# TITLE 89: SOCIAL SERVICES CHAPTER III: DEPARTMENT OF CHILDREN AND FAMILY SERVICES SUBCHAPTER a: SERVICE DELIVERY

### PART 315 PERMANENCY PLANNING

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### SUBPART A: PRINCIPLES OF PERMANENCY PLANNING

### Section 315.10 Purpose

The purpose of this Part is to explain the principles and standards around which the Department centers its permanency planning and decision making for children and families when children must be placed apart from their families.

### **Section 315.20 Definitions**

"Administrative case review" means a review of permanency planning open to the participation of the parents of the child, conducted by a person who is not responsible for the case management of, or the delivery of services to, either the child or the parents who are the subjects of the review. (See 42 USC 675(6).) The administrative case review is also open to the participation of other professionals involved in assessing or treating the child, any legal representative of the parent or child, and the foster parents as specified in 89 Ill. Adm. Code 316 (Administrative Case Reviews and Court Hearings).

"Best interest of the child", defined in the Juvenile Court Act of 1987, means consideration of the following factors:

the physical safety and welfare of the child, including food, shelter, health, and clothing;

the development of the child's identity;

the child's background and ties, including familial and religious;

the child's sense of attachments, including:

where the child actually feels love, attachment, and a sense of being valued (as opposed to where adults believe the child should feel such love, attachment, and a sense of being valued);

the child's sense of security;

the child's sense of familiarity;

continuity of affection for the child;

the least disruptive placement alternative for the child;

the child's wishes and long-term goals;

the child's community ties, including church, school, and friends;

the child's need for permanence, which includes the child's need for stability and continuity of relationships with parent figures and with siblings and other relatives;

the uniqueness of every family and child;

the risks attendant to entering and being in substitute care; and

the preferences of the persons available to care for the child. [705 ILCS 405/1-3]

"Children for whom the Department is legally responsible" means children for whom the Department has temporary protective custody, custody or guardianship via court order, or children whose parents have signed an adoptive surrender or voluntary placement agreement with the Department.

"Client service plan" means a written plan on a form prescribed by the Department that guides all participants in the plan of intervention toward the permanency goals for the children.

"Concurrent planning" means a process whereby the Department or its service provider works toward family reunification with a family whose children has been removed from the home while, at the same time, developing an alternative plan, if reunification with the family cannot be attained.

"Contact between siblings" means contact between or among siblings who are residing apart from one another, and may include, but is not limited to: telephone calls; video conferencing; in person visitation; sending/receiving cards, letters, emails, text messages, gifts, etc.; sharing photographs or information; use of any approved social media (e.g., Facebook); and any other agreed upon forms of communication technology.

"Family" means one or more adults and children, related by blood, marriage, <u>civil union</u>, or adoption and residing in the same household.

"Father" means a man presumed to be the natural father of a child if:

he and the child's natural mother are or have been married to each other, even though the marriage is or could be declared invalid, and the child is born or conceived during such marriage;

after the child's birth, he and the child's natural mother have married each other, even though the marriage is or could be declared invalid, and he is named, with his consent, as the child's father on the child's birth certificate pursuant to Section 12 of the Vital Records Act [410 ILCS 535/12];

he and the child's natural mother have signed an acknowledgment of paternity in accordance with rules adopted by the Illinois Department of Healthcare and Family Services under Section 10-17.7 of the Illinois Public Aid Code [305 ILCS 5/10-17.7];

he and the child's mother have signed an acknowledgement of parentage or, if the natural father is someone other than the one presumed to be the father under this Section, an acknowledgement of parentage and denial of paternity in accordance with Section 12 of the Vital Records Act. [750 ILCS 45/5]

A man can rebut a presumption of paternity only as provided in Section 5(b) of the Illinois Parentage Act of 1984 [750 ILCS 45/5 (b)] Father also means a man who adopts a child or has been determined by court or administrative adjudication to be the child's father.

"Fictive kin" means any individual, unrelated by birth or marriage, who:

is shown to have significant and close personal or emotional ties with the child or the child's family prior to the child's placement with the individual; or

is the current foster parent of a child in the custody or guardianship of the Department pursuant to the Child and Family Services Act and the Juvenile Court Act of 1987, if the child has been placed in the home for at least one year and has established a significant and family-like relationship with the foster parent, and the foster parent has been identified by the Department as the child's permanent connection. [20 ILCS 505/7(b)]

"Godparent" is a person who sponsors a child at baptism or one in whom the parents have entrusted a special duty that includes assisting the child if the parent cannot raise the child. If the person is considered to be the child's godparent, in order for placement to occur, the same placement selection criteria as contained in 89 Ill. Adm. Code 301.60 (Placement Selection Criteria) must be met. If the godparent is not a licensed foster parent, all the conditions currently in effect for placement with relatives in 89 Ill. Adm. Code 301.80 (Relative Home Placement) must be met.

"Guardian" means an individual person appointed by the court to assume the responsibilities of the guardianship of the person as defined in Section 1-3 of the Juvenile Court Act of 1987 [705 ILCS 405/1-3] or Article XI of the Probate Act of 1975 [755 ILCS 5].

"Individual Treatment Plan" or "ITP" or "Treatment Plan" as defined in 59 Ill. Adm. Code 132 (Medicaid Community Mental Health Services Program) means a written document developed by the appropriate service provider staff with the participation of the client with a mental illness and, if applicable, the client's guardian, which specifies the client's diagnosis, problems, and service needs to be addressed, the intermediate objectives and long-term goals for the services and the planned interventions for achieving these goals.

"Individualized Education Plan/Program" or "IEP" means the document prepared by the local school district, as a result of a Multi-disciplinary Conference, that identifies the specific special education services that will be provided to the child. The IEP also includes education goals, services, frequency, quantity and duration. IEP is further defined in 23 Ill. Adm. Code 226 (Special Education).

"Individualized Family Service Plan" or "IFSP" means a written working document developed for each child in order to facilitate the provisions of Early Intervention (EI) services. The IFSP is created by the family, an inter-disciplinary team, the core EI agency, and the case manager (service coordinator). The EI agency is responsible for coordinating the IFSP implementation.

"Minimum parenting standards" means that a parent or other person responsible for the child's welfare is able and willing to ensure that a child is healthy and safe, which includes ensuring that the child is adequately fed, clothed appropriately for the weather conditions, provided with adequate shelter, protected from physical, mental and emotional harm, and provided with necessary medical care and education required by law.

"Parents" means the child's legal parents whose rights have not been terminated. Biological fathers are considered legal parents when paternity has been established as required by the definition in this Section.

"Permanency goal" means the desired outcome of intervention and service, that is determined to be consistent with the health, safety, well-being, and best interests of the child. A permanent legal status is usually a component of the permanency goal.

"Permanent connection" means a family-like relationship, consistent with a child's best interests, health, safety and well-being, that provides:

safe, stable and committed parenting;

unconditional love and lifelong support; and

a permanent legal status between child and family.

For a child for whom the Department is legally responsible, a permanent connection may be the child's parents or another caregiver in the child's home of origin. When the child cannot be safely returned home, a permanent connection may be the current or former foster parent or relative caregiver, an individual identified as an adoptive or legal guardianship placement resource, or another individual from among the child's or family's lifelong connections with whom a child has developed a familial relationship.

"Permanent legal status" means a legally binding relationship between a child and a family as established by birth or by a court of law.

"Relative", for purposes of placement of children for whom the Department is legally responsible, means any person, 21 years of age or over, other than the parent, who:

- is currently related to the child in any of the following ways by blood, adoption, marriage, or civil union: grandparent, sibling, great-grandparent, uncle, aunt, nephew, niece, first cousin, first cousin once removed (children of one's first cousin to oneself), second cousin (children of first cousins are second cousins to each other), godparent (as defined in this Section), great-uncle, or great-aunt; or
- *is the spouse*, or party to a civil union, of such a relative; or
- is the child's step-father, step-mother, step-grandfather, step-grandmother or adult stepbrother or step-sister; or
- is the partner, or adult child of a partner, in a civil union with the child's mother or father; or
- is a fictive kin as defined in this Section.

Relative also includes a person related in any of the foregoing ways to a sibling of a child, even though the person is not related to the child, when the child and its sibling are placed together with that person. For children who have been in the guardianship of the Department, have been adopted, and are subsequently returned to the temporary custody or guardianship of the Department, a "relative" may also include any person who would have qualified as a relative under this definition prior to the adoption, but only if the Department determines that it would be in the best interests of the child to consider this person a relative. [20 ILCS 505/7(b)]

"Service termination planning" means service planning that starts with the first contact with the family and that focuses on providing a smooth transition from Department guardianship or custody. It includes the receipt of child welfare services to discharge from guardianship or custody and the termination of Department funded services.

