



Rhode Island Department of Children, Youth and Families Department Operating Procedure

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|  | DOP Number: 700.0050 | Effective Date: August 25, 2024 | Page 1 of 17 |
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| Section: Case Management | | Title: Ongoing Safety Assessment and Service Planning | |
| Legal Authority: <ul style="list-style-type: none"> • Rhode Island General Law §42-72-10 • Rhode Island General Law §23-4.10 • Fostering Connections to Success and Increasing Adoptions Act of 2008, Pub. Law 110-351 • Patient Protection and Affordable Care Act, Pub. Law 111-148 • Preventing Sex Trafficking and Strengthening Families Act, Pub Law 113-183 • Title II of the Americans with Disabilities Act • Section 504 of the Rehabilitation Act • Rhode Island General Law §42-72-15: Bill of Rights for Children and Youth | | | |
| Related DOPs: <ul style="list-style-type: none"> • Vision, Mission and Guiding Principles; DOP: 100.0140 • Clients with Disabilities; DOP: 700.0425 • Assessing Reports of Child Abuse and Neglect and Child Safety Determinations; DOP: 500.0025 • Ongoing Engagement with Families Open to the Family Services Unit or Juvenile Probation; DOP: 700.0090 • Ongoing Family Functioning Assessment Intervention Manual • Searching for Family and Natural Supports; DOP: 700.0230 • Administrative Review; DOP: 700.0020 • Locating and Engaging Absent Parents; DOP: 700.0140 • Implementing the Indian Child Welfare Act; DOP: 700.0145 • Delivery and Coordination of Support Services; DOP: 700.0015 • Reasonable Efforts; DOP: 700.0005 • Educational Stability; DOP: 700.0150 • Concurrent Planning; DOP: 700.0130 • Obtaining Custody via Dependent/Neglected/Abused Petition; DOP: 1100.0000 • Adoption; DOP: 700.0055 • Legal Guardianship and Kinship Guardianship Assistance; DOP: 700.0155 • Prudent Parenting and Normalcy for Youth in Out-of-Home Care; DOP: 700.0250 • Family Time; DOP: 700.0030 | | | |

- [Expectant and Parenting Youth in Out-of-Home Care; DOP: 700.0085](#)
- [Youth Transition Planning and Support; DOP: 700.0115](#)
- [Supplemental Security Income \(SSI\); DOP: 1000.0000](#)
- [Annual Credit Report for Youth 14 and Older; DOP: 700.0165](#)
- [Voluntary Extension of Care; DOP: 700.0175](#)
- [Complaints and Appeals; DOP: 100.0040](#)
- [Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services; DOP: 800.0000](#)
- [Confidentiality; DOP: 100.0000](#)
- [Rights and Responsibilities of Persons Served; DOP: 700.0245](#)
- [Prevention Planning; DOP: 700.0260](#)
- [Contents and Format for Department Record Keeping; DOP: 700.0045](#)
- [Supportive Reunification Placements; DOP 700.0210](#)
- [DOP: 1100.0045; Voluntary Placement](#)

Related Forms:

- [Authorization to Obtain Form #007A](#)
- [Release Confidential Information Form #007B](#)
- [Formal Request for Hearing Form #016](#)
- [Service Plan Template Form #032](#)
- [Voluntary Extension of Care Agreement](#)
- [Proof of Foster Care Form](#)

I. PURPOSE

The Rhode Island Department of Children, Youth and Families (hereinafter the Department) utilizes the Safety Assessment through Family Engagement (SAFE) practice model for each child and family receiving services, from the initial contact to case closure. The SAFE practice model is grounded in family-centered, culturally competent, and strengths-based principles. All staff use standardized tools from the SAFE practice model throughout their work with a family to assess, plan, and evaluate progress. Families involved with the Department actively participate in developing and implementing their plan. The Department centers families and child safety in every decision and understands that family is defined broadly and includes children and youth, biological parents, adoptive families, extended kinship networks, legal guardians, and resource caregivers.

The SAFE practice model positions staff to authentically engage with families at every step in the process in accordance with the Department's vision, mission, and family-centered practice principles (refer to [DOP: 100.0140; Vision, Mission and Guiding Principles](#)). Authentic family engagement is a family-centered and strengths-based approach to making decisions, setting goals, and achieving desired outcomes for children, youth, and families. To achieve authentic engagement, the worker-client relationship must be based on honesty, trust, respect, and empathy as the driving force. Staff recognize and value the diversity of all families with respect to race, ethnicity, cultural background, sexual orientation and gender identity, special needs, and socioeconomic status. Staff practice cultural humility in understanding how a family's identities affect internal family systems and are strengths for asset-based interventions.

Title II of the American Disabilities Act and Section 504 of the Rehabilitation Act require that parents/caregivers with disabilities have a full and equal opportunity to participate in the Department's assessment and service planning process. To have an equal opportunity to participate and benefit from this process, the Department must consider a parent/caregiver's disability, both in terms of its impact on a parent/caregiver's ability to participate in the assessment itself and its effect on the parent/caregiver's capacity to safely care for their child, including whether services and supports are needed to ensure their child's safety, permanency, and well-being. It also means that when assessing parental capacity, the primary service worker may need to modify the assessment process for a parent/caregiver with a disability. Refer to [DOP: 700.0425; Clients with Disabilities](#).

