

400 ADOPTION

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400.2 Philosophy And Purpose

The Utah Department of Health & Human Services (DHHS), Division of Child and Family Services Adoption Program helps children who cannot return safely to their parents to become members of an adoptive family that can meet the unique needs of the child.

401 Preparing A Child For Adoption And Other Permanency

Major objectives:

- A. Help a child to understand that everyone needs family.
- B. Children do not have to choose to love only one family.
- C. Children who lose their original family will grieve.
- D. Address adoption myths.
- E. Healing and becoming part of a new family is a process that takes time.

Practice Guidelines

- A. The caseworker will help the child, within their cognitive ability to understand and age, that all people need a family. While the child cannot live with their parent(s) they are living with another family to take care of them. Conversations are a process that will need to happen often and over time and include the child and the caregivers.
 - 1. Honestly share information about why the child was removed from their parents and why they are (or will be) living with another family.
 - 2. Conversations about a child's parents must be done in a manner that does not disrespect or disparage the parents.
 - 3. Help explore with the child emotions about living in an out-of-home placement and the child's grief and losses.
 - 4. Assure the child it is not their fault for being removed from their parent(s).
 - 5. Help child understand that they can feel affection for more than one family. Caring about their caregiver does not mean they do not continue to love their parents.
- B. When the court discontinues reunification efforts, the caseworker will talk with the child, within the cognitive abilities and age, to help them understand what the court ruling will mean to them. This conversation with the child may include supportive caregivers.
 - 1. Help the child explore their emotions about the parents not working towards getting the child home.
 - 2. Discuss how the child's parents will continue to be involved in their life. If the parents will not have contact with the child, help the child understand.
 - 3. Address the child's concerns, worries, grief and loss, and other emotions.
 - 4. Empower the child to be involved in planning about their future.
 - 5. Reinforce the concept that people need a family and encourage the child to help define family.
 - 6. If the child is living with the family they will be adopted by or knows the family who will adopt them, address divided loyalties, family and cultural connections, and other related issues.

- a. If the child is not living with the family who will adopt them, encourage the child to be part of the process of identifying kinship options, as well as traits or specific factors that are important to the child.
- C. When the courts terminate the parents' rights or the parents voluntarily relinquish their parental rights, help the child understand within the cognitive ability and age, what this means for the child. This conversation will be with the child and include supportive caregivers.
 1. This is a time of profound loss for most children. Help caregivers and the child's therapist understand the grief this kind of loss brings up for a child, and help plan the additional support the child will need.
 2. Honestly talk with the child about the facts and reasons the parents lost their rights in a way that does not disrespect or disparage the parents.
 3. Help the child with the strong emotions and behaviors that might be connected to grief and loss. Help the child understand and develop plans to address their grief and loss.
- D. If the child participates in therapy, the caseworker will keep the child's therapist updated as to conversations about what the child is dealing with in terms of understanding the role of family, the child's grief, losses, divided loyalty, and other emotions so the therapist can help the child and caregiver through the difficult process of becoming part of a different permanent family.
- E. When the child's primary goal becomes adoption, help the child understand what it will mean for the child.
 1. Discuss with the child what becoming legally part of a family that is not his or her original family means.
 2. Address concerns and worries the child may have about becoming a part of a legal family, including but not limited to:
 - a. Contact options the child may have with their parents and siblings, if the siblings do not live with the child, or other relatives.
 - b. School, friends, activities, and other things the child will continue or changes that might occur.
 - c. Myths such as the child cannot love their original parents, or having to call adoptive parents "mom" and "dad", or being required to change their name.
 - d. If the child is not living with the family that will adopt them, address concerns or worries that might include no one wanting them, or that older youth are not adopted.
 3. Help the child understand that "adoption" is a legal term when a child becomes part of a family. The important thing for the child to understand is they need a family to provide food, shelter, and medical care, help them with school and activities, and help them after they become an adult.

- 120 F. Include the child, based on their maturity and ability, in planning and steps to become
121 part of an adoptive family and adoption.
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402 Adoption Permanency Goal

Major objectives:

Permanency decisions should be made in a timely manner, recognizing the child's developmental needs and sense of time.

- A. If the child has already been placed with the family that intends to adopt at the time the child is freed for adoption, Child and Family Services shall begin to assist the adoptive family and child through the transition process to adoption.
- B. If the child is not already in the adoptive home, Child and Family Services shall make intensive efforts to re-explore kinship option and identify an adoptive family within 30 days after the child's permanency goal changes to adoption.
- C. If an adoptive family is not found within 30 days of the child's permanency goal changing to adoption, Child and Family Services will contact The Adoption Exchange and/or a licensed child placing agency that contracts with Child and Family Services to help recruit an appropriate adoptive family for the child.