"Siblings" means children who have at least one parent in common. Children continue to be considered siblings after parental rights are terminated, if parental rights were terminated while a petition under Article II of the Juvenile Court Act of 1987 was pending. Children continue to be considered siblings after one or more of the children are adopted or placed in private guardianship, if they were in the custody or guardianship of the Department pursuant to Article II of the Juvenile Court Act of 1987 [705 ILCS 405] immediately prior to the adoption or guardianship. Step-siblings may be considered "siblings" when the children enter into substitute care together, have a positive relationship and share at least one parent in common.

"Substitute care" means the care of children who require placement away from their families or private guardians. Substitute care includes foster family care, care provided in a relative home placement as defined in 89 Ill. Adm. Code 301 (Placement and Visitation Services), Section 301.80 (Relative Home Placement), care provided in a group home, care provided in a maternity center or a child care, mental health or other institution, and care provided in an independent living arrangement.

"Termination of parental rights" means a court order that relieves the legal parents of parental responsibility for the child and revokes all legal rights with respect to the child. The termination order also frees the child from all obligations of maintenance and obedience with respect to the legal parents.

"Visitation" means face-to-face contact:

between parents and their children who are in substitute care;

between siblings in substitute care who are placed apart from one another; or

between siblings in substitute care with siblings who are not in substitute care (e.g., emancipated, case closed due to independence, adopted, placed in private guardianship, living in home of parent, etc.).

(Source: Amended at 42 III. Reg. 2204, effective January 17, 2018)

### Section 315.30 Best Interests, Health and Safety of the Child

a) Best Interests, Health and Safety of the Child

Permanency planning is an on-going process that first and foremost must consider the best interests, health and safety of the child in all planning decisions. Health and safety are the paramount factors that must be considered when determining the best interests of the child. This means that a child is or will be in a living arrangement that meets the placement selection criteria contained in 89 Ill. Adm. Code 301 (Placement and Visitation Services), or for an Indian child, that meets the placement selection criteria contained in 89 Ill. Admin. Code 307 (Indian Child Welfare Services), and that protects the child's physical health and safety and promotes the child's emotional, medical, and developmental well-being.

- 1) When evaluating the best interests of the child, the Department or its purchase of service provider shall consider the following factors as provided in the Juvenile Court Act:
  - A) the physical safety and welfare of the child, including food, shelter, health, and clothing;
  - B) the development of the child's identity;
  - C) the child's background and ties, including familial and religious, including the primary method and/or language of communication between the child and the biological parents or any other special communication needs:
  - D) the child's sense of attachments, including:
    - i) where the child actually feels love, attachment, and a sense of being valued (as opposed to where adults believe the child should feel such love, attachment, and a sense of being valued);
    - ii) the child's sense of security;
    - iii) the child's sense of familiarity;
    - iv) continuity of affection for the child;
    - v) the least disruptive placement alternative for the child;
  - E) the child's wishes and long-term goals;
  - F) the child's community ties, including church, school, and friends;
  - G) the child's need for permanence, which includes the child's need for stability and continuity of relationships with parent figures and with siblings and other relatives;
  - H) the uniqueness of every family and child;

- I) the risks attendant to entering and being in substitute care; and
- J) the preferences of the persons available to care for the child. [705 ILCS 405/1-3].
- 2) The Department and purchase of service providers shall consider the importance of maintaining, preserving and supporting sibling relationships and, when selecting and assessing placements, shall comply with placement selection, visitation and contact requirements set out in 89 Ill. Adm. Code 301 (Placement and Visitation).
- b) The child's best interests and health and safety must be considered and documented throughout service intervention and during, but not limited to, the following activities:
  - 1) investigation of allegations of abuse or neglect;
  - 2) completion of safety and risk assessments;
  - 3) completion of the comprehensive assessment;
  - 4) worker/client contacts;
  - 5) service planning;
  - 6) permanency goal selection;
  - 7) family meetings;
  - 8) administrative case reviews;
  - 9) legal screenings, and
  - 10) permanency hearings and other court proceedings; and
  - 11) post-permanency sibling contact.

(Source: Amended at 40 III. Reg. 743, effective December 31, 2015)

### **Section 315.40 Accountability**

Permanency planning must ensure accountability on the part of clients, the Department and other service providers through written documentation of the expectations and obligations of each of the parties to the service plan. This documentation must include:

- a) a desired permanency goal for each child served that is recorded in the service plan;
- b) identification of problems that must be resolved to achieve this status, including, when applicable, achievement of minimum parenting standards;
- c) identification of measurable changes or outcomes that will signify problem resolution;
- d) identification of what services the Department and other service providers will provide toward achieving the desired permanent living arrangement;
- e) identification of applicable time frames; and
- f) identification of any consequences to the client if the time frames are not met.

### **Section 315.45** The Need for a Permanent Home

- a) The Department recognizes that the best interest of children require that they have safe, permanent, secure, and nurturing homes for healthy psychological and physical development in order to mature to stable adulthood. Whenever it is determined to be in the best interest of the child, the Department will make reasonable efforts to preserve family life and to stabilize children's homes and to assist in the solution of problems that are likely to result in the abuse, neglect or exploitation of children.
- b) When children must be removed from a parent to reduce or prevent harm to the children and the other parent is not a placement option, the Department will make reasonable efforts to reunite families as quickly as is consistent with the children's best interests, safety and well-being. When children and parents cannot be reunited because the parents are unable or unwilling to care for the children and therefore cannot achieve the minimum parenting standards, the Department will make reasonable efforts to find other permanent homes for children in a timely fashion consistent with the child's sense of time and need for physical safety and emotional security.
- c) When placing a sibling group, priority shall be given to a placement, whether related or unrelated, that can accept all of the members of the sibling group.
- d) When placing a child who has siblings who are in substitute care, or were adopted or placed in private guardianship from the Department's care, priority shall be given first to placement with the child's siblings who are still in substitute care or who are in an adoptive placement or private guardianship.

(Source: Amended at 40 III. Reg. 743, effective December 31, 2015)

### Section 315.50 Reasonable Efforts/Reasonable Progress

- The Department shall ensure and document that reasonable efforts were made to prevent a) or eliminate the need to remove a child from the child's home and to reunify the family when temporary placement of the child occurs. However, it may be that, due to the individual circumstances of the family and the child's best interests, safety and wellbeing, no efforts reasonably can be made to maintain the child in the child's home or to reunify the family. Reasonable efforts shall not be required if there exists any of the grounds for termination of parental rights as described in 89 Ill. Adm. Code 309 (Adoption Services for Children for Whom the Department of Children and Family Services Is Legally Responsible). Such a determination that no efforts reasonably can be made must be documented. If no efforts reasonably can be made to safely prevent or eliminate the need for removal of the child, the child shall be taken into protective custody. If no efforts reasonably can be made to reunify the family, the Department will seek alternative permanency planning that may involve termination of parental rights as described in 89 Ill. Adm. Code 309 (Adoption Services for Children For Whom the Department of Children and Family Services Is Legally Responsible).
- b) Efforts by the Department or purchase of service agency to prevent or eliminate the need for removal of a child or to reunify a family must be accompanied by reasonable progress on the part of the child's parents. Reasonable progress by the parents is demonstrated by a change in the parental behaviors or circumstances that threaten the child's best interests, safety or well-being, and are the reasons why the Department is either considering removal of the child from the home or has removed the child from the home. Examples of reasonable progress or lack of progress by the parents are described in Section 315.300 (Evaluating Whether Children in Placement Should Be Returned Home). In the absence of such reasonable progress by the child's parents, it is not reasonable for the Department or purchase of service agency to continue efforts to preserve the family.

### Section 315.60 The Child's Sense of Time

- a) The Department recognizes that children have a different sense of time than adults. What seems like a short family disruption or a brief separation to adults may be a very painful and intolerably long period for children. In general, younger children are less able to tolerate periods of separation than older children. For this reason, the Department shall act promptly using the best information available when dealing with children and their families.
- b) The Department believes that aggressive planning with an emphasis on decisionmaking, followed by the actions needed to carry out those decisions, will secure permanent homes for children. Therefore, the Department requires permanency planning directed toward a permanency goal beginning from the earliest contacts with children and families. Through permanency planning the Department strives to assure that children are in permanent homes as quickly as is consistent with their safety and well-being, while recognizing the urgency caused by the child's sense of time.

### Section 315.70 The Critical Decisions

Although all Department decisions affecting children and families are important, the Department identifies the following decisions, that require approval of the casework supervisor, as the most critical ones affecting children and families:

- deciding whether services can prevent placement away from their parents or primary parent figure or deciding whether to remove children from the home of their parents or primary parent figure;
- b) deciding whether to recommend the return of children to the home of their parents or primary parent figure from a placement away from their parents or primary parent figure;
- c) deciding whether to decrease the frequency or the duration of parent and/or sibling visits with the child and whether the visits should be supervised;
- d) deciding whether to release the name, address, and telephone number of the foster parent/relative caregiver to the parent and/or siblings placed apart;
- e) deciding whether to change children's placements;
- f) deciding whether to seek termination of parental rights and seek an alternate permanent home;
- g) deciding if children are prepared for partial or total independence; or
- h) deciding whether children shall be placed apart from siblings who are also placed in substitute care or who have been adopted or are in subsidized guardianship.