Through ongoing open discussions, Department staff partner with families and community providers regarding client rights and responsibilities, permanency goals and progress, expectations and time frames, and access to timely services necessary to meet the safety needs of the children, youth, and families. Throughout the process, Department staff assigned to a family promote commitment to services by providing clear, transparent, and comprehensible information that enables parents and children to understand the Department's role, processes, concerns, and expectations, including the potential ramifications of not participating in services. Staff must value family members' input and perspectives regarding their experiences, strengths, risks, and needs, offer choices that respect the parent's role in their children's lives, and help family members retain self-determination whenever possible and appropriate.

Rhode Island General Law (RIGL) 42-72-10 and Department policy require a written service plan for the care and treatment of each child under the Department's supervision. Service plans establish behavior changes and supports that will strengthen the family and prevent the child's removal from their home; or, when a child must be removed, reunify the child and family promptly and establish a concurrent permanent placement when the child and family cannot be reunited.

Rhode Island Family Court Rules, Rules of Juvenile Proceedings: Rule 22 (c) requires the submission of the service plan within 30 days when there is a finding of Dependency/Neglect/Abuse on a petition filed by the Department. If a child is placed in out-of-home care, federal law (42 USC 675) and federal regulations (45 CFR 1356.21) require that each service plan for the child must include specific information to determine the appropriateness of and the necessity for out-of-home placement.

The Fostering Connections to Success and Increasing Adoptions Act of 2008 (Pub. Law 110-351) amended 42 USC 671 requires the state to make reasonable efforts to place siblings removed from their home in the same resource family home, adoption or guardianship placement; or facilitate visitation or ongoing contacts with those who cannot be placed together unless it is contrary to the safety or well-being of any of the siblings.

Pub. Law 110-351 also requires developing a transition plan for youth leaving the Department's care, and the Patient Protection and Affordable Care Act (Pub. Law 111-148) amended 42 USC 675 requires that additional information be included in the transition plan.

The Preventing Sex Trafficking Act of 2014 requires consultation with foster children aged 14 and older in the development of or revision to their service plan and requires the service plan to include a document describing the rights of the child to education, health, visitation, and court participation; and the right to stay safe and avoid exploitation.

When a primary service worker meets a new family, they build on the initial Family Functioning Assessment (described in [DOP: 500.0025; Assessing Reports of Child Abuse and Neglect and Child Safety Determinations](#)) to develop an Ongoing Family Functioning Assessment (OFFA). The OFFA identifies diminished caregiver protective capacities resulting in impending dangers and informs the development of the family's service plan.

Infants, children, and adolescents have different developmental needs. The primary service worker incorporates these various needs into the service plan and connects the child and their family to relevant, flexible, accessible, and culturally and linguistically appropriate services. Through regular contact and quality visits, the primary service worker continuously assesses family functioning, identifies necessary supports and services to enhance the caregiver's protective capacities, and evaluates progress toward behavioral change. Refer to [Ongoing Engagement with Families Open to the Family Services Unit or Juvenile Probation; DOP: 700.0090](#). Ongoing family functioning assessments and progress evaluations enable the Department to protect the child's safety, meet the child's and their family's needs, and determine when cases can be closed.

Department staff must work collaboratively when service planning with a youth dually supervised by Juvenile Probation and the Family Services Unit (FSU). Refer to [DOP: 800.0000; Transfer and Dual Supervision of Youth By Juvenile Probation and Family Services](#). For youth who are open to the Department due to an adjudication on juvenile petitions, the OFFA is completed based on the results of the Structured Assessment of Violence Risk in Youth (SAVRY).

II. TERMS DEFINED

"Administrative Review" means a review open to the participation of the child's parents and conducted by a panel of appropriate persons, at least one of whom is not responsible for the case management of or the delivery of services to either the child or the parents who are the subject of the review.

"Another Planned Permanent Living Arrangement (APPLA)" means a living arrangement for youth 16 or older under the Department's care and custody. Staff assists youth with an APPLA goal as they transition to self-sufficiency by connecting them to an adult permanency resource, equipping them with life skills, and, upon discharge, connecting them with any needed community or specialized services.

"Caregiver Protective Capacities" means personal and parenting behavioral, cognitive, and emotional characteristics specifically and directly associated with protecting one's children.

"Family Time," also known as "visitation," means regular, frequent, and progressive face-to-face contact between a child removed from their home and their family. Family time serves to maintain, strengthen, and/or redefine the parent-child relationship.

"Legal Guardianship" signifies a court-established bond between a child and caregiver designed to be enduring and self-sufficient. This bond is affirmed by the caregiver assuming specific parental rights over the child, encompassing protection, education, care, and custody.

"Ongoing Family Functioning Assessment (OFFA)" means a standardized assessment process that engages caregivers in a partnership to clarify what must change to enhance caregiver protective capacities and ultimately achieve child safety, permanency, and well-being.

"Primary Service Worker" means the DCYF caseworker with main casework responsibility for the child and family.

"Reasonable Efforts" means the Department's endeavors focused on delivering the assistance and services to uphold family preservation. Mandated by the Federal Title IV-E program, these efforts entail measures aimed at averting the necessity of removing a child from their home. If removal is necessary, the Department must make reasonable efforts to facilitate the safe and prompt return of the child to their family home.

“Resource Caregivers” means foster parents, kinship caregivers, residential placements, or any adults caring for a child in out-of-home placement.

“Reunification” means the planned process of reconnecting children in out-of-home care with their families utilizing various services and supports to the children, their families, and their resource caregivers or other service providers.

