | 3  |
|       | Promote communication between parents, relatives, caregivers and caseworkers to ensure stability |
|       | Identify other placement options as needed   |
|       | Identify cultural relevance in placement decisions   |
|       | Assist older youth:  |
|       | Transitional/Independent Living  |
|       | Apply for a job  |
|       | Identify financial resources for families struggling to maintain custody of a child              |
| Legal | , 35 3 ,   |
|       | Recommend to the Court to keep Attorney Ad Litem on case   |
|       | Recommend more frequent hearings   |
|       | Advocate for children to attend court hearing when possible                                      |
|       | Advocate for the protection of a child's legal rights (e.g., financial benefits,                 |
|       | confidentiality, loss of property)   |
| Permo | anency   |
|       | Explain to youth their rights (as age appropriate) and living options                            |
|       | Explain to youth ongoing available educational, vocational and counseling services               |
|       | Walk youth through PAL process in timely manner  |
|       | Openly discuss youth's future plans  |
| Cultu |  |
|       | Advocate for appropriate religious services.   |
|       | Advocate for proper care as indicated by the needs of the culture.                               |

|       | Advoc  | ate for safe placement to allow for acceptance of sexuality or gender identity. |  |  |  |  |
|-------|--|---|--|--|--|--|
|       | Provide awareness of disproportionality and/or cultural competency as it relates to  |   |  |  |  |  |
|       | the cas  | se.   |  |  |  |  |
| Young | , Adult /  | Self-Advocacy   |  |  |  |  |
|       | Help yo  | outh build self-advocacy skills.  |  |  |  |  |
|       | Help yo  | outh practice self-advocacy through:  |  |  |  |  |
|       | 0  | CPS contact   |  |  |  |  |
|       | 0  | Circle of Support   |  |  |  |  |
|       | 0  | Participation in meetings   |  |  |  |  |
|       | 0  | Transitional planning   |  |  |  |  |
|       | Help yo  | outh understand their case and their legal rights                               |  |  |  |  |
|       | Teach  | and practice self-advocacy through mentoring and practice/role play with        |  |  |  |  |
|       | youth  |   |  |  |  |  |
|       | Suppor   | t children to attend and speaking in IEP/ARD or courtroom.                      |  |  |  |  |
|       | Act as a liaison to ensure children 16 and older are prepared for independent living |   |  |  |  |  |
|       | Act as   | liaison to help youth build their own positive support system                   |  |  |  |  |

#### **CASA Training Evaluation**

| Plea | ase circle the rating for e   |   | Date Attended: |  |  |  |  |
|------|---|---|----------------|--|--|--|--|
|      | Please circle the rating for each section:  |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
| 1.   | How would you rate the Trainer's Expertise, Clarity, Time Management, and Responsiveness? |   |                |  |  |  |  |
|      | 1 - Poor  | 2 - Fair   3 - Average   4 - Good   5 - Excellen      | t              |  |  |  |  |
| 2.   | How would you rate the structure of the training?   |   |                |  |  |  |  |
|      | 1 - Poor  | 2 - Fair   3 - Average   4 - Good   5 - Excellen      | ıt             |  |  |  |  |
| 3.   | How would you rate the e  | ffectiveness of the training materials?               |                |  |  |  |  |
|      | 1 - Poor  | 2 - Fair   3 - Average   4 - Good   5 - Excellen      | t              |  |  |  |  |
| 4.   | How would you rate this training for your level of experience as a CASA Volunteer?        |   |                |  |  |  |  |
|      | 1 - Poor  | 2 - Fair   3 - Average   4 - Good   5 - Excellen      | ıt             |  |  |  |  |
| 5.   | How would you rate the o  | verall training?                                      |                |  |  |  |  |
|      | 1 - Poor  | 2 - Fair   3 - Average   4 - Good   5 - Excellen      | t              |  |  |  |  |
| 6.   | What can be improved wi   | th regard to the structure, format, and/or materials? |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
| 7.   | What other training topics would you find useful?   |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
| 8.   | Additional Comments:  |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |
|      |   |   |                |  |  |  |  |

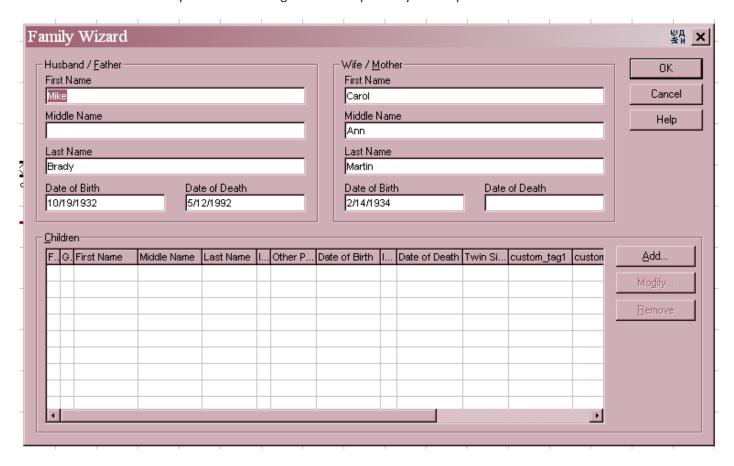
#### Collaborative Family Engagement Tools- Quick Reference

| Tool -<br>Category        | Purpose         | Description  | Tips   |
|---------------------------|-----------------|--|--|
| GenoPro                   | Searching Tool  | Genogram software that helps<br>build family trees for youth   | <ul> <li>More of an organization tool as it will not provide any additional information about the family</li> <li>Advocates can use family trees as a connection tool with youth and then transfer the information into GenoPro</li> </ul>   |
| Ancestry /<br>White Pages | Searching Tool  | Internet websites that contain obituaries, death records, census records, contact information, and more  | Contact Texas CASA for updated login information   |
| Seneca Search             | Searching Tool  | Completes a search of multiple public databases and returns a report within 1-2 business days with names and contact information of people related to the youth  | <ul> <li>Refer to the Seneca Search Guide<br/>to help you submit a Seneca<br/>Search and understand and<br/>interpret the received report</li> <li>Cost is \$25</li> </ul>   |
| My Three<br>Houses™       | Connection Tool | Identifies the aspects of a youth's life that are worries, good things, and dreams and locates them in three houses to make the issues more accessible for youth   | <ul> <li>The youth can draw three houses or the advocate can bring a printout</li> <li>The image can be adapted and updated depending on the interests of the youth (i.e. cars, horses, etc.)</li> <li>Revisit this activity during later visits</li> </ul>  |
| Eco-Maps                  | Connection Tool | Shows the complex system a person is involved with in their life and highlights with arrows the output of energy to each source, whether more energy is given, received or a reciprocal amount of energy is shared | <ul> <li>Energy can be both negative and positive</li> <li>Allow the person to create their perception of relationships first</li> <li>Create a comparison eco-map with the advocate's perspective and compare the two</li> </ul>  |
| Mobility<br>Mapping       | Connection Tool | Creates a roadmap of the<br>person's life by having them<br>draw homes, people, schools, and<br>holidays from their earliest<br>memory to present day  | <ul> <li>Can be used on both youth and caregiver</li> <li>Focus on the positive and good things in that person's life</li> <li>The person should be standing and holding the marker</li> <li>Refer to the Mobility Mapping How-To Guide for detailed instructions and specific questions to guide this activity</li> </ul> |