(Source: Amended at 40 Ill. Reg. 743, effective December 31, 2015)

### Section 315.80 Components of the Permanency Planning Process

- a) The permanency planning process begins when the first contact is made with the child and family. The permanency planning process continues until the health and safety of the child are assured and Department-funded services terminated.
- b) Activities that must occur as part of the permanency planning process include:
  - 1) a diligent search for missing parents, when necessary;
  - 2) an assessment as described in Section 315.100;
  - 3) worker intervention and contacts as described in Section 315.110;
  - 4) family meetings as described in Section 315.120;
  - 5) development and implementation of a service plan as described Section 315.130;

- 6) selection of a permanency goal as described in Sections 315.200 through 315.240;
- 7) the use of concurrent planning as described in Section 315.245, when appropriate;
- 8) evaluating whether families are substantially fulfilling their obligations under the service plan and correcting the conditions that led to the placement of their children to enable the children to be returned home as described in Section 315.300:
- 9) consideration of alternatives to reunification as described in Section 315.305;
- 10) preparation for termination of Department services and aftercare planning as described in Section 315.310; and
- preparation for, attendance at, and participation in administrative case reviews, court hearings, and permanency hearings, as described in 89 Ill. Adm. Code 316 (Case Reviews and Court Hearings).

### SUBPART B: ASSESSMENT AND OTHER CASEWORK ACTIVITIES

### Section 315.100 Assessment

Assessment consists of an initial assessment of a child and family to determine whether a case should be opened and services delivered, a comprehensive assessment to determine the needs of the family to provide the appropriate intervention and services, and an ongoing assessment conducted throughout the duration of time that the children and family are receiving services. Initial assessment provides a baseline of family strengths and needs by which a caseworker and supervisor can evaluate subsequent progress.

### a) Initial Assessment

The initial assessment consists of a preliminary assessment prior to case opening in order to:

- 1) assess the health and safety of the children to determine whether the child can safely remain in his or her current living arrangement;
- 2) identify the level of risk of harm to the children in the family, develop and implement a safety plan (if at any time the aggravating circumstances appropriate for expedited termination of parental rights exist, the worker shall immediately follow the instructions for expedited termination of parental rights contained in 89 Ill. Adm. Code 309 (Adoption Services for Children for Whom the Department of Children and Family Services is Legally Responsible);

- identify what interventions and services can be provided to address the causes of abuse and neglect, and assure a child's health and safety without placement;
- 4) identify any needs of an emergency nature, including food, shelter, and clothing;
- 5) identify whether the child is an Indian child as defined in 89 Ill. Admin. Code 307 (Indian Child Welfare Services);
- 6) begin to identify and preliminarily select placement resources that meet the placement selection criteria contained in 89 Ill. Adm. Code 301 (Placement and Visitation Services); and
- 7) identify any special communication needs the child may have, in addition to identifying the communication needs specified by the child's parents and/or legal guardians.

### b) Comprehensive Assessment

The comprehensive assessment is an assessment completed in time to ensure submittal of the service plan to the juvenile court no later than 45 days after placement as required by Section 2-10 of the Juvenile Court Act of 1987 [705 ILCS 405/2-10]. During the comprehensive assessment period the worker shall conduct at least weekly face-to-face visits with the parent and any children remaining in the custody of the parent. When the parent cannot be located, a diligent search shall be made to locate the parent, as required by 89 Ill. Adm. Code 332 (Diligent Searches Conducted by the Department of Children and Family Services), and the parent's portion of the comprehensive assessment shall be completed within 30 days after the parent is located.

- 1) The comprehensive assessment shall consist of any part of the initial assessment that has not yet been completed and the following tasks:
  - A) completion of a social history of the child and family to determine the strengths and needs of the family;
  - B) continued assessment of the health and safety and level of risk to the children in the family (If at any time the aggravating circumstances appropriate for expedited termination of parental rights exist, the worker shall immediately follow the instructions for expedited termination of parental rights.);
  - C) assessment of the parents as it relates to their ability to care for the child, including referral for diagnostic mental health and substance abuse assessment, when indicated;

- D) for children for whom the Department has legal responsibility, the comprehensive assessment shall also include:
  - a compilation of the medical and immunization history of the child and, where available, relevant medical history of the child's parents;
  - ii) location of missing or non-custodial parents and other relatives and their relationship to the family;
  - iii) a preliminary, age appropriate substance abuse screening of the child, if indicated by any other component of the assessment:
  - iv) a basic educational screening including identification of the child's current school and grade level, educational history, and identification of any educational goals and needs, including the need for any further educational testing or assessments; and
- 2) In addition, for those children, who are placed in substitute care, the comprehensive assessment shall also include:
  - A) an initial health screening by a qualified medical provider in accordance with EPSDT standards, within 24 hours after placing the child in protective custody, of sufficient scope to permit the Department or purchase of service agency to ascertain enough about the current health of the child to identify:
    - i) any health needs requiring immediate attention; and
    - ii) any health information needed to make an informed placement decision.

If a child is in the hospital at the time the Department takes protective custody, the hospital discharge summary shall serve as the initial health screening.

B) a comprehensive health evaluation in time to submit the service plan to the juvenile court within the 45 day period after a child's placement in foster care that includes a physical, dental and mental health status of all children and a developmental screening on all children not yet of school age conducted by medical personnel and followed by more intensive evaluation as indicated or recommended. All children taken into Department custody are to be enrolled in Health Works within the first 45 days after the Department assumes custody.

- 3) For those children in foster or relative care, the comprehensive assessment shall include an assessment of whether the foster parent/relative caregiver identifying information shall be released to the parent. Identifying information of the foster parent/relative caregiver shall not be released to the child's parents or siblings in the care of their parents when any of the following is found in the assessment of the parent or other adult living in the home:
  - A) A check of the Law Enforcement Agencies Data System (LEADS) identifies a conviction for any of the crimes listed in Appendix A (a) (1), (3), or (4) of 89 Ill. Adm. Code 301 (Placement and Visitation Services); or
  - B) The parent or other adult living in the home has threatened violence against a foster parent/relative caregiver or Department or purchase of service agency worker; or
  - C) The parent or other adult living in the home has exhibited violence against a foster parent/relative caregiver or Department or purchase of service agency worker in the past; or
  - D) The parent or other adult living in the home has or has threatened to abduct or harm the child.

### c) Ongoing Assessment

Ongoing assessment continues throughout the life of the case until service termination and shall be used to guide the Department or purchase of service agency in developing an appropriate case plan and guide decision making concerning the Department's or purchase of service agency's reasonable efforts and the client's reasonable progress to correct conditions and/or behavior that threaten a child's health and safety. The ongoing assessment shall consist of reassessing health, safety and risk and the reapplication of any additional screenings as described in subsection (b) whenever the facts of the case indicate the need as well as well-child exams and a review of immunizations, until termination of services.

(Source: Amended at 31 Ill. Reg. 8103, effective May 30, 2008)

### **Section 315.110 Worker Interventions and Contacts**

This Section applies to caseworker interventions and contacts made during the delivery of child welfare services and does not include the interventions and contacts required by child protective investigative staff during the course of child abuse and neglect investigations. To meet any of the intervention and contact requirements described in this Section with hearing impaired clients or limited non-English speaking clients, the worker must be able to facilitate communication using the client's primary mode of communication (e.g., fluency in the client's language or the use of foreign or sign language interpreters; e.g., Braille or taped communications for persons with visual impairments, etc).

- a) Initial Intervention and Contact by Caseworker
  - 1) The assigned caseworker or person assigned by the supervisor, if the assigned caseworker is unavailable, must attend the shelter care hearing in court.
  - The assigned caseworker must attempt face-to-face intervention and contact with the family in the home within five working days after the shelter care hearing or case assignment, whichever is earlier, unless the caseworker and supervisor believe, based upon the health, safety, and best interests of the child, that it is necessary to attempt contact sooner. If the family is unavailable, the caseworker shall make a second attempt within one working day after the failed attempt. If that attempt is also unsuccessful, the caseworker shall conduct a diligent search for the family.

### b) Ongoing Intervention and Contact

### 1) With Families

The families of children in placement shall be seen by the assigned caseworker at least monthly or more frequently as might be specified by the service plan unless parental rights have been terminated.

### 2) With Children

The assigned caseworker shall see any child in substitute care in the child's living arrangement at least once every two weeks for the first month immediately following initial placement or a change in placement and at least once every month thereafter. When visiting children in substitute care, the caseworker must interview verbal children out of the presence of the caregiver.

- 3) The above frequencies shall be followed, unless the supervisor, based on the assessment, determines and documents in the service plan, in writing, that the service plan requires more frequent or less frequent contact.
- c) Interventions and Contacts Following Reunification

During all interventions and contacts following reunification, the caseworker must see the child outside the presence of the parent.