The “Safety Assessment through Family Engagement (SAFE) Practice Model” is a family-centric model that the Department uses to assess families. It enables staff to make decisions based on families’ strengths, considering any trauma they’ve experienced. The main goal is to keep children safe, especially if there are dangers that haven’t been controlled. The SAFE model uses specific tools and criteria to look at family behaviors, situations, and the needs of each child, as well as how well caregivers can protect them. Child safety concerns can change during the process of child protective services, so the SAFE model requires checking on a child’s safety multiple times, starting from the first assessment and continuing through the life of the case. The SAFE model informs a service plan that focuses on making positive behavior changes, managing safety, and ensuring children can return home or close their case safely when they’re in a stable, permanent situation. As the family’s case evolves, the SAFE model shifts to providing more support to reduce safety risks and strengthen caregivers’ abilities to protect their children.

“Young Adult” means an individual who has attained 18 years of age but has not reached the age of 21 and was in the legal custody of the Department on their 18th birthday due to the filing of a miscellaneous or dependency petition or the filing of a petition alleging child abuse or neglect, or was in foster care and adopted or placed in a legal guardianship where the adoption or guardianship agreement was executed on or after the youth’s 16th birthday and before their 18th birthday.

“Youth Development Center (YDC),” also known as the “Rhode Island Training School (RITS),” is the juvenile correctional facility in Rhode Island overseen by the Department’s Division of Youth Development.

III. PROCEDURE

- A. Ongoing Family Functioning Assessment (OFFA)
 - 1. The primary service worker develops and maintains the OFFA with the family using the protocols described in the [Ongoing Family Functioning Assessment Intervention Manual](#). The initial OFFA must be completed within 60 days of assignment.
 - a. The OFFA is completed in the Department’s electronic case management system.
 - 2. The primary service worker reviews the family’s progress and updates the OFFA at least every 90 days or whenever circumstances indicate a substantial change has occurred or is anticipated to occur within the family. The primary service worker submits the update to their supervisor for review and approval. Updates include the following components:
 - a. Child needs assessment
 - b. Caregiver and child progress assessment
 - c. Impending danger assessment
 - d. Safety decision
 - e. Impending danger safety plan determination
 - f. Impending danger safety plan
 - g. Conditions for return
 - h. Present danger assessment
 - i. Present danger safety plan (if applicable)
 - 3. The supervisor updates and approves the permanency goal at least every six months.

4. When a child with an active OFFA is removed from their home, the primary service worker must update the permanency goal and OFFA and obtain supervisory approval within 30 days.
 5. When a youth is involved with Juvenile Probation, the behavior change statements developed in the OFFA are based on the dynamic need areas identified in the Structured Assessment of Violence Risk in Youth (SAVRY).
- B. Family Engagement in Service Planning and Implementation
1. Department staff must attempt to personally interview family members, including children, in the family's home when appropriate. If inappropriate, the worker documents the reasons in the Department case record. Refer to [DOP: 700.0090; Ongoing Engagement with Families Open to the Family Services Unit or Juvenile Probation.](#)
 2. Ongoing communication and visits with the family, including individual, parent/child, and family interviews, are utilized to continuously gather information and assess family dynamics and functioning regarding safety and risk.
 3. Coordinated meetings occur with service providers and natural supports to the family throughout the Department's involvement to capture comprehensive information about the family and to ensure ongoing family engagement. Refer to [DOP: 700.0230; Searching for Family and Natural Supports.](#)
 - a. Meetings occur at a location appropriate to the family's needs.
 - b. A signed [Authorization to Obtain or Release Confidential Information \(Form #007A and Form #007B\)](#) must be obtained.
 4. The child should be given the opportunity to participate in service planning activities whenever possible and appropriate.
 - a. School-aged children can participate if they are verbal and understand the events in their lives.
 - b. As appropriate, the primary service worker promotes the child's self-sufficiency and informed decision making related to:
 - i. activities of daily living.
 - ii. practicing effective interpersonal communication and conflict resolution.
 - iii. their goals and services.
 - c. The primary service worker:
 - i. Reviews the plan with the child and solicits the child's input.
 - ii. Explains the plan and terms used in language the child can understand.
 - iii. Includes the child in periodic service planning meetings; and
 - iv. Includes the child in the administrative reviews as appropriate. Refer to [DOP: 700.0020; Administrative Review.](#)
 5. The Department is responsible for locating and engaging absent parents. Efforts to engage and re-engage the family are documented in the case record. Refer to [DOP: 700.0140; Locating and Engaging Absent Parents.](#)
 - a. If a putative father notifies the Department that he may be the father of a child in care, steps must be taken to determine paternity.
 - b. Once paternity is established, the father is included in the safety assessment and service planning process.
- C. Equity in Safety Assessment and Service Planning
1. Department caseworkers should intentionally examine their thoughts and behaviors toward others. When conducting assessments, the primary service worker must rely on evidence, not thoughts or feelings.
 2. Strategies to enhance equity in service planning include but are not limited to:
 - a. Taking a neutral perspective.
 - b. Understanding the context of the current situation.
 - c. Improving decisions by asking a colleague for input.