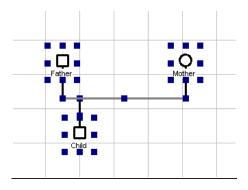


#### **GETTING STARTED**

- Open the GenoPro program on your desktop and Press "F" to open the "Family Wizard"
- Add the couple's information and then add children here by double clicking on the lines in the **"Children"** section of the Family Wizard a dialogue box will open for you to input the children's names and birth dates



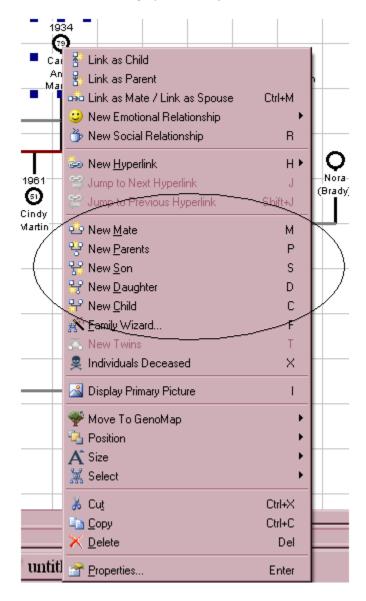
- Once you've created the family, hit enter or click "OK"; you will notice that your mouse is now dragging around the genogram - "plant" the genogram in the middle of the work area by dragging it to the spot where you want it and LEFT click once





#### **ADDING AN INDIVIDUAL**

- Hover over the individual that you want to add a person to (i.e. spouse, child, parent)
- RIGHT click on this individual and it will bring up the "People Menu" choose which individual you want to add

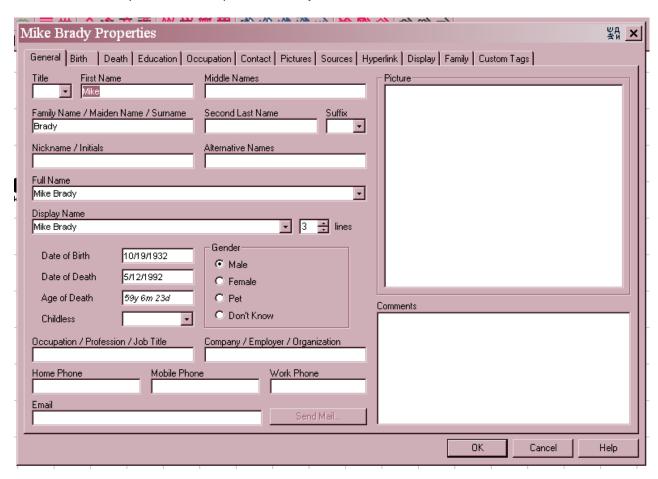


You can also choose to use the keyboard shortcuts by highlighting the relationship line and typing the corresponding letter that you see beside each option shown above (i.e. New Mate = M)



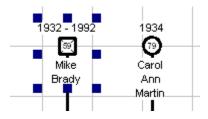
#### **EDITING AN INDIVIDUAL'S INFORMATION**

Double click on any individual to open their "Properties" box – edit the information and click "OK"



#### **CREATE A "NEW HOUSEHOLD" (illustrate who lives together)**

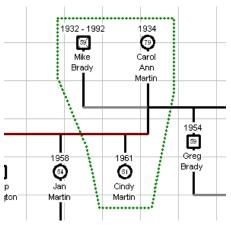
- Hold down the CTRL key and LEFT click ONCE on each individual who lives in the home to highlight them; each individual should stay highlighted – "highlighted" means you can see the little blue squares:



- Hover over any individual you have highlighted and RIGHT click once to bring up the "People Menu"
- Click on "New Household" a green line should now be drawn around those individuals that you had highlighted

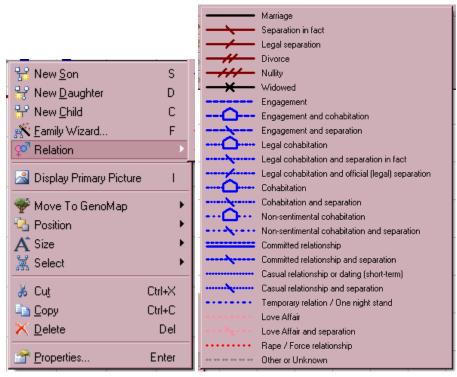


You can change the colour of this line by RIGHT clicking on top of the line, click "Properties" and change the "Line Colour" in the "Display Options" section – changing the colour is useful when you show more than one household on a genogram



## **RELATIONSHIP STATUS**

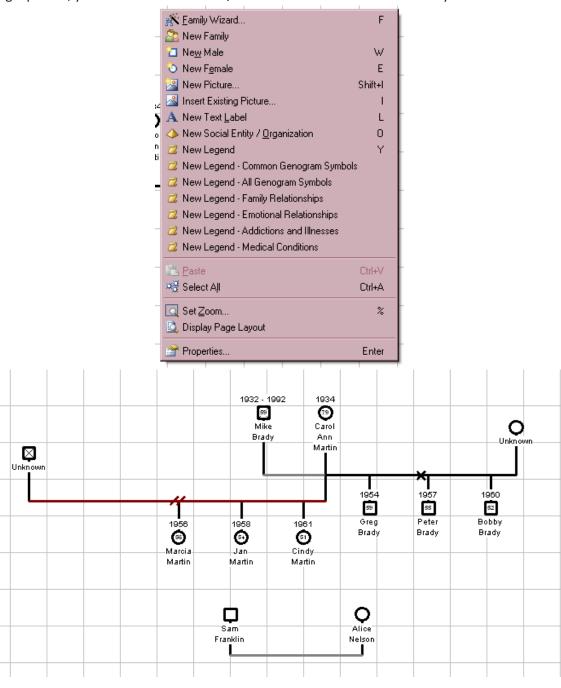
- Change a relationship status between two people by hovering over the line that connects them, RIGHT click once for the "People Menu"
- Click on "Relation" to bring up the relationship menu. ONLY CHOOSE "Marriage" OR "Divorce" for the sake of consistency across the agency.