### 1) Initial Intervention and Contact

Following the return home of a child who has been in substitute care, an initial face-to-face intervention with the child and parent must be made via a visit in the home by the assigned caseworker within 24 to 72 hours after the child's return home. The timing of the visit will be based upon the safety plan completed when the child is returned home.

### 2) First Month

Following the initial visit, weekly or more frequent intervention and contact, as determined by the supervisor, with the child and parent in the home is required for the first month following reunification. At least two of the visits during this first month after reunification must be unannounced.

### 3) Ongoing

Frequency of intervention and contact subsequent to the first month of reunification shall be at least monthly until such time as safety and risk assessments indicate that there are no longer sufficient safety or risk factors present to require continued contact.

### d) Contact With Foster Families/Relative Caregivers

The assigned Department or purchase of service agency caseworker shall provide the primary foster parent or relative caregiver caring for a child for whom the Department is responsible with monthly face-to-face consultation and support and more often on an as needed basis. This face-to-face contact with the primary foster parent or relative caregiver may occur at the same time as contact with the children in placement is made, provided that children are given the opportunity to be seen and interviewed alone. If there are two or more foster children in one foster home with more than one worker, their respective workers shall together meet at least once every six months with the foster parent, in the foster home, to discuss issues affecting the children's care.

### e) Children Placed in Residential Facilities

Children placed in residential facilities (group homes or child care institutions and other facilities such as mental health and correctional facilities) must be visited by the assigned caseworker at least monthly.

### f) Children in Out of State Placements

Children who are placed out of state in compliance with 89 III. Adm. Code 328, Interstate Placement of Children, must be visited no less frequently than every six months by a caseworker of the Department or of the state in which the child has been placed. If the caseworker from the state in which the child is placed conducts the visits, that worker shall prepare a quarterly report regarding the health, safety and welfare of child. A Department or Purchase of Service worker who visits a child placed in Illinois from another state shall prepare the same quarterly report. In either case, the supervising caseworker must submit the quarterly report to their respective interstate office, and not directly to the other caseworker.

(Source: Amended at 31 Ill. Reg., effective May 30, 2008)

### **Section 315.120 Family Meetings**

Family meetings are a tool intended to engage the family in the planning process. Therefore, caseworkers shall make intensive efforts to persuade and encourage parents, including non-custodial parents, to attend the family meetings, especially during the first 90 days, by explaining to them the importance of the family meeting and of attending and cooperating with the process. Casework staff should make every effort when planning family meetings to be flexible and attempt as much as possible to schedule meetings at a time and place where parents can attend, preferably in the parent's home. Staff shall take into consideration parents' work schedules, transportation issues, availability of interpreters (if the parents' primary language of communication is other than English), and any other barriers that might prevent parents from participating. Parents shall be reminded of the court admonishment to cooperate with the Department and that refusal or chronic failure to attend family meetings may be considered by the Department and the court as a lack of reasonable progress. After reaching agreement with the parents on the date, time, location, and participants of the family meeting, the caseworker shall send a confirmation letter to the parents. Caseworkers shall document in the case file all attempts to include parents in the family meetings. Failure to attend family meetings shall also be documented in the case file.

- a) Initial Family Meeting
  - 1) The initial family meeting must occur in time to ensure submittal of the service plan to the juvenile court no later than 45 days after the child's placement and includes at a minimum:
    - A) the caseworker;
    - B) the child's custodial parents;
    - C) the non-custodial parent with the following conditions:
      - i) there is no danger of violence between the parents; and
      - ii) no confidential information concerning the custodial parent, such as mental health information, may be shared with the non-custodial parent, unless the custodial parent consents in writing to the sharing of such information as provided in 89 Ill. Adm. Code 431 (Confidentiality of Personal Information of Persons Served by the Department of Children and Family Services). If the custodial parent does not consent to the release of confidential information, the meeting shall be conducted in segments, with the non-custodial parent excluded from any discussion that includes the information about the custodial parent that is confidential;
    - D) the casework supervisor.

- 2) In addition, at the supervisor's discretion and with the signed consent of the parent, the following may be invited:
  - A) appropriate extended family members including non-custodial parents who are not interested in seeking custody;
  - B) foster parents and relative caregivers (see subsections (f), (g), (h) and (i));
  - C) service providers; and
  - D) the child, if emotionally and developmentally appropriate.
- b) Purpose of Initial Family Meeting

The purposes of the initial family meeting, to be conducted by the casework supervisor, are to:

- 1) share information among all participants;
- 2) review the initial and comprehensive assessments;
- 3) develop Visitation and Contact Plans;
- 4) discuss and prepare the initial service plan; and
- 5) determine the permanency goal.
- c) Ongoing Family Meetings
  - 1) Following the initial family meeting, family meetings will be conducted on a flexible schedule, but no less than on a quarterly basis (at least four times a year approximately three months apart). The ongoing family meeting shall include at a minimum:
    - A) the caseworker:
    - B) the child's custodial parents;
    - C) the non-custodial parent with the same conditions as specified in subsection (a)(1)(C);
    - D) the casework supervisor at the supervisor's discretion. However, the supervisor must attend if the non-custodial parent will be attending the meeting when the non-custodial parent presents a safety concern.
  - 2) In addition, at the supervisor's discretion and with the signed consent of the parent, the following may be invited:
    - A) appropriate extended family members, including non-custodial parents who are not interested in seeking custody;

- B) foster parents and relative caregivers (see subsections (f), (g), (h) and (i));
- C) service providers; and
- D) the child, if emotionally and developmentally appropriate.
- d) Purposes of Ongoing Family Meetings

The purposes of the ongoing family meetings are to:

- 1) assure disclosure of the expectations of all parties;
- 2) assess reasonable efforts on behalf of the Department or the purchase of service agency;
- 3) assess reasonable progress on behalf of the family;
- 4) assess whether the plan is serving the health, safety, and best interests of the child:
- 5) provide support for decision making that recognizes the child's sense of time, including whether the permanency goal and time frames for achieving the goal should be continued, and whether services and service providers are effective:
- 6) share information among the participants;
- 7) evaluate whether the identified behaviors and conditions are being addressed and whether the parents are engaged in the change process;
- 8) review, modify or develop Visitation and Contact Plans;
- 9) engage in planning that involves addressing the needs of the child with appropriate services and establishing realistic time frames for achievement of tasks and goals; and
- 10) review clinical material by various service providers. Clinical reports should be obtained and collateral contacts completed prior to the staffing. Professionals should have discussed findings and recommendations with the client/family prior to the meeting to promote open and honest discussion.
- e) Prior to inviting foster parents/relative caregivers to the initial family meeting, the caseworker must consider the statutory requirement that protects foster parents'/relative caregivers' names, addresses and telephone numbers from disclosure. Such information regarding the foster parents/relative caregivers shall not be disclosed to the child's parents at the initial family meeting that occurs in time to ensure submittal of the service plan to the juvenile court no later than 45 days after placement.

- f) In deciding whether to invite the foster parents/relative caregivers to the meeting, the caseworker shall take into consideration the level of violence or tendency toward violence displayed by the child's parents. This shall be assessed as the caseworker is conducting the comprehensive assessment in accordance with Section 315.100. The caseworker shall use information from:
  - 1) Department safety and risk assessments;
  - 2) the social history, including information such as the parents arrest history, history of domestic violence, and court records; and
  - 3) the caseworker's own observations.
- g) Information concerning the level or tendency toward violence of the parents may be shared with the foster parents/relative caregivers to help them decide whether to attend the initial family meeting. In no event shall the address and telephone number of the foster parents/relative caregivers be disclosed at the initial family meeting.
- h) For all subsequent family meetings the same violence factor shall be considered when determining whether the foster parent/relative caregiver should attend and whether there is any danger to the foster parent/relative caregiver by attending the family meeting.
- i) The participants in the family meeting will attempt to reach decisions and agree on recommendations by consensus. If a consensus cannot be reached, the final decision rests with the supervisor on all meetings.
- j) Documentation of the meeting and report of the recommendations/decisions is to be made and included in the case record.
- k) Parents have the right to appeal decisions with which they disagree in accordance with 89 Ill. Adm. Code 337 (Service Appeal Process).

(Source: Amended at 40 Ill. Reg. 743, effective December 31, 2015)

### **Section 315.125 Preservation of Sibling Relationships**

Whenever a child enters care or requires a new placement, the Department shall consider the development and preservation of sibling relationships [20 ILCS 505/7.4(e)]. The Department shall:

- a) place children who come into its care with other siblings in substitute care in accordance with 89 Ill. Adm. Code 301.70 (Sibling Placement);
- b) encourage the child to develop and maintain a relationship with his/her siblings placed apart in substitute care, still residing with a birth parent or who have attained adulthood, and include those siblings, when possible, in the Sibling Visitation and Contact Plan;

- c) encourage the child to develop and maintain a relationship with any of his/her siblings who have been adopted or placed in legal guardianship as described in 89 Ill. Adm. Code 301.250 (Sibling Visitation and Contact with Adopted Siblings and Siblings in Private Guardianship) and, when possible, develop a Post-Permanency Sibling Contact Agreement; and
- d) encourage caregivers to actively support and nurture children in developing and preserving sibling relationships.