- d. Using a trauma-informed lens to understand the family's perspective better.
 - e. Being aware of one's own biases and prejudices about families and the ability to work together in partnership with them while practicing cultural humility.
 - f. Establishing the purpose of involvement with each family.
 - g. Being consistent, reliable, open, clear, and honest with families.
 - h. Disclosing information to families while respecting the confidentiality of some information.
 - i. Understanding families' experiences, current situations, concerns, strengths, protective capacities, and potential.
 - j. Validating the significant role of each family member in developing a family service plan.
 - k. Working with the family to understand the importance of maintaining connections with siblings, relatives, and fictive kin.
 - l. Exploring and honoring the cultural, racial, ethnic, linguistic, and religious or spiritual backgrounds of children, youth, and families, respecting differences in sexual orientation and gender identity, and providing culturally appropriate resources and referrals to service providers.
3. When the case involves an American Indian child and family, the Department must:
- a. Provide the tribal or local American Indian representatives an active role in all service planning, monitoring, and service delivery, including assessment, permanency planning, transition planning, case closing, and aftercare; and
 - b. consider and prioritize culturally relevant resources available through or recommended by the tribe or local Indian organization. (Refer to [DOP: 700.0145; Implementing the Indian Child Welfare Act.](#))

- D. Safety Assessment and Service Planning for a Child or Parent with a Disability
- 1. The primary service worker's safety and risk assessment includes identifying whether a child or parent has a disability. If so, the primary service worker must learn about a parent or child with a disability, including the strategies they use, the support they need in their daily lives, and if their disability affects their family functioning.
 - 2. The primary service worker must ensure that accommodations are made with the child and/or parent with a disability to support safety assessment and service planning activities. Refer to [DOP: 700.0425; Clients with Disabilities.](#)
 - a. When assessing parental capacity, the Department may need to modify the assessment process for a parent with a disability. Reasonable modifications could include asking questions using plain language and simpler terms, conducting the assessment in a home-like environment, and permitting breaks as needed due to a disability or medical condition.
 - 3. Parents with disabilities are assessed on an individualized basis.
 - a. It must be a fact-specific inquiry that evaluates the strengths, needs, and capabilities of a parent with a disability based on objective evidence, personal circumstances and demonstrated competencies.
 - b. Parental capacity determinations must not be based on stereotypes or generalizations about individuals with disabilities.
 - 4. The primary service worker may need to observe a parent with a disability in their natural home environment over some time to better support the parent in creating and meeting their service plan goals.
 - 5. The primary service worker should discuss with their supervisor if they believe that a referral for parental capacity evaluation will support the assessment and service planning process.

6. The primary service worker must collaborate with service providers to help identify and understand disabilities and recommend interventions, supports, and accommodations for both the child and the parent.
7. When the primary service worker identifies that a child has a disability, the primary service worker or other Department staff, as appropriate, collaborates with the child's medical providers, treatment providers, and (when applicable) the child's attorney, Guardian Ad Litem, or Court Appointed Special Advocate to ensure coordinated planning and interventions.
8. The primary service worker updates the Department's electronic case record to include any disability-related services, assistance, or accommodations (such as a parent aide or interpreter) that the Department must provide.

E. Family Service Plan

1. The primary service worker develops and maintains the family service plan to address the findings in the OFFA.
2. The family service plan is a written document that is individualized, strength-based, and may include time-limited goals and actions.
3. The family service plan includes, at a minimum, the following:
 - a. The permanency goal for the child (refer to Section E below).
 - b. A plan to ensure that the child receives safe and proper care.
 - c. Summary of services offered to the child and parents and written justification for how the services provided to the parents aim to improve the conditions that initiated the Department's involvement (refer to [DOP: 700.0015; Delivery and Coordination of Support Services](#), [DOP: 700.0005; Reasonable Efforts](#), and the [OFFA, Behavior Change Assessment](#)).
 - d. The health and education records of the child, including the most recent information available regarding:
 - i. the names and addresses of the child's health and educational providers.
 - ii. the child's grade level performance.
 - iii. the child's school record.
 - iv. the child's current IEP/504 plan, if applicable.
 - v. a record of the child's immunizations.
 - vi. the child's known medical problems.
 - vii. the child's medications; and
 - viii. any other relevant health and education information concerning the child determined to be appropriate by the Department.
 - e. Details regarding the Department's due diligence to identify and provide notice to the child's relatives (refer to [DOP: 700.0230; Searching for Family and Natural Supports](#)).
 - f. A description of the resource family home or residential program in which a child is placed, including a discussion of the safety and appropriateness of the placement, if applicable.
 - g. How the Department will implement the judicial determination made concerning the child.
 - h. How all the child's needs are met while in out-of-home care, if applicable.
 - i. How to facilitate the safe return of the child to the home or the permanent placement of the child if the child is placed in out-of-home care. Refer to Section O, Planning for Reunification.
 - j. Details regarding the services provided to the resource caregivers, if applicable.
 - k. Plans for ensuring the educational success and stability of the child, including:
 - i. Assurances that each placement of the child in care considers the appropriateness of the current educational setting and the

proximity to the school in which the child is enrolled at the time if being moved to an out-of-home placement. (Refer to [DOP: 700.0150; Educational Stability](#)).

- ii. How the child will be supported to achieve their full educational potential through:
 - 1) Enrollment and participation in school and other educational programs that promote positive development.
 - 2) Regular and ongoing communication and collaboration between the primary service worker, service providers, educators, resource families or residential treatment providers, and parents regarding the child's educational achievements and challenges, as well as any social or behavioral issues in the school setting.
 - 3) Stability in their home schools unless it is determined not to be in their best interest.
 - 4) Educational assessments and an individual education plan when needed.
 - 5) Tutoring; and
 - 6) Advocacy.
- l. If applicable, how the Department carries out the voluntary placement agreement. Refer to [DOP: 1100.0045; Voluntary Placement](#).
- m. A Transition to Adulthood Plan for any youth in care aged 14 or older. Refer to Section H below.
- 4. Any change in the service plan that does not alter the permanency goal for the child is entered as an addendum to the service plan. Changes must be acknowledged by the signature of all parties who originally signed the service plan. Refer to Section J below.