# ADDING NON-RELATIVE INDIVIDUALS

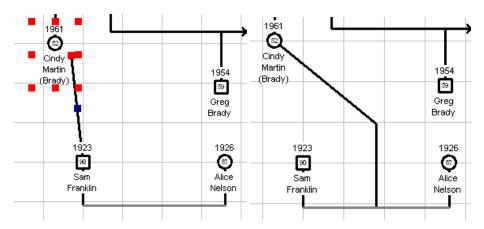
- Hover over a spot outside of the genogram and RIGHT click to bring up the menu **OR** if it is a couple, type **"F"** to bring up the "Family Wizard" like you did in the beginning and then plant it after filling in the information
- If it is a single person, you can add a "New Male/Female" rather than use the "Family Wizard"



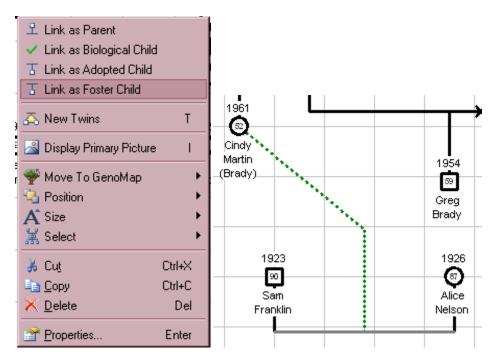


# **CONNECTING AS A FOSTER/ADOPTED CHILD**

- Once you have added the caregivers to the genogram (See section above entitled "ADDING NON-RELATIVE INDIVIDUALS") RIGHT click on one of the caregivers to bring up the "People Menu"
- Click on "Link as Parent" and a line will appear that you now use to connect that caregiver to the specific child on the genogram
- Once the red squares appear, click ONCE to make the connection it should appear as follows:



- Hover over the line that now connects the child to the caregiver and RIGHT click to bring up the menu pictured below and choose the appropriate "Link":





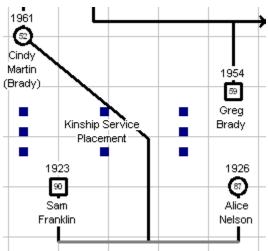
#### **CONNECTING AS KINSHIP CAREGIVER**

- Follow the same instructions as above except **DO NOT** change the "Link" – instead you are going to insert a text box – if the Kin is a blood relative, you need to connect them to the person that they are related to in the genogram

# **HOW TO INSERT A TEXT BOX**

- Click on the "A" on the tool bar and then move your mouse down to the spot where the line connects the child to the Kin Caregivers – you will notice that a text box appears after you leave the tool bar area



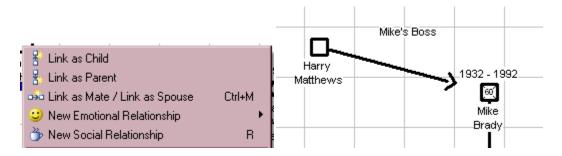


- In order to change the text, you DOUBLE click on the words "Text Label" and it opens the "Label Properties" box; you can then type whatever information you want to appear on the genogram (i.e. Kinship Service Placement, Maternal family friend)
- You can also use this to add anyone who is significant in a family's life/community to illustrate connections



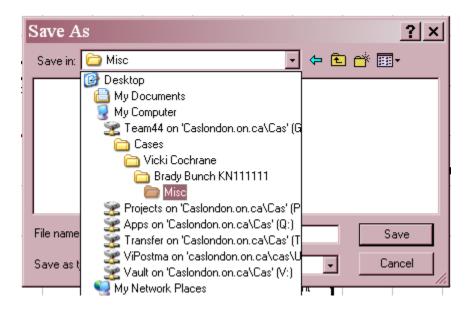
#### LINKING A NON-RELATIVE TO SHOW THE RELATIONSHIP CONNECTION

- Once you have added a person or family to the genogram (See section above entitled "ADDING NON-RELATIVE INDIVIDUALS") RIGHT click on the new person to bring up the "People Menu"
- Select "New Social Relationship" and you will now have a line that you can use to connect to the non-relative once you see the little red squares, click once to make the connection be careful not to click too many times or you will plant the line in many places rather than directly to the individual if this happens, you can do one of two things hit ESC to cancel the whole line, or just plant the line, click on it and hit delete when you see that it is highlighted; then start the process over again.
- Use a **TEXT BOX** to describe the relationship (i.e. "Mike's Boss")



#### **HOW TO SAVE THE GENOGRAM**

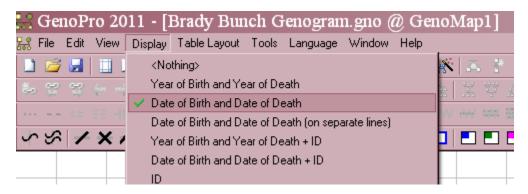
- Genograms should be saved as the family's last name and version # (i.e. Brady Version 1); any time you make changes to the genogram you need to change the version # to illustrate that it is a new version
- "SAVE AS" in your "Team # Directory" (known as your Team's "G Drive", in the "Cases" file, in the "Worker" file, in the "Family" file, in the "Misc" file





# **REMINDERS**

- HOVER over the item you want to work on and RIGHT click for menus
- Little blue squares indicate that something is highlighted
- You can highlight any area of the genogram by holding down the LEFT button of the mouse and dragging the cursor over the area you want highlighted (everything should be captured in a square) these items can then be moved, enlarged or changes made to all highlighted items at once
- You can also highlight any area by holding the "CTRL" button and clicking on the items you want highlighted
- AUTO ARRANGE is the lightening bolt button in the tool bar only use it when building a basic genogram
- **UNDO** is the little blue arrow in the toolbar at the top it is your best friend if you've made a mistake
- **DISPLAY DOB** change the setting of how DOB is displayed by going to the menu and selecting the Date of Birth and Death rather than just the year default is the year only but we should be displaying the full DOB



If you have any difficulties, feel free to contact me with questions: VICKI COCHRANE X230

# Seneca Search Guide

A Seneca Search is an online tool that searches various databases and produces a summarized report of information for the person that was searched, in a timely and thorough way. Seneca Searches are best conducted on an adult from each side of the young person's family. The goal of the search is to find names, addresses and contact information for possible adults connected to the person searched, and therefore the young person. Often a Seneca Search is run on a parent or grandparent, but can be run on any adult over the age 18 (the older the better!)