(Source: Added at 40 Ill. Reg. 743, effective December 31, 2015)

### Section 315.130 Developing the Service Plan

Based on the information gathered during the assessment process described in Section 315.100 and through negotiation during the caseworker's contacts, visits, and at the initial family meeting, the caseworker and family shall develop a plan of intervention that is based on the family's strengths and needs and that addresses how the children's needs for health and safety will be met.

### a) Purpose of the Service Plan

The service plan is a written plan that is established between the Department and the children and family served, and any involved service providers. The purpose of the service plan is to:

- 1) formulate goals for the child based on the child's needs for health, safety, and well-being that were identified during the assessment process;
- 2) identify what actions the family, the caseworker, caregiver, and others will take to meet the needs of the child and achieve permanency;
- 3) identify what additional interventions and services will be provided to the family, the caregiver, and the child in order to meet the child's needs and achieve permanency; and
- 4) ensure that the parents and children have frequent visitation and contact with one another, and that sibling groups develop and/or preserve their relationships.

### b) State and Federal Requirement

Service plans are required by State [20 ILCS 505/6a] and Federal law (42 USCA 675) regardless of whether the child and family are served directly by the Department or through purchase of service providers. The service plan must ensure that the health and safety of the child are the paramount concerns that guide all service, placement, and planning provisions.

### c) Time Frames

- 1) Visitation and Contact Plan. The initial Visitation and Contact Plan shall be completed and forwarded to the juvenile court no later than 10 days after the award of temporary custody when the child has siblings who are also in substitute care. The Visitation and Contact Plan shall be reviewed regularly and changed and updated as specified in 89 Ill. Adm. Code 301.220 (Sibling Visitation).
- 2) Service Plan. The initial service plan shall be completed and forwarded to the juvenile court no later than 45 days after placement and must be reviewed at least once every six months thereafter. The service plan shall be changed and updated as the child and family's situation changes and shall be reviewed regularly as specified in Section 315.150 (Revising the Service Plan).

### d) Contents of the Service Plan

Service plans shall contain the following information:

- 1) the names of the children for whom the Department is legally responsible or to whom the Department is providing services;
- 2) the health and safety factors that have resulted in placement of the children away from the family home and an identification of any problems that are causing continued placement of the children away from the home;
- 3) what outcomes would be considered a resolution to these problems and the strengths the family possesses to achieve these outcomes;
- 4) the reasons for the out of home placement and the reason why the child has been put in his or her current placement, the resources or other support that will be necessary to maintain the placement, and, where a residential placement has been deemed necessary, a description of how and when a plan for moving the child to the least restrictive, most homelike placement consistent with the child's best interest can be developed.
- 5) the services to be provided to the parents, for each child while in care, and the foster parents (if necessary, when the child is placed in foster care) that may best resolve these problems;
- 6) the health care to be provided to the child and the mental health care to be provided to address the child's serious mental health needs as well as a description of the child's physical, developmental, educational or mental disability and any non-educational specialized services the child is receiving

or should receive for each disability. If an Individual Treatment Plan (ITP) or Rehabilitative Services Plan exists for the child, it shall be attached to the service plan. To the extent available and accessible, the service plan shall incorporate the health records of the child, including:

- A) the names and addresses of the child's health provider;
- B) a record of the child's immunizations;
- C) the child's known medical problems; and
- D) the child's medications.
- a description of the educational program/services the child is receiving or needs to receive (including information regarding Early Intervention, Head Start, or Pre-Kindergarten services for preschool children). If an Individualized Education Plan (IEP) or an Individualized Family Service Plan (IFSP) exists for a child, the IEP or IFSP shall be included in the record. To the extent available and accessible, the service plan shall incorporate the education records of the child, including:
  - A) the names and addresses of the child's educational providers;
  - B) the child's grade level performance; and
  - C) the child's school record.
- 8) who will provide the services, how often they will be provided, and an explanation of why these services will meet the needs of the child;
- 9) if children placed out of the parents' home are placed a substantial distance (more than 150 miles) from the home of the parents or in a different state, the reasons why the placement is in the best interests of the children;
- if children placed out of the parents home are placed in a different state, a requirement that the child be visited periodically, but not less frequently than every six months by a caseworker of the Department or of the state in which the child has been placed, as required in Section 315.110 (Worker Interventions and Contacts);
- if siblings are placed apart from one another, the reasons why they are placed apart and what efforts have been and are being made to find a joint placement for the sibling group;
- 12) the permanency goal for each child and the reason for selecting the goal;

- in the case of a child for whom the permanency plan is adoption or other permanent living arrangement, documentation of the steps the Department is taking to find an adoptive family or other permanent living arrangement;
- in the case of a child for whom the permanency plan is independence or for a child 16 years of age or older, as appropriate, a written description of the programs and services that will help such a child prepare for the transition from foster care to independent living;
- the responsibilities of the family and the child (when appropriate) in fulfilling the service plan;
- the responsibilities of the Department and purchase of service providers, if any, to assist the family in fulfilling the service plan
- When children and families are separated, the parent-child and/or sibling Visitation and Contact Plan developed with the family in accordance with 89 Ill. Adm. Code 301 (Placement and Visitation Services), if visitation and contact is not prohibited by court order. This plan shall include the time and place of visits, the frequency of visits, the length of visits, and who shall be present at the visits. The plan shall also note the permissible modes of communication siblings may use between visits to stay in contact with one another;
  - whether the name, address, and telephone number of the foster parent/relative caregiver may be released to the parent as determined by the assessment conducted in accordance with Section 315.100(b)(3);
  - 19) the time frames for achieving the permanency goal and the objectives to resolve identified problems and the specification of any consequences to the child and family if the time frames are not met;
- a statement that the parents or children may disagree with the service plan and that they may have their disagreement recorded; and
- an explanation of how parents or children may request an appeal and fair hearing.

(Source: Amended at 40 Ill. Reg. 743, effective December 31, 2015)

### Section 315.140 Distributing the Service Plan

Copies of the service plan shall be distributed in accordance with the Department's rules on confidentiality (89 Ill. Adm. Code 431, Confidentiality of Personal Information of Persons Served by the Department) to:

- a) the parents (unless parental rights have been terminated or the Department has filed a petition seeking the termination of parental rights);
- b) the putative father, if he is participating in planning for the child;
- c) the involved purchase of service providers, including the foster parents or relative home caretakers. Foster parents or relative home caretakers will receive copies of the child's portion of the service plan. Foster parents may be able to receive other portions of the service plan involving the child's family provided that the information being presented is essential for understanding the needs of and providing care to the child and the child's family acknowledges a positive relationship with the foster parents and gives consent in accordance with the consent provisions of 89 Ill. Adm. Code 431 (Confidentiality of Personal Information of Persons Served by the Department);
- d) the child, if participating in the planning process;
- e) appropriate Department staff;
- f) the guardian ad litem and legal representative of the child; and
- g) the Juvenile Court and all parties when the court has jurisdiction. The initial service plan must be submitted to the court no later than 45 days after a child's placement as required by Section 2-10 of the Juvenile Court Act of 1987 [705 ILCS 405/2-10]. In addition, the most current revised service plan prepared within the prior six months must be submitted to the court and all parties at least 14 days in advance of the next permanency hearing, as required by the Juvenile Court Act of 1987 [705 ILCS 405/2-28-1].

(Source: Amended at 26 Ill. Reg.11765, effective May 24, 2002).

### **Section 315.150 Revising the Service Plan**

The service plan shall be reviewed and revised, if necessary:

- a) when the current permanency goal is no longer appropriate;
- b) when the current service plan does not address the child's or family's needs;
- c) prior to each administrative or regular case review;
- d) prior to each permanency hearing; and
- e) when there are substantial changes in the family's circumstances.

### **Section 315.160 Case Reviews and Court Hearings**

An important part of the service planning process requiring the caseworker's participation are the reviews and court oversights of the efforts of the Department or its provider agency and the family toward achieving the permanency goal. Decisions made by the court and by the administrative case review system must be incorporated in the service plan. Recommendations made by the administrative case review system or by the court, if not specifically ordered by the court, shall be given careful consideration by all the parties involved in the service planning process. The Department's responsibilities with regard to case reviews and court hearings are described in 89 Ill. Adm. Code 316 (Case Reviews, Court Hearings, and Permanency Hearings). Purchase of service agencies are responsible for a case while it is assigned to them. If they receive a case with deficiencies, they have 60 days to bring the case into compliance with the requirements of this Part.