F. Permanency Goal

- 1. Each family service plan includes a permanency goal specific to the family's situation, including a projected date for achieving the identified permanency goal.
- 2. The primary service worker and supervisor may develop a concurrent plan simultaneously to abbreviate the amount of time that a child remains in care by exploring other permanency options should reunification not be possible. Refer to [DOP: 700.0130; Concurrent Planning](#).
- 3. In compliance with federal law, the Department confers with the family to review the permanency plan of each child in placement at least every six months (refer to [DOP: 700.0020; Administrative Review](#) and [Obtaining Custody via Dependent/Neglected/Abused Petition; DOP: 1100.0000](#)).
- 4. Initial permanency goals include:
 - b. For a child remaining at home, the permanency goal is maintaining the child at home.
 - i. The child's safety must be assured.
 - ii. The family service plan describes the services offered and provided to prevent the removal of the child from the home, including individual services provided to each parent and child. Refer to [DOP: 700.0005; Reasonable Efforts](#).
 - iii. When this goal is selected, the primary service worker indicates in the Department's electronic case management system whether the child is at imminent risk of being placed in out-of-home care.
 - c. For a child in placement, the initial permanency goal is reunification in nearly all situations with specific exceptions as approved by the family court.

- i. Service planning is directed toward strengthening the caregiver's protective capacities, addressing the behaviors that led to the child being unsafe, and consequentially addressing the issues that required the child to be removed from their home.
 - ii. The service plan details:
 - 1) a safe living arrangement for the child in the least restrictive (most family-like) setting available.
 - 2) the proximity of the child's placement to the home of the parents.
 - 3) a plan for placement that is consistent with the best interests and special needs of the child; and
 - 4) the reasons why such a placement is in the child's best interests.
 - d. For youth sentenced to the Youth Development Center (YDC), the initial permanency goal is generally reunification.
 - i. For youth transferring from the Family Services Unit (FSU) or Juvenile Probation, the goal reflects prior history.
 - ii. At the discharge/transition meeting, an appropriate permanency goal is identified after a review of the youth's and family's needs and best ensures the youth's rehabilitation and reintegration into the community.
- 5. When reunification is not viable, the preferred permanency goal is adoption by relatives, resource caregivers, or a licensed adoptive resource.
 - a. The service plan includes documentation of the steps the Department has taken to place the child/youth with an adoptive family and to finalize the adoption.
 - b. At a minimum, such documentation includes child-specific recruitment efforts, such as using state, regional, and national adoption exchanges, including electronic exchange systems, to facilitate orderly and timely in-state and interstate placements. Refer to [DOP: 700.0055; Adoption](#).
- 6. If the Department and the family court have determined that reunification and adoption are not viable permanency options and that it is in the child's best interest to be placed with a legal guardian, the permanency goal is changed to guardianship.
 - a. The service plan documents the Department's steps to determine that it is not appropriate for the child to be returned home or adopted.
 - b. For a child whose permanency plan is placement with a legal guardianship with potential receipt of kinship guardianship assistance payments, refer to [DOP: 700.0155; Legal Guardianship and Kinship Guardianship Assistance](#).
- 7. Another Planned Permanent Living Arrangement (APPLA) is a permanency option used when other options, such as reunification, relative placement, adoption, or legal guardianship, have been ruled out. APPLA placements include permanent placement with a fit and willing relative, a planned living arrangement/independent living, and planned living arrangement/other.
 - a. APPLA is appropriate only when the Family Court has determined that the Department has demonstrated why it is not in the child's best interest to be placed permanently with a parent or relative or in a guardianship or adoptive placement.
 - i. These compelling reasons are re-examined at each Administrative Review (refer to [DOP: 700.0020; Administrative Review](#)) and every permanency hearing to assess whether a more appropriate permanency option is possible, such as:
 - 1) return home.
 - 2) be placed for adoption.
 - 3) be placed with a legal guardian; or

- 4) be placed with a fit and willing relative.
 - b. APPLA placements must meet the youth's normalcy needs (refer to [DOP: 700.0250; Prudent Parenting and Normalcy for Youth in Out-of-Home Care](#)).
 - c. The service plan for young adults with the goal of APPLA documents:
 - i. The steps to finalize placement, including child-specific recruitment efforts to facilitate an orderly and timely in-state and interstate permanency placement when the permanency goal is or becomes APPLA.
 - ii. Who will be the permanency connection for that youth, if identified, and how the Department is working to maintain that connection.
 - d. The Adoption and Safe Families Act indicates that a fit and willing relative can provide APPLA and that termination of parental rights does not have to occur within the allotted time frame if a compelling reason is provided to the Family Court.
 - i. A relative may be fit and willing to care for the child without being prepared to consider legal guardianship or adoption.
 - ii. When determining if placement with a fit and willing relative is appropriate, the primary service worker must consider the relationships among the child, parent(s), and relative(s).
 - iii. A compelling reason is documented and provided to the Family Court, addressing the established relationships and why neither adoption nor guardianship is a viable permanency option.
- G. Family Time (Visitation) Plan
- 1. Each service plan must include a family time plan (refer to [DOP: 700.0030; Family Time](#)) if the child is in out-of-home placement.
 - 2. Family time plans include details specific to the following:
 - a. Parent/guardian visits
 - b. Sibling visits
 - i. The Department must make reasonable efforts to place siblings together in the same foster care, adoption, or guardianship placement unless it is contrary to the safety or well-being of any siblings.
 - ii. If siblings cannot be placed together because it is contrary to the safety or well-being of any siblings or because a sibling is a YDC resident, the Department must make reasonable efforts to facilitate visitation or ongoing contact with siblings that cannot be placed together.
 - c. Other family or kin visits such as grandparents, aunts, uncles, and family friends
- H. Youth 14 Years of Age and Older
- 1. Early in the casework relationship, the primary service worker informs youth on their caseload that they can provide information and assist them in securing needed services related to reproductive care. This includes but is not limited to sex education, gynecological services, and birth control options. The primary service worker practices meaningful youth engagement when working with expectant and parenting youth. Refer to [DOP: 700.0085; Expectant and Parenting Youth in Out-of-Home Care](#).
 - 2. The primary service worker begins transition planning when a youth reaches age 14. The plan is documented in the Transition to Adulthood section of the Service Plan.
 - 3. The Transition to Adulthood Plan (TAP), including revision or additions, is developed in consultation with the youth and, at the option of the youth, up to two