To complete a search, fill out the form at the link below and provide as much of the following identifying information as you have:

| First and Last Name | <ul> <li>Social Security Number<br/>(as many digits as possible)</li> </ul> | • Date of Birth          |
|---------------------|---|--------------------------|
| https://online.sene | cacenter.org/WWW/Public/FamilyF   | Finding/RequestForm.aspx |

| Key Terms              | Definition  |
|------------------------|---|
| 1 <sup>st</sup> Degree | Shared an address and a last name with subject (person searched)                      |
| 2 <sup>nd</sup> Degree | Shared an address and a last name with a 1 <sup>st</sup> Degree Connection of subject |
| 3 <sup>rd</sup> Degree | Shared an address and a last name with a 2 <sup>nd</sup> Degree Connection of subject |
| Associate              | Shared addresses with subject, but not a last name                                    |

**Tip**: A  $1^{st}$  Degree Connection and Associate Connection shared an address with the subject; therefore begin by looking at these people. A  $2^{nd}$  and  $3^{rd}$  Degree Connection could be family members but are further degrees of separation away from the subject.

You want to find people who share multiple addresses across time as the subject because that indicates they may be more likely to be family members or connected to the child. You can do this quickly by looking at the past addresses of the subject and pressing "ctrl" and "f" on your keyboard. Type each individual address and press enter to find other places within the report that the address is listed. Make note of each connection who has also resided at this address. Go through your notes and mark the people who are listed more than once as these people are more likely to be kin or fictive kin.

#### Helpful Tips

- Only people 18+ will show up on the Seneca Search
- Address History goes back approximately 20 years
- Show 'Family Connections Chart' to adults involved in the case and/or child to identify if they know any of the connections listed and can provide more information
- Utilize the 'Social Media Networks' and additional search tools to locate, contact, and search for family members
- (PT), (MT), (CT), and (ET) indicate the time zone a phone number is in
- Phone numbers listed are current for the resident who lives at that address now

| House of worries<br>(What are we worried about)       |  |
|---|--|
| <b>House of good things</b><br>(What is working well) |  |
| <b>House of dreams</b><br>(What needs to happen)      |  |

# Creating an Ecomap

#### **Practice:**

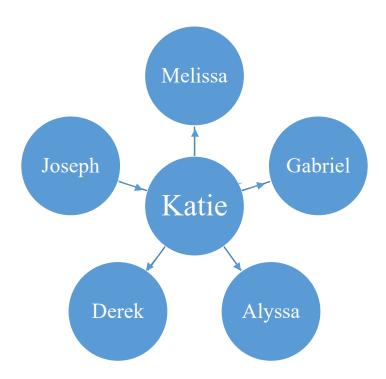
An ecomap is a family system's tool which demonstrates and highlights the differing areas and connections (relationships, involvements, activities, realms) of an individual's life, and their dynamic energy flow or reciprocity.

#### How To:

You can create the below diagram in a Word document by following these instructions: Insert, Smart Art, Relationship, Basic Radial. The default includes 4 relationships but you can add more from the text box. You can also hand draw the radicals on a piece of paper. Share a blank ecomap with the person you'd like to map, and have them complete it, with your assistance.

#### **Questions to Ask:**

- Who is important in your life? Who do you spend most of your time with? What groups, activities, or memberships do you hold or belong to? Areas to explore are employment, family, friends, religious, school, sports, religious groups, neighbors etc.
- Note areas of life and breaking them down into specific relationships (i.e. you've noted your work here, is there anyone at work that you talk to on your breaks? Etc.)
- Do you give (arrow away from person) or receive (arrow towards person) more energy from each of the various people in your life? (Arrow in both directions represents a reciprocal relationship.)



In the above sample Katie has a relationship with each of the five people surrounding her in the diagram. Katie is giving more energy than she is receiving to Melissa, Derek and Alyssa. These may be Katie's children. Katie is receiving more energy than she is giving to Joseph. This may be Katie's caseworker or a relative helping her. Katie and Gabriel have a reciprocal relationship of energy shared. This may be a coworker or friend.



# **Mobility Mapping Questions: How to Guide**

# **HOW TO START**

Prepare the child by saying things like: "We are going to have a lot of fun today and draw a big picture of the story of your life. We are only going to focus on positive memories and you can skip over any negative memories or negative times in your life. I want to be able to remember all of the things you tell me so I may go back and ask you questions or write some notes. Does that sound ok to you?"

Remember to be patient and encourage the child to draw the pictures. The act of drawing is what triggers the deep layers of the brain where memories are stored. You can start with the questions below to help you get the conversation started.

Use these questions as a guide to help you get started or stay on track during mobility mappings. These questions are not all inclusive as each child will require individualized attention and guidance to successfully complete a mobility mapping.





# **QUESTIONS**

- 1. Think back as far as you can in your life. Where was the first place you remember living?
- 2. What did it look like? Can you draw it for me?
- 3. How old were you when you lived there?
- 4. Who lived there with you?
- 5. Can you draw them for me?
- 6. What were their names?
- 7. How old were they?
- 8. Do you remember your neighbors?
- 9. Can you draw their houses?
- 10. What were their names?
- 11. Did you know them well?
- 12. What school did you go to?
- 13. Did you ride the bus?
- 14. Did you have a favorite teacher?
- 15. What was their name?
- 16. Can you draw the school and your teacher in it?
- 17. How about a favorite coach?
- 18. Did you go to church?
- 19. Can you draw the church?
- 20. What did you do for fun when you lived here?
- 21. Did anyone come to visit often?
- 22. Do you go visit anyone?
- 23. Where did you live next?
- 24. How old where you when you moved?
- 25. Who lived with you in this place?
- 26. Draw them and the house and how old they were.
- 27. Repeat this until present day.