Applicable Law

Federal Code 42 U.S.C. §671(a)(15)(E) Permanency time frames.

Utah Code Ann. [§80-2-301](#). Division responsibilities.

Utah Code Ann. ~~§80-3-410. Adoptive placement time frame—Contracting with agencies~~ [§80-2-804. Adoptive placement time frame -- Division contracts with child-placing agencies.](#)

Utah Code Ann. [§78B-6-117](#). Who may adopt.

Utah Code Ann. [§78B-6-128](#). Preplacement adoptive evaluations -- Exceptions.

Utah Code Ann. [§78B-6-133](#). Contested adoptions -- Rights of parties -- Determination of custody.

Administrative Rule [R501-7-9](#). Services for Children.

Administrative Rule [R501-7-10](#). Services to Adoptive Parents.

Administrative Rule [R512-41](#). Qualifying Adoptive Families and Adoptive Placement.

Administrative Rule [R512-31](#). Foster Parents Due Process.

Practice Guidelines

A decision regarding a child's permanent family will be made within 12 months of the child entering custody. When a child cannot safely return to his or her parents, adoption will be the first permanency goal considered. The adoption goal should be made in a timely manner, recognizing the child's developmental needs and sense of time.

- A. When a child's permanency goal changes to adoption, the out-of-home caregivers who have been caring for the child are generally the first family to be considered to adopt a child.
 - 1. If the child has not been placed with a relative or is with a relative who is unable or unwilling to adopt the child, and another relative with whom the child has a significant and substantial relationship should be considered.

2. A relative that has a significant and substantial relationship with the child and was actively involved in the child's case, but was unaware of the child being in foster care in the first 120 days of state custody, may file a written statement with the court within 30 days of the court terminating reunification services. The written statement must express the intent of the relative to assume full custody and adopt the child.
- B. When a child or sibling group who has a permanency goal of adoption is not currently living with the family who will be their permanent family, possible adoptive families will be selected that can best meet the characteristics, history, and needs of the children.
 1. The Indian Child Welfare Act (ICWA) takes precedents for an adoption of an Indian child who is a member of a federally recognized tribe or Alaskan native village
 2. Relatives of the child should be re-assessed as possible adoptive family options.
 - a. Termination or voluntary relinquishment of the parental rights of a child does not prevent Child and Family Services from seeking biological relatives to consider adopting the child or from considering biological relatives of the child who come forward to adopt the child.
 3. If siblings are not been placed together and there are no safety concerns that preclude the siblings being together, Child and Family Services should consider a family for all the siblings to be adopted together.
 - a. If siblings are not able to be adopted together or if being taken from a current family would create undue trauma to the children, Child and Family Services will facilitate agreements between the permanent families to allow lifelong contact to be pursued between the siblings.
 4. If no appropriate relatives are available, other appropriate adults known to the child should be considered.
- C. When no relative families or appropriate adults known to the child are identified as adoptive placements, Child and Family Services will appoint and convene an Adoption Committee to select an adoptive family from the currently available licensed Out-of-Home caregivers. Families that can best meet the needs of the child and want to adopt will be considered. Home studies from a minimum of three possible adoptive families will be presented to the Adoption Committee for consideration. If three families cannot be identified because of the exceptional circumstances of the child or sibling group, the Adoption Committee may approve an adoptive family for the children based on fewer adoptive placement options.
 1. Licensed families from across the state who are interested in adopting and who could meet the child's needs (as outlined in Out-of-Home Care Practice Guidelines [Section 301.5](#)) will be considered regardless of regional location. Placement Committees will contact the other regions to find licensed caregivers appropriate for the child's or sibling group's needs.
 2. The Adoption Committee may choose not to place a child or sibling group with any of the proposed adoptive or adoptive/foster care families if it is determined that none of the families will adequately meet the needs of the child. In such

circumstances, an out-of-state search for adoptive/foster care or adoptive families shall be initiated.

D. Children will be Listed with The Adoption Exchange:

1. When no permanent family who is appropriate for the child or sibling group is identified in Utah.
2. Within 30 days of the child's permanency goal changing to adoption.