- members of the service planning team chosen by the youth. Refer to [DOP: 700.0115; Youth Transition Planning and Support](#).
4. The primary service worker describes the programs and services to help the youth prepare for the transition from foster care to successful adulthood.
 - a. The TAP allows the youth to execute a health care power of attorney per [RIGL 23-4.10](#).
 - b. The plan can also include assistance with federal benefits as appropriate and in conformance with [DOP: 1000.0000; Supplemental Security Income \(SSI\)](#).
 5. Starting at age 14, each youth in out-of-home care receives information about consumer credit checks and a copy of their credit report on an annual basis in accordance with [DOP: 700.0165; Annual Credit Report for Youth 14 and Older](#).
 6. The Service Plan includes a copy of the [Rhode Island Bill of Rights](#) for Children and Youth in Out-of-Home Care for each youth 14 or older; it also includes a signed acknowledgment by the youth that the youth has been provided with a copy of the Bill of Rights and that the rights listed in the document have been explained to the youth in an age-appropriate way.
 7. The primary service worker and other representatives of the youth, as appropriate, provide the youth with assistance and support in finalizing the TAP in the following instances:
 - a. During the 90 days immediately before the date in which a youth in foster care will attain 18 years of age if the youth elect not to enroll in the Voluntary Extension of Care (VEC) Program.
 - b. During the 90 days immediately before the date a young adult in the VEC program will attain 21 years of age.
 - c. As soon as possible, if the young adult is enrolled in the VEC program chooses to exit the VEC program before their 21st birthday. Refer to [DOP: 700.0175; Voluntary Extension of Care](#).
 8. The final TAP documents the skills the youth has developed to gain independence and transition to successful adulthood and includes specific options available to the youth. Refer to [DOP: 700.0115; Youth Transition Planning and Support](#).
 9. With respect to youth aged 14 or older, any revision or addition to the plan, is completed in collaboration with the youth, who has the option to designate up to two case plan participants who are not resource caregivers of, or a caseworker for, the youth.
 - a. The Department reserves the right to reject an individual selected by a youth to be a member of the case planning team at any time if the Department has reasonable cause to believe that the individual would not act in the youth's best interests.
 - b. The youth may designate one individual to be a member of their service planning team. This individual may be designated to be the youth's advisor and, as necessary, advocate for the application of the reasonable and prudent parent standard.
- I. Transition planning for adjudicated residents of the Youth Development Center (YDC)
1. Transition planning for adjudicated residents of the YDC begins in the initial Individualized Treatment Plan (ITP) meeting and is pursued consistently throughout the bi-monthly review process.
 2. The final treatment team meeting occurs one to two weeks before the adjudicated resident's projected end of sentence to ensure that services identified during the ITP process and through the bi-monthly reviews are in place to support the youth's transition.
 - a. The treatment team invites all service providers working with the youth to this meeting and ensures that the transition plan is comprehensive. The

meeting includes any additional Departmental, provider agency, and community resources necessary to support the resident's successful transition.

- b. If the treatment team concludes that a resident has completed all required programming and has suitable discharge/transition plans in place, the team recommends to the Superintendent that the Family Court be petitioned to consider early release. This recommendation is accompanied by a report, which includes the post-release plan summarizing the resident's progress at the YDC, specifying any community placements, noting where the resident will live upon release and what after-care programming the resident will receive, and setting out the grounds for the recommendation.
- c. The treatment team may also conclude that the resident has critical treatment needs that cannot be met at the YDC and should follow the same plan as above to seek the youth's release.

J. Finalizing the Family Service Plan

1. The primary service worker obtains signatures on the family service plan to confirm that all parties participated in its development, review, and revision and were provided the opportunity to agree or disagree with its content.
2. The following individuals sign the family service plan:
 - a. Parents/guardians
 - b. Children 14 years of age or older (with the capacity to participate)
 - c. Primary service worker(s) and supervisor(s)
 - d. Resource caregivers or service provider representatives who are involved in developing the family service plan and are directly responsible for providing the services prescribed in the service plan.
 - e. Pre-adoptive parents, in cases where parental rights have been terminated, and the child is in a pre-adoptive home where the resource caregivers have initiated the adoption process.
 - f. Up to two individuals who may have been chosen by the youth aged 14 years or older to serve as a member of the case planning team.
3. Each party signing the family service plan has the right to disagree with the content of the plan and appeal implementation of the plan. Refer to [DOP: 100.0040: Complaints and Appeals](#).
 - a. The primary service worker must explain the Department's appeal procedure to the parents and child, to the extent of their ability to understand, at each signing of the family service plan.
 - b. The primary service worker assists each parent and child to participate in the appeal process by providing, at a minimum:
 - i. [DCYF Form #016, Formal Request for Hearing](#).
 - ii. Instructions for completing the form; and
 - iii. Guidance on how to process the appeal through the various stages.