# **OTHER CLARIFYING QUESTIONS**

- 1. Ask who in the family would know relatives last names?
- 2. Who coordinated family reunions?
- 3. Ask about foods eaten and accents.
- 4. Land marks and street names.
- 5. Size of family to their knowledge?
- 6. Fun memories or stories
- 7. Ask about their social sites (facebook, myspace, cell phone number).

# **SAFETY CONVERSATION**

- 1. Ask them to go back with a different color marker and put a mark next to the people that they feel safe with.
- 2. Ask them to repeat this with a different color mark and mark the people they do NOT feel safe with.
- 3. Ask them to identify the people from the safe list that they would want to reconnect with.

# **NEEDS**

Question to ask: "What five things are missing in your life right now? They can be people, places, things, or unanswered questions."

- 1. Ask them to identify their top 5 needs
- 2. Ask them to place a number next to the need in order of importance with 1 being the most important and 5 the least important.

# REMEMBER TOENCOURAGE OFTEN AND TO REDIRECT AWAY FROM NEGATIVE MEMORIES

In 2011, Kids Central was funded in part by the Children's Bureau/Administration for Children & Families/Health & Human Services for the following projects: Grant # 90-CF-0026 Family Finding



# $\begin{array}{c} {\bf Transitional\ Living\ Worksheet} \\ {\it For\ Youth} \end{array}$

# ${\bf Important\ Phone\ Numbers:}$

| 0      | My CPS Case Worker:                  |
|--------|--------------------------------------|
| 0      | My Ad Litem:                         |
| 0      | My PAL Worker:                       |
| 0      | My CASA:                             |
| 0      | Healthy Connection (Adult):          |
| 0      | Healthy Connection (Adult):          |
| Housi  | ing Needs:                           |
| 0      | Who will I live with:                |
| 0      | Where will I live:                   |
| 0      | Phone Number where I can be reached: |
| Famil  | y Connections:                       |
| 0      | I have contact with family:          |
| 0      | I would like contact with:           |
| 0      | Fictive kin? (friends of family)     |
| 0      | I need help finding family: Who?     |
| Life S | skills:                              |
| 0      | Employment:                          |
| 0      | Budget:                              |
| 0      | Cooking:                             |
| Gene   | ral:                                 |
| 0      | Original Birth Certificate           |
| 0      | Original Social Security Card        |
| 0      | TX ID                                |
| 0      | Shot Records                         |

| 0     | Graduation Plan/Diploma/GED and Date:                     |
|-------|---|
| 0     | Passed STAAR:   |
| 0     | ACT, SAT Scores:  |
| 0     | Transcripts:  |
| 0     | College plans (financial aid etc):                        |
| 0     | Educational Binder:                                       |
| Medic | al Needs:   |
| 0     | My Diagnosis:   |
| 0     | My Medications:   |
| 0     | My Doctor:  |
| 0     | Name and number of place to get my meds filled:           |
| 0     | My Doctor Phone Number:                                   |
| 0     | My Dentist:   |
| 0     | My Dentist Phone Number:                                  |
| 0     | Transitional Medicaid prior to dismissing youth from care |
|       | o I need help setting this up:                            |
| Menta | ıl Health:  |
| 0     | Current Mental Health Diagnosis:                          |
| 0     | Medications:  |
| 0     | Prescribing Physician:                                    |
| 0     | Name and number of place to get my meds filled:           |
| 0     | Name and number of my therapist:                          |
|       |   |

# $\begin{array}{c} {\bf Transitional\ Living\ Worksheet} \\ {\it For\ Volunteers} \end{array}$

# **Family Connections:**

| 0    | Have you created a Family Tree, Connectedness Map?                                   |
|------|--|
| 0    | Does the youth have a life book?   |
| 0    | Have you found positive family connections?  |
| PAL  |  |
| 0    | PAL Completed Date:  |
| 0    | Circle (s) of Support Date(s):   |
| 0    | Met the PAL Worker:  |
| Ment | al Retardation/Disability:   |
| 0    | Set up Transitional Medicaid prior to dismissing youth from care                     |
| 0    | Referral to DADS or DARS to prepare for Adult Services                               |
| 0    | Living Options as an adult   |
| 0    | Date of Most Recent Psychiatric Evaluation   |
| 0    | Does Youth Receive SSI for Mental Health Diagnosis                                   |
| 0    | Is There An Application for Adult SSI (This must be done 4-6 months prior to turning |
|      | 18)  |
|      |  |
|      | Designated Payer   |