### SUBPART C: SELECTING THE PERMANENCY GOAL

### Section 315.200 Selection of the Permanency Goal

a) Types of Permanency Goals

A permanency goal is the desired outcome of intervention and service that is determined to be consistent with the health, safety, well-being and best interests of the child. A description and the criteria for selection of each of the goals are included in Sections 315.205 through 315.241. The goals that may be selected for children placed apart from their families are listed below followed in parentheses by the numerical code that is entered into the Department's Child and Youth Centered Information System (CYCIS):

- 1) return home within five months (21);
- 2) return home within 12 months (22);
- 3) return home pending status hearing (23);
- 4) substitute care pending court determination on termination of parental rights (24);
- 5) adoption, provided that parental rights have been terminated or relinquished (25);
- 6) guardianship (26);
- 7) independence (27);
- 8) cannot be provided for in a home environment (28); or
- 9) continuing foster care (29).

### b) Process for Selection

- During the first 12 months, prior to the first court permanency hearing, the Department or purchase of service agency selects the permanency goal. At the first permanency hearing the Department or purchase of service agency will recommend a permanency goal, but the court selects the goal.
- An initial permanency goal will be established by the Department or purchase of service agency in time to ensure submittal of the service plan to the juvenile court no later than 45 days after the child's placement as required by Section 2-10 of the Juvenile Court Act of 1987 [705 ILCS 405/2-10], and only after:

- A) an assessment has been completed with the family and reviewed and approved by the casework supervisor; and
- B) the initial family meeting has been held.

### c) Changing the Permanency Goal

A permanency goal may only be changed:

- 1) within the first 12 months following case opening by the caseworker with the approval of the supervisor; or
- 2) within the first 12 months following case opening at an administrative case review or a decision review; or
- 3) when selected by the court at the permanency hearing pursuant to Section 2-28 of the Juvenile Court Act of 1987 [705 ILCS 405/2-28]. A permanency goal selected by the court cannot be changed without the approval of the court.

(Source: Amended at 35 Ill. Reg. 14934, effective September 1, 2011)

### **Section 315.205 Return Home Within Five Months**

a) Description

The minor will be returned home by a specific date within five months from the date of case opening or the court permanency hearing at which the goal is set by the court.

b) Criteria for Selection

Returning home within five months should be established as the permanency goal:

- when on the basis of the current assessment and/or a history of service delivery, the parents are willing and able to correct the conditions that led to the child's removal from the home by a date within five months; and
- 2) when the child's best interests will be served by reunification within five months; or
- 3) when the goal has been ordered by the court.

### Section 315.210 Return Home Within One Year

### a) Description

The minor will be in short term care with a continued goal to return home within a period not to exceed one year after the date of case opening or the court permanency hearing and the progress of the parents is substantial, giving particular consideration to the age and individual needs of the minor.

### b) Criteria for Selection

Returning Home within one year should be established as the permanency goal when:

- 1) on the basis of the current assessment and family history, the parent is making substantial progress in correcting the conditions or behaviors necessitating the child's removal from the home; or
- 2) the parent was not initially cooperative with services, but is now progressing well in services; or
- 3) the parent is cooperating with services, but the need for services is so great that additional time is required; or
- 4) the goal has been ordered by the court.

### **Section 315.215 Return Home Pending Status Hearing**

### a) Description

The minor will be in short-term care with a continued goal to return home pending a status hearing. When the court finds that a parent has not made reasonable progress to date, the court identifies what actions the parent and the Department or purchase of service agency must take in order to justify a finding of reasonable progress and sets a status hearing to be held not earlier than nine months from the date of adjudication, nor later than 11 months from the date of adjudication, during which the parent's progress will again be reviewed.

### b) Criteria for Selection

This goal may only be selected by the court. It is selected when:

- 1) the parents have not substantially fulfilled their obligations under the service plan and corrected the conditions that brought the child into care; and
- 2) nine months have not yet elapsed since adjudication.

### c) Status Hearing

- When the court selects this goal, the court sets a status hearing to review the parents' progress. The date for the status hearing will be not earlier than nine months from the date of adjudication, nor later than 11 months from the date of adjudication. The court tells the parents what they must do to demonstrate reasonable efforts or progress. The court also requires that relevant, appropriate reunification services continue to be available during this time period.
- When the court conducts the status hearing at 9 to 11 months after the adjudication, the court determines whether the parents have made reasonable efforts or progress toward attaining the goal of "return home." If the court finds that the parents have failed to make reasonable efforts or progress, the court may select the goal "substitute care pending court decision regarding termination of parental rights "based upon the parents' failure "to make reasonable efforts to correct the conditions that were the basis for removal of the child or to make reasonable progress toward the return of the child to the parent within nine months of an adjudication of neglected, abused or dependent minor." [750 ILCS 50/1D(m)]
- This goal is not available for selection by a caseworker. However, when the court selects this goal, the caseworker shall request a legal screening to determine whether the parent have failed to fulfill their obligations under the service plan and failed to correct the conditions that brought the child into care, and the case is approaching nine months since adjudication or more than nine months have passed since adjudication.

## Section 315.220 Substitute Care Pending Court Determination on Termination of Parental Rights

a) Description

The minor will be in substitute care pending a court's determination on termination of the parental rights of the minor's parents.

b) Criteria for Selection

Substitute care pending court determination on termination of parental rights may be selected as a permanency goal when a decision has been made to pursue termination of parental rights. This goal must be established when:

- 1) A request for termination of parental rights has been filed with the court; or
- 2) The goal has been set by the court; or

- 3) The case successfully passes a legal screening conducted by the Department to determine whether sufficient grounds for termination of parental rights exist and whether it is in the best interest of the child to empower the guardian to consent to adoption; or
- 4) A State's Attorney decides that sufficient grounds for termination of parental rights exist and that it is in the best interest of the child to empower the guardian to consent to adoption.
- c) This goal may be selected when termination of parental rights is in the child's best interests because of safety concerns, even if the child may not be adopted.
- d) If the court grants termination of parental rights, this goal shall be changed to the appropriate goal, as directed by the court and further services directed toward family reunification will not be offered.

### Section 315.225 Adoption

a) Description

An adoptive home will be sought for the child.

- b) Criteria for Selection
  - 1) Adoption may be selected as the permanency goal when parental rights of both parents have been terminated or relinquished through:
    - A) adoptive surrenders; or
    - B) consents, including consents to adoption by a specified person; or
    - C) action by the court to terminate parental rights with the appointment of the Department as guardian with the power to consent to the child's adoption; or
    - D) death; and
  - 2) adoption has been determined to be in the best interest of the child; and
  - 3) the child, if age 14 years or over, consents to the adoption.

### Section 315.230 Guardianship

a) Description

The guardianship of the minor will be transferred to an individual or couple on a permanent basis provided that the return home goals and the goal of adoption have been ruled out.

b) Criteria for Selection

Private guardianship may be selected as the permanency goal when:

- the reunification goal and the adoption goal have been ruled out as permanency goals for the child, but the child resides with a relative or foster home caregiver with whom the child has formed an emotional attachment and who is willing to accept legal responsibility for the child and assume a commitment to a permanent relationship that meets the child's needs over time; or
- 2) ordered by the court.
- c) Subsidized Guardianship

To be eligible for subsidized guardianship, the eligibility criteria described in 89 III. Adm. Code 302.405 must be met.

### **Section 315.235 Independence**

a) Description

The minor over age 15 will be in substitute care pending independence.

b) Criteria for Selection

Independence may be selected as the permanency goal for a minor over age 15:

- 1) provided that:
  - A) goals of return home, adoption, and guardianship have been ruled out; and
  - B) either an assessment has been made and the child has demonstrated the ability, capability, and willingness to care for him or herself, has become economically self-sufficient and/or is establishing a family of his or her own; or

### 2) provided that:

- A) an assessment has been made that a child who has a physical or mental disability demonstrates the ability, capability and willingness to care for themselves with proper support; and
- B) the child demonstrates the ability to achieve and maintain progress towards independence through continued cooperation with the service plan; or
- 3) provided that the goal of independence has been ordered by the court.

(Source: Amended at 26 Ill. Reg. 7720, effective May 24, 2002)

### Section 315.240 Cannot Be Provided for in a Home Environment

### a) Description

The minor will be in substitute care because he or she cannot be cared for in a home environment due to extreme or complicated physical or mental disabilities that cannot be sufficiently controlled in a home environment, provided that goals of return home, adoption, and guardianship have been ruled out.

### b) Criteria for Selection

Substitute care when a home environment is not appropriate may be selected as the permanency goal:

- for those children who have an extreme or complicated physical or mental disability as diagnosed by a physician and/or psychiatrist and no responsible adult who is able and willing to care for the child has been identified. A few children, due to their disability, need continued care in an intermediate or skilled nursing facility, or in a child care institution, provided that goals for return home, adoption, guardianship, and independence have been ruled out; or
- 2) when ordered by the court.
- c) Children with extreme or complicated physical or mental disabilities who require long-term care should not be confused with children who are in group homes or institutions in order to receive intensive, short-term treatment directed toward correcting problems that significantly interfere with life outside the institution. Substitute care for children who cannot be provided for in a home environment is not an appropriate permanency goal for children who are receiving short-term, intensive services in a group home or institution.