K. Timeframes for Completion, Review, and Approval of the Service Plan

1. The primary service worker completes the initial service plan within 60 days of removal from the home or under dual supervision with FSU and the Division of Youth Development (DYD).
 - a. If adjudication occurs on a Dependency, Neglect and/or Abuse petition before the timeframe above, the service plan is developed and submitted to the Family Court within 30 days of the adjudication.
 - b. Subsequent service plans are reviewed by the assigned primary service worker every 90 days or within 30 days of a change in the permanency goal. The permanency goal (commonly referred to as the "bookends") is

- updated every 6 months in the Department's electronic case management system.
- c. For a child active in FSU/Probation where child abuse or neglect is subsequently indicated, the primary service worker makes any needed changes in an existing service plan within 30 days of the completed investigation. If a youth is only open to probation when abuse or neglect is subsequently indicated, an FSU worker must first be assigned to service plan with the family to address the abuse/neglect issues.
 - d. Transition planning occurs during the timeframe outlined above in Section I.
2. Youth Development Center (YDC) adjudicated residents:
 - a. The initial service plan is completed 30 days following adjudication for adjudicated residents.
 - i. The service plan is developed during the initial service planning meeting, during which the treatment team examines all material gathered during intake.
 - ii. The clinical director or their clinical designee chairs the treatment team, which includes the unit manager, a member of the education/vocational education staff, the clinical social worker, a juvenile program worker (JPW), the resident, the resident's parents/guardians, and other resource personnel, including, as appropriate, a psychiatrist, psychologist, physician, or other staff.
 - iii. For eligible residents for Special Education Services, the service planning and Individual Education Plan (IEP) processes are closely coordinated.
 - b. The primary service worker at the YDC is responsible for creating and maintaining the resident's service plan.
 - c. The YDC Education Program representative enters educational information for the resident in the electronic case record.
 - d. The unit manager is responsible for overseeing the implementation of the resident's service plan and bringing it to the appropriate staff's attention.
 - e. The service plan is reviewed and, if appropriate, revised at the bi-monthly review meeting.
 - i. A bi-monthly review is chaired by the unit manager and attended by the treatment team. This review is required for all adjudicated residents.
 - ii. The treatment team considers progress in locating community placements for residents and providing other services prescribed in the service plan.
 - iii. The unit manager documents the date of the bi-monthly review in the electronic case management system, individuals who were invited, and those who attended.
 - iv. The clinical social worker revises the service plan if appropriate.
 - f. A new service plan is completed by the assigned primary service worker at six-month intervals.
 - i. This generally occurs at the third bi-monthly review.
 - ii. A new service plan is also completed within 30 days of a change in the permanency goal.
 - g. In dual supervision cases, staff communicate and collaborate around casework responsibilities and decisions. Refer to [DOP: 800.0000; Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services](#).
 3. The completed service plan is sent to the primary service worker's supervisor for final approval.
 4. Once a service plan is incorporated into a court order, any change in the plan must be submitted to the court in the form of a motion filed in advance of the

court date. This motion is filed in conjunction with Department legal staff with notice provided to other involved parties.

- L. Distribution of the Service Plan
 1. The primary service worker must use discretion to maintain the family's privacy. A signed [Authorization to Release Confidential Information \(Form #007A\)](#) must be obtained when appropriate. Refer to [DOP: 100.0000; Confidentiality](#), and [DOP: 700.0245; Rights and Responsibilities of Persons Served](#).
 2. The service plan is included in referral packets for treatment providers and out-of-home caregivers.
 3. The original signed family service plan is filed in the case record. A copy is provided to the parents and children, if age appropriate, and to each outside agency involved in developing the service plan or directly responsible for providing services prescribed in the service plan.
 4. The Educational/Medical Statement is updated and provided to the foster parent/provider at the time of each placement. The Educational/Medical Statement is provided to the resource caregivers separate from the service plan if it is not appropriate for the caregivers to receive the entire service plan.
 5. Copies of the service plan are periodically provided to the Family Court:
 - a. Within 30 days of adjudication on a Dependency/Neglect/Abuse petition.
 - b. No less than annually at the time of the Permanency Hearing. Refer to [DOP: 1100.0000; Obtaining Custody of Child through the Dependent/Neglect/Abuse Petition](#).
 - c. At the time of the Family Court's review of voluntary placements.
 6. A copy of the Service Plan is given to the Court Appointed Special Advocate or Guardian Ad Litem.

- M. Achievement of Service Plan Goals
 1. Each child has either an administrative review or permanency hearing every six months to assess each child's status in permanency and the family's progress towards achievement of service planning goals. Refer to [DOP: 700.0020; Administrative Review](#) and [DOP: 1100.0000; Obtaining Custody of Child via the Dependent/Neglect/Abuse Petition](#).
 2. If the continuation of reasonable efforts is determined to be inconsistent with the permanency plan for the child, reasonable efforts are made to place the child promptly in accordance with the permanency plan, including, if appropriate, through an interstate placement, and to complete whatever steps are necessary to finalize the permanent placement of the child.