| 1 | PMC        |
|---|------------|
|   | CASA COURT |
|   | URT INF    |
|   | ORMATIO    |
|   | Z          |

| Type When              | When                        | Reason/Goal  | What To Do Before This Hearing  | What To Do After This Hearing  |
|------------------------|-----------------------------|--|---|--|
| Trial on the<br>Merits | Day 365                     | The final permanency plan will be ordered.  Several Options:  Reunification: A child returns to parent.        | All: Prepare for court with abbreviated notes, particularly for a jury trial. All notes taken to the stand can be subpoenaed as | If Reunification: CASA will be dismissed-CASA takes a new case!                                |
|                        |                             | parent's compliance with plan.  One-Time Six Month Extension: The judge may grant a six month extension due to | Presentation of Mediated Settlement: If an agreement was made in mediation, all parties stand and present agreement             | decrease over time to allow family to settle into permanency.                                  |
|                        |                             | extraordinary circumstances.  Termination, state retains PMC: A child  | to the judge.  Informal Hearing: If requesting  | <b>If Extension:</b> Continue to work case as in second permanency.                            |
|                        |                             | may be in a potential adoptive home already, waiting the six month period or the child is                      | extension, or case is going as planned and all parties agree, all will stand for an   | If Termination: Continue to visit child in   |
|                        |                             | in foster care and adoption will be pursued.  Termination, parent retains PMC:                                 | informal hearing to determine next steps. <b>Bench Trial:</b> If parties disagree, but  | placement. If in their adoptive home, decrease visits over time to allow family to settle into |
|                        |                             | (only happens in very special circumstances)   | parent has waved right, or missed the   | permanency. If no adoptive home, continue to   |
|                        |                             | If parents retain custody, the child is not  | deadline to file, for a jury trial.   | participate in case staffings to find adoptive   |
|                        |                             | Without Termination, relative retains  | has requested a jury trial.   |  |
|                        |                             | FMC: Family gains guardianship of a child  |   |  |
|                        |                             | and may qualify for Permanency Care Assistance (PCA) which includes monthly                                    |   |  |
| Permanency             | Only if CPS is              | financial help and health care coverage.  To status check the child and their overall                          | All: Prepare court report   | CASA Staff: Communicate with CASA, pass  |
| Review                 | awarded PMC,                | development and profess to continue to   | CASA Staff: Communicate with CASA and   | information from Department and other  |
| Hearings               | every 180 days              | work to find adoptive parents.   | share information. <b>CASA Volunteer:</b> Continue to monitor   | sources as it comes in. <b>CASA Volunteer:</b> Ensure minimum level of                         |
|                        |                             |  | the situation for best interest and   | service is completed. Visit children in  |
|                        |                             |  | permanency. Review therapist's notes, other documentation to ensure all   | placement at least quarterly. Fill out monthly   |
|                        |                             |  | obstacles to permanency are being   | Q  |
| Motion                 | Brought by a                | Refer to the Motion filed by the attorney  | <b>CASA Staff:</b> Receive motion paperwork   | CASA Staff: Receive order and distribute to  |
|                        | party when a                | requesting the setting. The motion is specific   | and notify the volunteer.   | CASA Volunteer.  |
|                        | special                     | to the circumstances of the case. Generally  | <b>CASA Volunteer:</b> Consider the motion  | CASA Volunteer: Ensure minimum level of  |
|                        | circumstance                | involves asking for a child to be moved, or to   | request and staff with your supervisor  | service is completed each month. Visit children in placement and for at school and supervised  |
|                        | hearing sooner              | disagreement.  |   | visits. Fill out monthly time sheets, case logs  |
|                        | than scheduled              |  |   | and travel.  |
| Progress               | Ordered by the judge when a | Usually the judge will order a progress hearing from the bench during a scheduled                              | <b>CASA Staff:</b> Prepare Progress Report template and send to volunteer.  | <b>CASA Staff:</b> Receive order and distribute to CASA Volunteer.                             |
|                        | special                     | hearing. If major changes in the case  | CASA Volunteer: Prepare the report and  | CASA Volunteer: Ensure minimum level of  |
|                        | circumstance                | (placement change, parent move, etc.) are  | return for editing/distribution. Consider   | service is completed each month. Visit children  |
|                        | requires a                  | occurring the judge may want all to come   | the finder called the hearing when  | in placement and/or at school and supervised   |
|                        | than scheduled              | The progress hearing will usually address  | preparing the report.   | and travel.  |

# PMC MEETINGS AND SERVICES

members to develop a plan for the child and family. Aimed to address specific concerns and ensure that the child is cared for and protected from Family Group Conference (FGC) - Meeting help by CPS at family's request. The youth's family joins with relatives, friends, and community

**Permanency Conference (PC)** - Meeting held by CPS that is an alternative to a FGC. Aimed to develop or review the youth's permanency plan, develop or review the family service plan, resolve barriers to achieving permanency living arrangement, and developing and reviewing the transition plan for youth age 14 and 15.

substitute care to adulthood, and connect with supportive and caring adults who can help the youth after they leave substitute care. Once the youth turns 14 they can call a meeting with people they identify as caring adults in their support system to develop and review their transition plan. This meeting covers topics such as the youth's hopes and dreams, goals, strengths, concerns, education, employment, health and mental health, a long-Circles of Support (COS) - Meeting held by CPS that is driven by the youth. Aimed to help develop a transition plan for the youth moving from term housing plan, personal and community connection, and PAL services. **Fransition Plan Meeting (TPM)** - Meeting help by CPS that is an alternative to a COS. Aimed to help develop a transition plan for the youth moving outh turns 14 they can call a meeting with people they identify as caring adults in their support system to develop and review their transition plan. from substitute care to adulthood, and connect with supportive and caring adults who can help the youth after they leave substitute care. Once the The primary purpose mirrors that of a COS although this meeting tends to be shorter and more DFPS-driven, with fewer participants than a COS. Preparation for Adult Living (PAL) Services - Helps older foster youth prepare for their transition to a successful adulthood. Aimed at youth ages 16-21 to increase their self-sufficiency and productivity. The PAL program consists of the following services:

- Life Skills Assessment
  - Life Skills Training
- Health and Safety
- Housing and Transportation
- Job Readiness 0
- Financial Management 0
- Life Decisions and Responsibilities 0
- Personal and Social Relationships
- Educational and Vocational Services
- Case Management

- Supportive Services
- Vocational Assessment / Training
- Prep for College Entrance 0
- Driver's Education 0
- High School Expenses Counseling 0 0
  - Documents 0
- Volunteer Mentoring
- Transitional Living Allowance
- Room and Board Assistance

# LGBTQ Youth in Foster Care

LGBTQ youth represent approximately 20% of youth in foster care and are placed in group homes at a higher rater than their non-LGBTQ peers.

LGBTQ are overrepresented in foster care with 20% of the youth in foster care identifying as LGBTQ compared to 7% of the general youth population. As many as 56% of LGBTQ youth in foster care spent time homeless because they felt safer on the streets than in their group or foster home.

LGBTQ youth in foster care are 3x more likely to use illicit drugs, 6x more likely to experience levels of depression, 8x more likely to attempt suicide.

# Tips for Advocacy:

Educate yourself on LGBTQ topics and terms.

Know and use affirmative language.

Allow youth to self-identify and believe them.

Be aware and intentional.

Identify local groups that help LGBTQ youth have a sense of normalcy:

Gay Straight Alliance - GSA

Check to see if your LGBTQ youth has a GSA group in their high school

Parents, Families and Friends of Lesbians and Gays - PFLAG

A national support group for those who identify as LGBTQ as well as their families, friends, and loved ones.

# Casey Family Programs Permanency Scale

# **Permanency Achieved**

Child has legal permanency (adoption, legal guardianship, or reunification with no further state/county involvement only; does not include emancipation).

# **Very Good Permanency Status**

Child is in a family setting that the child, caregivers and casework team believe is lifelong (adoption/guardianship/reunification issues resolved)

– OR –

Child is in a stable living situation with own parents (not a trial visit) and identified safety risks have been eliminated (but child welfare agency still has custody).