### **Section 315.241 Continuing Foster Care**

### a) Description

The guardianship of the minor will remain with the Department and the minor will be in continuing foster care, all other permanency goals having been ruled out.

### b) Criteria for selection

Continuing foster care may be selected as the permanency goal when:

- 1) the Department of Children and Family Services has custody and guardianship of the minor;
- 2) all other permanency goals have been ruled out based on the minor's best interest;
- 3) the court has selected the goal, having found compelling reasons to place the minor in continuing foster care;
- 4) the minor has lived with the relative or foster parent for at least one year; and
- 5) the relative or foster parent currently caring for the child is willing and capable of providing the child with a stable and permanent environment for the foreseeable future.

### c) Compelling reasons

Compelling reasons must be documented, reviewed and considered by the court, and include:

- 1) the minor does not wish to be adopted or to be placed in the guardianship of his or her relative or foster care placement;
- 2) the minor exhibits an extreme level of need such that the removal of the minor from his or her placement would detrimental to the child; or
- the minor who is the subject of the permanency hearing has existing close and strong bonds with a sibling, and achievement of another permanency goal would substantially interfere with the minor's sibling relationship, taking into consideration the nature and extent of the relationship, and whether ongoing contact is in the minor's best interest, including long-term emotional interest, as compared with the legal and emotional benefit of permanence.

(Source: Added at 35 Ill. Reg. 14934, effective September 1, 2011)

### **Section 315.245 Concurrent Planning**

### a) Description

Concurrent planning is a process whereby the Department or purchase of service agency will make reasonable efforts to return the child home within nine months after the child's placement in substitute care, while at the same time making it clear to the child's family that an alternative permanency plan for the child is being developed that will take effect if the parent do not make sufficient progress to enable the return home of their children within nine months.

### b) Criteria for Selection of Cases

Concurrent planning must be utilized for a child who has been removed from a family that meets the criteria described below unless sufficient evidence exists to seek expedited termination of parental rights. The criteria are:

- 1) the parent has another child for whom parental rights were involuntarily terminated and there have been no significant changes in conditions or behaviors in the interim;
- a finding that at birth the child's blood or urine contained any amount of a controlled substance as defined in Section 102(f) of the Illinois Controlled Substances Act, or a metabolite of a controlled substance with the exception of controlled substances or metabolites of such substances, the presence of which in the newborn infant was the result of medical treatment administered to the mother or the newborn infant, and that the biological mother of this child is the biological mother of at least one other child who was adjudicated a neglected minor under Section 2-3(c) of the Juvenile Court Act of 1987, after which the biological mother had the opportunity to participate in a drug counseling, treatment, and rehabilitation program;
- the family has a history, either through their own efforts or with clinical treatment or specialized social services, of repeated, failed attempts to correct conditions that resulted in child maltreatment:
- 4) there has been a single severe incident of abuse and/or neglect;
- 5) there has been abuse/neglect toward a child who is particularly vulnerable given the child's age, developmental stage and/or disability;
- 6) a child requires placement and has a sibling in out-of-home care because of the current caregiver's abuse or neglect;

- 7) the parent has a diagnosed mental illness that renders the parent unable to provide or protect the child and that, upon assessment, indicates:
  - A) a history of treatment without response;
  - B) the prognosis that the condition will respond too slowly to meet the child's needs according to the child's age and development; or
  - C) the parent in treatment continually disregards medication or other treatment interventions:
- 8) the parent has a developmental disability that, upon assessment, indicates that the parent may be unable to provide for, protect or nurture the child and the family has no other relatives or social supports able or willing to assist in parenting.
- c) If efforts to return the child home are unsuccessful, the Department or purchase of service agency will consider the alternatives described in Section 315.305 (When Reunification Is Inappropriate).

### Section 315.250 Applicability of Reunification Services

If the goal selected by the court is one of the reunification goals, reunification services will continue to be provided to the parents for this minor. If the court selects a goal other than a reunification goal, parent-child visitation will continue to occur (unless parental rights have been terminated), but all other services to the parents toward accomplishing reunification for this child will cease. See 89 Ill. Adm. Code 302.40 for a list of typical reunification services. If there are other children in the home for whom the Department or purchase of service agency is providing services, or other children in substitute care, those services will continue. If there are no other children in the home or in Department custody, the Department or purchase of service agency may provide information and referral services to the parent.

### SUBPART D: EVALUATION AND DECISIONMAKING

### Section 315.300 Evaluating Whether Children in Placement Should Be Returned Home

- a) When deciding whether to recommend to a court that children in placement should be returned home to their parents' care, the Department or purchase of service agency shall consider whether the parents have made reasonable progress in correcting the conditions that led to the removal of their children from the home. Reasonable progress on the part of the parents may include some or all of the following:
  - 1) they have learned and demonstrated their ability to assure the health, safety and development of the child;

- 2) increased capacity to parent and to assure the child's health and safety as demonstrated by successful parent-child visits, appropriate involvement in more parental responsibilities (e.g. doctor's appointments, parent-teacher conferences, group therapy, involvement in recreational activities, better financial management, etc.);
- an ability to care for themselves so that they can meet the needs of the child;
- 4) an improvement in parental choices, decisions and relationships that lead to a safer and healthier environment for their children;
- 5) their participation in the recommended services and demonstration of change, such as improved parenting, participation in counseling sessions;
- 6) their acceptance of responsibility for maltreatment of the child and show of empathy for the impact of the effects of the maltreatment on the child;
- 7) they have learned to ask for and accept help;
- 8) a better understanding of themselves resulting in an ability to identify warning signs and ask for help;
- 9) the presence of an ongoing support network consisting of other family members, neighborhood or community, church, etc;
- 10) demonstration of a willingness to develop a service plan that contains a plan for maintaining the safety of the child at home and an understanding of the merits of the plan.
- b) The Department or purchase of service agency shall consider the following as examples of a lack of reasonable progress on the part of the parents to correct the conditions that led to the removal of their children from the home and as good reasons to consider alternatives to return home:
  - 1) parent has an ongoing pattern as a perpetrator of domestic violence and refuses to participate actively in treatment services or initiates new relationships in which there is violence; and/or
  - 2) parent continues to reside with someone dangerous to the child and refuses to separate after having been advised of the dangers; and/or
  - 3) parent has an ongoing pattern as a victim of domestic violence and refuses to separate from the batterer or initiates new relationships in which there is violence and refuses to separate; and/or

- 4) parent fails to remedy, with the assistance of the Department or purchase of service agency and other community resources, housing or housekeeping standards that are a threat to health or safety or to seek suggested economic resources when lack of resources is a major barrier; and/or
- 5) parent continually misses visits with children, continually coming late for visits, or while visiting appears uninterested or is openly rejecting of the child or abusive or continually upsets children during visitation by verbal abuse, eliciting guilt, or by making unrealistic promises; and/or
- 6) parent who is restricted in ability to parent due to developmental disability has failed to make efforts or is unable to demonstrate skills necessary to ensure the health and safety of the child; and/or
- 7) parent's lifestyle continues to center around drugs/alcohol and addiction prevents him/her from parenting; and/or
- 8) mother gives birth to a second or subsequent substance exposed infant; and/or
- 9) parents has other children who have been in foster care for 12 months or more, attempts to reunite them have been unsuccessful and conditions have not changed substantially; and/or
- 10) parent continually misses appointments, cancels appointments with Department staff or purchase of service agency staff or staff of other service or treatment providers, or fails to be involved in the treatment; and/or
- parent otherwise fails to fulfill the tasks outlined in the service plan or cooperate with the provisions of the service plan or meet conditions established by the court that would, if the parent cooperated, correct the conditions that threatened the health, safety, and well-being of the children.
- c) The Department or purchase of service agency shall not recommend returning children home if parental concern for the child is shown only by examples which include but are not limited to:
  - 1) occasional, sporadic visits and contacts;
  - 2) elaborate or expensive gifts on holidays or birthdays; or
  - 3) statements of concern for the children that are not supported by actions consistent with their health, safety and well-being or by preparations for their return home.

### **Section 315.305** When Reunification Is Inappropriate

If the parents fail to demonstrate reasonable progress in correcting the conditions that led to the removal of the child within the time frames required by the permanency goal of return home which was assigned by the Department and/or the court, the following alternatives to return home shall be discussed with the parents:

- a) voluntary surrender of parental rights for purpose of freeing the child for adoption;
- b) consent to the adoption of the child by a specified person;
- c) involuntary termination of parental rights;
- d) private guardianship;
- e) continuing foster care.