- N. Prevention Planning
 1. The Department's Prevention Plan builds upon its mission of strengthening the capabilities of parents and caregivers by ensuring that resources are directed to keep families safely together, nurture family bonds and prevent the need for placement in out-of-home care.
 2. For purposes of the Title IV-E prevention services program, a child is defined as:
 - a. A child who is a candidate for prevention services can remain safely at home or in a kinship placement with receipt of services or programs.
 - b. A child in out-of-home care who is a pregnant or parenting youth.
 3. Following the referral to a Family First Prevention services provider, the primary service worker is responsible for completing all safety assessments in accordance with [DOP: 700.0260; Prevention Planning](#).

- O. Planning for Reunification
 1. Whenever possible, to facilitate a smooth transition to reunification:
 - a. Children and parents are involved in decision-making.

- b. Children, parents, and caregivers are provided with sufficient advanced notice that children will return home.
 - c. A graduated process for visitation enables both children and parents to prepare for reunification.
 - d. Service providers are involved in preparation for reunification and notified when reunification has occurred.
2. Parents are prepared for the return of their children through support and guidance that helps them to:
 - a. Understand expectations, responsibilities, and potential challenges.
 - b. Develop strategies for providing appropriate care, managing children's behavior, meeting any special needs of children, and maintaining behavior changes identified in the Ongoing Family Functioning Assessment.
 - c. Consider how everyday living and family relationships may change.
 - d. Understand how children may react and behave as they adjust to the return home.
 - e. Explore any anxiety, uncertainty, or ambivalence that parents may feel.
 3. Children receive individualized, age and developmentally appropriate support and guidance that help them explore their feelings about reunification and prepare for the return home.
 4. The Department collaborates with out-of-home resource caregivers to explain their role in facilitating reunification, help them explore and cope with emotions they may feel because of the decision to reunify, and clarify whether there will be opportunities for contact with children following reunification.
 5. When children are reunified with their families following out-of-home care, a DCYF staff member visits the child in the home on the day of the return or the day following the return to confirm safety.
 6. The primary service worker must notify the DCYF Educational Support Services staff through the DCYF Every Student Succeeds Act (ESSA) mailbox (DCYF.ESSA@dcyf.ri.gov) when youth are entering a Supportive Reunification placement so that bussing arrangements can be terminated, if applicable.
 7. The primary service worker must notify the school that the child has been reunified.
 8. If the child/youth is returning home as a supportive reunification placement, the primary service worker visits the home no less than once monthly until the family's case is closed by the family court, in accordance with [DOP: 700.0090: Ongoing Engagement with Families Open to the Family Services Unit or Juvenile Probation](#). Also refer to [DOP 700.0210: Supportive Reunification Placements](#).

P. Case Closure and Aftercare

1. The primary service worker regularly discusses case closing with the family during the comprehensive assessment and service planning process.
2. The primary service worker develops an aftercare plan with children and families in before case closing that identifies short- and long-term needs and goals and facilitates initiating or continuing needed supports and services, including crisis resources.
3. Planning for case closing involves the primary service worker, the child, family members, resource caregiver, and other supportive people chosen by children and families, as appropriate.
4. When children have remained or been reunified with their families, the primary service worker discusses with the family the successful changes in behaviors and conditions that reduced risk to the child and strategies for maintaining those changes.
5. For youth who are adjudicated on a juvenile petition, the case closes at the end of the probation period as ordered by the court, or in the event of a violation of

probation when the violation is resolved. When youth are dually supervised in Juvenile Probation and FSU, the primary service worker must follow all case closure procedures as described in [DOP: 800.0000; Transfer and Dual Supervision of Youth by Juvenile Probation and Family Services.](#)

6. Before closing a case to the Department, the following must be completed:
 - a. The primary service worker and supervisor discuss the plan to close the case to the Department.
 - b. The primary service worker confers with collaborating service providers and tribal representatives, as appropriate, and requests a written summary detailing the provision of services.
 - c. If the primary service worker and supervisor believe that identified behavior changes have been resolved, the worker must schedule a review with the Division of Legal Services before terminating the case to the Department.
 - d. Cases with legal status require collaboration with the court to ensure that jurisdiction is terminated before the case is closed.
 - e. After completing the above (a.-d.), the supervisor closes the case in the Department's electronic case management system and sends any hardcopy information to the Records Center (refer to [DOP: 700.0045; Contents and Format for Department Record Keeping.](#)).
7. Youth leaving out-of-home placement due to attaining 18 years of age, or up to age 21 if seriously emotionally disturbed or with a functional developmental disability, or youth enrolled in the VEC Program, must receive the following documents upon discharge from the Department unless the youth has been in care for less than six months:
 - a. an official or certified copy of the United States birth certificate of the child.
 - b. a Social Security card issued by the Commissioner of Social Security.
 - c. health insurance information.
 - d. a copy of the youth's medical records.
 - e. a copy of the youth's education records.
 - f. proof of foster care form.
 - g. a driver's license or state issued identification card that meets the requirements of the REAL ID Act of 2005 (Pub. Law 109-13).
8. When a child is reunified, and legal custody is returned to the parent simultaneously, the primary service worker continues to record a discharge from all placements for the reason of reunification and creates the appropriate living arrangement record.
9. The primary service worker follows up on the aftercare plan, as appropriate, when possible, and with the permission of children and families.