## **Good Permanency Status**

Child is in a family setting that the child, caregivers and casework team believe is lifelong; a plan is in place to ensure safety and stability have been achieved; the child, if old enough, and the caregiver(s) are committed to the plan; and adoption/guardianship/reunification issues, if any, are near resolution.

## **Fair Permanency Status**

Child is in a family setting that the child, caregivers and casework team believe could endure lifelong; a plan is in place to ensure safety and stability are being achieved, and the child, if old enough, and the caregiver(s) are committed to the plan; and adoption/guardianship/reunification issues, if any, are being addressed (may include long-term foster care);

- OR -

Child is in temporary placement, but transition is planned and child is ready to move to identified safe, appropriate, permanent home that the child, caregivers and casework team believe could endure lifelong; a child and family plan for safety and permanency is being implemented; and the child, if old enough, and caregiver(s) are committed to the plan.

#### **Marginal Permanency Status**

Child is in a family setting that the child, caregivers and casework team believe could endure lifelong, and they are developing a plan to achieve safety and stability;

- OR -

Child is in a temporary placement, and likelihood of reunification or permanent home is uncertain; adoption/guardianship issues are being assessed; and concurrent permanency plan(s), if any, are uncertain or problematic.

#### **Poor Permanency Status**

Child is living in a home that is not likely to endure or is moving from home to home or is on runaway status due to safety and stability problems, failure to resolve adoption/guardianship issues, or because the home is unacceptable to the child

- OR -

Child remains in temporary placement\* without a realistic or achievable permanency plan; concurrent permanency plan(s), if any, have stalled or failed.

#### GLOSSARY

**24 Hour Safety Assessment** – A checklist that helps workers identify danger indicators that pose immediate harm to a child, gives them more confidence in their decisions, looks at strengths and protective factors/actions; what can safety network do to help, how can safety be addressed in their own home? Meant to allow more time to get to know the family rather than needing to make this safety decision in the assessment, provides a universal language across the state, and part of the structured decision making package. (For CFE, we ask some of these same questions: what can the safety network do, look to the strengths of the family, identify potential of family to care for their own).

**Admission, Review & Dismissal (ARD)** – The name of a committee responsible for making educational decisions for a student in a special education program.

**Adversary Hearing** – A hearing in which two or more parties are in opposition; a contested hearing. This hearing is held 14 days after the emergency hearing. Evidence must be presented to establish that there is a continuing danger to the physical health or safety of the child and that release to the parents would not be in the best interest of the child.

**Attachment** - An emotional and psychological connection between two people that permits them to have significance to each other.

**Attorney ad Litem (AAL)** – An attorney who represents the interests of a minor or a parent entitled to a court-appointed attorney in a termination action.

**Attorney General (AG)** – The AG serves as the chief legal advisor and chief law enforcement officer for the state government. The AG's office is a good resource for issues surrounding child support.

**Baby Moses Cases** - An abandoned child younger than 60 days old who was dropped off at a designated emergency infant care provider by the presumed parent. The case can proceed without notifying relatives and if they come forward, they need to intervene in court. However, you do need to notify the father if it is known who he is.

**Child Placement Resource Form** – A form CPS asks parents to complete when a child is removed from their care to identify potential caregivers the child knows.

**Child Protective Services (CPS)** – CPS is a division of DFPS that investigates reports of abuse and neglect of children. CPS also provides services to children and families; contracts with other agencies to provide clients with specialized services; places children in foster care; provides services to help youth in foster care make the transition to adulthood; and places children in adoptive homes.

**Circle of Support**- A youth-driven process to help youth plan for their future as they leave state care and begin adulthood.

**Conservatorship Worker (CVSW)** – A CPS caseworker who monitors children's care while they are in CPS conservatorship.

**Danger Indicators** – The behaviors or conditions that describe a child in imminent danger or serious harm, and part of the structured decision making package.

**Department of Family and Protective Services (DFPS)** – DFPS is divided into Adult Protective Services, Child-Protective Services, Child-Care Licensing, and Prevention and Early Intervention. DFPS's mission is to protect children, the elderly, and people with disabilities from abuse, neglect, and exploitation by working with clients, families, and communities.

**Due Diligence** - Within 30 days of removal of child, maternal and paternal relatives to the 3<sup>rd</sup> degree of consanguinity must be given notice, as well as any relatives or fictive kin identified as a placement option, regardless of relation (don't need to provide notice to relatives through marriage, those with a criminal or violent history, or those who were served in relation to the removal).

**Education and Training Vouchers (ETV)** – A transitional service for PMC youth, may be eligible up to \$5,000 per year.

**Education Portfolio** – The collection of records and information about a student's school enrollment, attendance, academic performance, special needs or services, discharge, and any other pertinent information needed by the school district to best educate and serve the child.

Ex Parte Hearing – Literally meaning "only side only," usually refers to a hearing which is held in an emergency within 24 hours of the removal of a child from their home and in which only one side of the controversy is seeking judicial relief without giving notice to opposing parties.

**Extended Foster Care Program** – A voluntary program that offers young adults age 18 to 22 in DFPS care opportunities to continue foster care placement and facilitate transition to independence with DFPS supervision, if there is an available placement.

**Family Based Safety Services (FBSS)** – Intensive, short-term service delivery programs that provide family therapy and skills education/training and help families obtain basic services, such as food and housing, to prevent removal of the children from the home and keep the family together.

Family Plan of Service & Child Plan of Service (FPOS/CPOS) – A FPOS and CPOS is an action plan that is completed with and for individuals involved in CPS care. Both need to be updated when a child has been in care after five months, nine months and every six months thereafter; If the child is in temporary managing conservatorship (TMC), the caseworker must review the plan during the fifth month and ninth month from the date of the initial plan and then every four months thereafter. CPOS does NOT qualify that relationships with extended family/connections should be written about. All caregivers should have opportunity to participate in the plan, including incarcerated parents.

**Family Team Meeting (FTM)** – A gathering of family members, fictive kin, friends, and other invested stakeholders at the earliest stages of CPS involvement who join together to identify strengths of a family and provide a protection and care plan for the child to achieve safety, permanency and well-being.

Foster Care Redesign – A new way of providing foster care services by relying on one single contractor. Principles include: children should be placed in their home communities, connections to family and other important people are maintained while in care, children should be placed with siblings, workers should express a respect for children's culture, and children are part of the decision making and planning process.