(Source: Amended at 35 Ill. Reg. 14934, effective September 1, 2011)

### Section 315.310 Termination of Services and Planning for Aftercare

- a) Planning for the termination of services is an integral part of all service planning. From its earliest contacts with children and families, the Department or purchase of service agency shall focus on when services to the children and families shall end. In addition, when the Department is legally responsible for a child, the Department or purchase of service agency shall also focus on when and how the child shall be discharged from the Department's custody or guardianship and what aftercare services will be provided.
- b) If the child will be returned home from substitute care, the Department or purchase of service agency shall provide services for at least six months following return home of the child.
- c) Prior to closing a case, the Department or purchase of service agency will:
  - 1) conduct a review of the child's safety that includes:
    - A) a child safety and risk assessment protocol to include all members of the household, including a CANTS and LEADS check of all adults who reside or frequent the home; and
    - B) interviews with relatives, friends, or other persons who provide a support network for the family;

- 2) review all medical, school, clinical, and social service reports;
- 3) interview and observe the child alone out of the presence of the caregiver;
- 4) conduct a family meeting as described in Section 315.120;
- 5) petition the court for termination of the Department's custody or guardianship; and
- 6) complete a final service plan that outlines how the health, safety, and wellbeing of the children will be ensured and what aftercare services are needed.

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### DEPARTMENT OF CHILDREN AND FAMILY SERVICES

### **POLICY GUIDE 2005.05**

Distribution X and Z

### MATCHING FOR ADOPTION & PERMANENCY UNIT (MAP)

**RELEASE DATE:** October 20, 2005

**TO:** Rules and Procedures Bookholders, and DCFS and Purchase of

Service Agency (POS) Child Welfare Staff

FROM: Bryan Samuels

**EFFECTIVE DATE:** Immediately

### I. PURPOSE

The purpose of this Policy Guide is to inform staff of the role of the Matching for Adoption and Permanency Unit (MAP) within the DCFS Division of Field Operations.

### II. DESCRIPTION

The DCFS MAP unit was developed to support and assist child welfare worker's efforts to successfully match children with permanent homes. The MAP unit provides training, technical assistance, and hands-on support for workers. It can be utilized for assistance in facilitating permanency family commitment meetings, talking to youth about their permanency options, identifying and developing creative solutions regarding apparent barriers to permanency, providing accurate information on subsidies, developing or reviewing home studies, developing recruitment materials, assistance in completing the subsidy paper work or any other permanency related activity. The child welfare worker may seek assistance from the MAP unit or, when there is a lack of progress toward permanency, the case may be referred to the MAP unit for corrective action by DCFS executive staff including to the Office of Legal Services.

Case specific examples that prevent cases from moving toward permanency include:

- No adoptive or guardianship resource has been identified;
- The current placement is unwilling to commit to permanency;
- The current placement appears unable to meet the long-term permanency needs of the child in care; or
- The child, if between 12 and 15 years of age, expresses that he or she does not wish to be adopted.

There are other permanency specific issues, such as special needs, that require open discussion. However, involvement of the MAP unit to assist in the resolution of these issues is appropriate and recommended.



### III. REFERRALS

Referrals shall be made by mailing or faxing a completed **CFS 495-1, MAP Intake** form to the MAP unit at the following address or fax number:

DCFS-MAP Unit 6201 S. Emerald Chicago, IL. 60621 Fax: 773/371-6472

The MAP unit will review the cases submitted to them for assistance, referring those that will benefit from intervention to the supervisor of the MAP unit team for the child's region.

Referrals to the MAP unit can be made by any of the following:

- The DCFS Office of Legal Services' Joint Screening Committee (JSC), Adoption Resource Development Screening (ARDS);
- The DCFS HELP unit;
- Administrative Case Review through the chronic and critical feedback reports as outlined in **Policy Guide 2005.03**, **ACR Feedback Response Protocol**;
- DCFS Executive Staff; and/or
- Voluntary referral by any POS or DCFS casework professional, court-ordered or recommended by the child's guardian ad litem.

### IV. THE ACTION PLAN DEVELOPMENT STAFFING

Upon accepting a case for assistance and intervention, the MAP unit team will work with child welfare staff through an Action Plan Development Staffing. The purpose of the Action Plan Development Staffing is to develop a plan using the **CFS 495-3, MAP Action Plan** form, detailing the next tasks to be undertaken on behalf of the child and family. The MAP unit will play an active role in identifying the necessary tasks. Staffings are designed so that the MAP unit, DCFS or POS child welfare staff, and families can work collaboratively to facilitate resolution of the issue or issues that have been identified as an obstacle to achieving permanency.

Participants in the Action Plan Development Staffing include the child welfare worker (permanency worker), supervisors, and others with a role in case planning. Staffings may also include the child and/or any prospective permanent caregiver. Additionally, the MAP unit will work with Child and Family Teams to ensure that the permanency needs of children and families are adequately addressed.

The tasks reflected on the **CFS 495-3** form must be incorporated as tasks on the **SACWIS Client Service Plan** or on the **CFS 497, Client Service Plan** form as an addendum to the service plan, within 30 days of the Action Plan Development Staffing; per Rule 315, Permanency Planning, and must be discussed with the current caregiver. In cases where the action plan staffing results from an Adoption Resource Development

Screening, (ARDS), the action plan will also be reviewed as an ongoing part of the legal screening process.

All MAP unit interventions take place at the supervisory level. Cooperation with the MAP unit is mandatory.

Once the court or the case review process has involved the MAP unit on a case, the MAP unit cannot withdraw until an appropriate plan of action has been developed, and the permanency goal for the child has been achieved or satisfactory progress toward the goal is evident. MAP intervention may include Resource Development and Referral, Systems Facilitation, and Permanency Action Plan Development Staffing.

### V. SCHEDULING THE ACTION PLAN DEVELOPMENT STAFFING

When the MAP unit determines that an Action Plan Development Staffing is necessary, the MAP supervisor, and/or designee, will contact the permanency worker responsible for the case to schedule the staffing. Once scheduled, the MAP unit will review each case, and in collaboration with the DCFS or POS caseworker and/or supervisor, determine if other professionals should be invited to the staffing.

In order to prepare for the Action Plan Development Staffing, the worker must:

- Review the ACR Critical and Chronic Feedback Report, if available, with his or her supervisor;
- Follow the steps of response to a Chronic and Critical Feedback Report as outlined in **Policy Guide 2005.03**, **ACR Feedback Response Protocol**;
- Complete the CFS 495-2, MAP Permanency Progress Review Tool form; and
- Provide a copy of the current social history or Integrated Assessment report to the MAP unit for the Action Plan Development Staffing.

The caseworker or supervisor must send (preferably via Fax 773/371-6472) all requested supporting documentation to the MAP unit at least 4 working days before the staffing. Supporting documentation includes:

- A completed CFS 495-2, MAP Permanency Progress Review Tool form;
- The most current Client Service Plan;
- The most current social history, or integrated assessment report (if available); and
- All relevant clinical assessments.

The staffing will not be held if the MAP unit does not receive the documentation 4 working days before the staffing.

### VI. REPORTING

The MAP unit will send reports on a monthly basis, documenting its interventions to the following:

- Deputy Director, Division of Field Operations;
- Deputy Director, Division of Placement and Permanency;

- Deputy Director, Division of Purchase of Service Monitoring;
- Agency Performance Teams, and/or Regional Administrators;
- DCFS Office of Legal Services Joint Screening Committee (JSC), Adoption Resource Development Screening (ARDS); and
- Administrative Case Reviewer.

### VII. OUTCOMES AND CONCLUSION OF MAP UNIT INVOLVEMENT

MAP unit involvement in a case ends when one of the following is achieved:

- The client achieves permanency when either the adoption is finalized or guardianship is transferred;
- Sufficient efforts toward permanency are being made. An interim order for adoption has been entered, or the case has passed legal screening for guardianship and the caseworker is able to manage the case to completion without additional assistance;
- The identified barriers to permanency as outlined in the ACR alert have been successfully resolved and the case worker is able to manage the case to completion without additional assistance; or
- The Child and Family Team and the MAP unit have conducted a staffing and agree that the child's current placement is in the child's best interest. The caseworker must document the team's decision and the basis for this decision in the child's case record. The caseworker must also obtain recommendations from the child's service providers supporting the team's decision and include them in the case record.

When the Map Unit ends its involvement in a case, a **CFS 495-4, MAP Feedback** form will be completed and sent by the MAP unit to the child's caseworker, supervisor, APT liaison and the ACR reviewer (for ACR referrals). The child's caseworker shall place the completed **CFS 495-4** form in the child's case record.

### VII. ATTACHMENTS

- CFS 495-1, MAP Intake form
- CFS 495-2, MAP Permanency Progress Review Tool
- CFS 495-3, MAP Action Plan
- CFS 495-4, MAP Feedback form

These forms can be ordered in the usual manner, or may be found as templates on the SACWIS "T:" drive.

### VIII. QUESTIONS

Questions regarding this Policy Guide or the MAP Unit may be directed to Johnikutty Joseph, MAP Field Supervisor (773) 371-6463.

### IX. FILING INSTRUCTIONS

File this Policy Guide immediately following Rule 315, Permanency Planning.