**Foster Home (FH)** - A foster home is one of four foster care settings where up to six foster children can be placed.

**Green Binder** – See Education Portfolio.

**Guardian ad Litem (GAL)** - The person appointed by the court to look out for the best interest of the child during the course of legal proceedings (usually CASA advocate).

**Health Passport** – An electronic file that maintains records on medical appointments, immunizations, prescriptions, and other records pertinent to understanding and tracking a child's medical history.

**Holley Factors** – During the Holley v. Adams Case, the Texas Supreme Court provided a nonexclusive list of nine factors to consider in determining the best interest of the child.

**HSEGH Report**- A Health/Social/Educational and Genetic History kept by CPS, similar to a social history.

**IMPACT**- Information Management Protecting Adults and Children in Texas; a case-management computer application used by DFPS staff.

**Initial Permanency Hearing-** A hearing held no longer than 180 days after the court renders a temporary order appointing the department as TMC to review the status of, and permanency plan for, the child to ensure that a final order consistent with that permanency plan is rendered before the date for dismissal of the suit.

**Insecure Attachment-** Children do NOT trust attachment figures to provide receptive, consistent or sensitive caregiving.

**Kin Home Assessment**- The use of home study tools for the evaluation of prospective caregivers must be completed within 15 days if identified at a FGC or 30 days if identified at any other time.

**Legal Risk Placements-** The placing of a child who is not yet legally free for adoption (but likely to be at some future time) with a family who agrees to serve as a foster placement for the time being and an adoptive family should that possibility occur.

**Level of Care (LOC)** – There are four service levels that meet the needs of children in foster care including: Basic, Moderate, Specialized, and Intense.

**Managing Conservator** – A person or an agency that has the right to the physical possession of a child, the right to establish the child's domicile, the right to consent to treatment for the child and to receive child support, and the duty to care for the child. Commonly referred to as having "custody" of a child.

**Permanency Roundtable-** An internal case consultation attended by CPS permanency experts who come together in a structured and supportive meeting to develop a child specific permanency action plan.

# Permanent Managing Conservatorship (PMC)

Without termination – Custody of a child is given to DFPS, a relative, or other party, but the parent's rights are not terminated. In this situation, the parents may retain visitation privileges or other rights decided by the court. A child in this type of custody is not free for adoption.

With termination – Custody of a child with all rights of both parents terminated for all time. A child in this type of conservatorship is free for adoption.

**Positive Permanency**- There are 3 positive permanency options: 1) reunification, 2) adoption, 3) custody with a caring adult. Ageing out of foster care is not permanency. Positive permanency must become the main goal and work for all children in care.

**Possessory Conservator** - A person who has the right to visit and have access to a child, subject to court imposed restrictions. The court must appoint a parent as a possessory conservator unless it makes a specific finding that such appointment would not be in the best interest of the child and that parental possession or access would endanger the physical or emotional welfare of the child.

**Preparation for Adult Living (PAL)** - The PAL program was designed to ensure that older youth in substitute care are prepared for their inevitable departure from the Texas Department of Family and Protective Services' care and support by providing each of these youth with skills and resources they will need to be healthy, productive adults.

**Priority 1** - Intake reports that concern children who appear to face an immediate risk of abuse or neglect that could result in death or serious harm require a response within 24 hours.

**Priority 2** - Intake reports that contain allegations of abuse or neglect in which there does NOT appear to be an immediate threat of serious harm or death require a response within 72 hours.

**Reason to Believe (RTB)** - Based on preponderance of evidence, child maltreatment did occur.

**Refusal to Assume Parental Responsibility (RAPR)** - The person responsible for a child's care, custody, or welfare fails to permit the child to return to home without arranging for the necessary care of the child after the child has been absent from the home for any reason, including having been in residential placement or having run away.

**Relative and Other Designated Caregiver Assistance Program (RODCAP)** - A support program and process to allow financial assistance for kinship caregivers.

**Residential Treatment Center (RTC)** - A RTC is a live-in health care facility providing therapy for substance abuse, mental illness or other behavioral problems.

**Resilience-** The ability to rise above or adapt despite struggle and hardships such as poverty, abuse, unhappy homes, parental loss, or disabilities.

**Secure Attachment**- Children trust attachment figures to provide receptive, consistent and sensitive caregiving.

**Service Levels**- The statewide system for classifying the service level needs of children for them to be matched in an appropriate foster home (basic, moderate, specialized (24 hr. supervision), and intense levels). Placement is always preferable in a family setting.

**Service Plan-** to be completed within 45 days after TMC obtained. Not just tasks to be done but demonstration of change to address the safety issues

**Status Hearing-** Mandatory hearing at 60 days to review the child's status, the permanency plan for the child and the family's service plan as well as other court ordered services or actions.

**Structured Decision Making (SDM) Model**- The SDM model for child protection assists agencies and workers in meeting their goals to promote the ongoing safety and well-being of children. The model consists of several assessments that work to reduce subsequent harm to children and expedite permanency: intake assessment, safety assessment, risk assessment, family strengths and needs assessment, risk reassessment, and reunification assessment.

**Subsequent Permanency Hearings**- Hearings held no longer than every 180 days after initial permanency hearing until entry of a final order.

**Supervised Independent Living (SIL)-** A placement setting and living arrangement offered through the Extended Foster Care program that allows young adults to reside in a less restrictive, nontraditional foster care setting while continuing to receive casework and support services to become independent and self-sufficient.

**Temporary Managing Conservatorship (TMC)** – TMC occurs when a child is removed from their home and CPS has temporary custody of a child until the Final Hearing or an order of dismissal from the court.

**Termination of Parental Rights (TPR)** – The severing of all relationship between the parent and child. It divests the parents and child of all legal rights, privileges, duties, and powers with respect to each other, except the right of the child to inherit through the parents.

**Texas Family Code -** Chapters 261-266 of the Texas Family Code are the legal basis for providing child protective services; there is coordination between the family court, juvenile court and educational systems.

**Texas Rules of Civil Procedures (TRCP)** - The TRCP is a set of rules to obtain a just, fair, equitable and impartial adjudication of the rights of all people involved in a lawsuit. It states an affidavit must be completed upon conservatorship.

**Transformation** - A bottom-up initiative to improve the workplace for CPS and get better outcomes for staff and clients; more discretion and decision making authority to the worker and supervisor (i.e. Now have 7 days to document contact with clients instead of 24 hours), intention is to free time up to allow more time with families.

**Trial on the Merits** – Another term used for a Termination of Parental Rights hearing.