E. Registering the Child with The Adoption Exchange:

1. The caseworker will contact The Adoption Exchange to obtain a user name and password. Then the caseworker shall go to www.utdcfsadopt.org and register the child.
2. In the website, the caseworker shall enter the required information about the child.
3. The Child and Family Team will choose the array and intensity of family recruitment activities to be utilized for the child, such as:
 - a. Utah website family recruitment.
 - b. Profile party recruitment.
 - c. Utah Heart Gallery recruitment.
 - d. Televised and print media "Wednesday's Child" family recruitment.
 - e. The Adoption Exchange website, which includes eight western states.
 - f. National AdoptUsKids website family recruitment.
 - g. Database matching of the child with families on the database.

F. Inquiries from Prospective Adoptive Families for Children Registered with The Adoption Exchange:

1. The Adoption Exchange will respond to initial inquiries from prospective adoptive families.
 - a. When prospective adoptive parents make an inquiry about a specific child but do not have an adoptive home study, The Adoption Exchange will inform the interested parents about the adoption process, including the acquisition of a home study and what they might expect when parenting children who have been neglected or abused.
 - b. If prospective adoptive parents want additional information about a specific child, the prospective adoptive parents will be given general information about what kinds of behaviors and challenges children may exhibit who have the same level of needs to help them decide if they want to move forward with the training and adoptive home study process.
 - c. If prospective adoptive parents seem to be an appropriate match for a child but they need more information about the child to inform their decision, the caseworker may share additional information regarding the child after having the prospective adoptive parents sign form DCFS01 Confidentiality Agreement. The caseworker may not, however, share the child's mental health diagnosis.

- d. The Adoption Exchange will send home studies from prospective adoptive families who want to be considered for a specific child or sibling group to the assigned RFC and/or caseworker.
- G. The assigned RFC and/or caseworker will screen the adoptive home studies they receive from the recruitment efforts. The caseworker may choose up to three potential adoptive families that can best meet the child's needs to present to the Adoption Committee.
- H. As the home studies are reviewed and decisions are made regarding the prospective adoptive families, the assigned RFC and/or caseworker will respond to each as described below:
 1. The caseworker shall contact prospective adoptive families that will not be considered for the specific child or sibling group to inform them of the decision and the reasons why.
 2. When more than one prospective adoptive family is being considered for the specific child or sibling group, the caseworker will contact each family to inform them they are one of multiple families being considered.
 3. When there are three or more prospective adoptive families that will be considered for a specific child or sibling group, the home studies will be brought to the Adoption Committee for consideration and selection.

402.1 Adoption Committee

Major objectives:

In situations in which a child who has a permanency goal of adoption is not with the family who will be their permanent family, an Adoption Committee shall select an adoption placement that is in the best interest of the child.

Applicable Law

Utah Code Ann. [§78B-6-102](#). Legislative intent and findings -- Best interest of child -- Interests of each party.

Utah Administrative Rule [R512-31](#) Foster Parents Due Process

Utah Administrative Rule [R512-41-6](#) Adoption Decision

Practice Guidelines

Establishing an Adoption Committee

- A. The region director shall review annually the membership and terms of service of the regional Adoption Committee, along with the frequency of Adoption Committee meetings.
 1. The Adoption Committee should consist of at least three members and include senior level Child and Family Services staff and one or more members from an outside agency with expertise in adoption and foster care.
 2. If no Child and Family Services caseworker with adoption experience is available in the local area to participate on the Adoption Committee, an individual with adoption expertise from outside of the area may be included on the committee,

such as the state program administrator, a clinical consultant, or an adoption caseworker from another region. The Adoption Committee should have at least three members.

- B. Adoption Committee members must disclose any personal relationship with a family being discussed and may recuse themselves from the proceeding.
- C. The Adoption Committee may meet in any location appropriate for the case.
- D. The caseworker for the child or sibling group is responsible for presenting the information necessary for the Adoption Committee to assess adoptive placement alternatives for the child or sibling group. Information should include all assessments for each child including the child's characteristics, history, strengths, preferences, and needs. Recommendations regarding qualifications of potential adoptive families should be shared with Adoption Committee members. The referring caseworker shall not be a voting member of the Adoption Committee.
- E. Anyone who has information regarding the child and the potential adoptive families may be invited by the Adoption Committee to present information but not participate in the deliberations.
- F. The Adoption Committee will reach a decision regarding the most appropriate adoptive family for the child or sibling group by consensus. If consensus cannot be reached, the Adoption Committee will submit their recommendation to the region director or the Child and Family Services director, if needed, who will make the final decision.
- G. All proceedings from the Adoption Committee are confidential and maintained at a protected status. Each participant at the Adoption Committee meeting shall sign Confidentiality Form DCFS01.
- H. Minutes shall be taken at each Adoption Committee meeting. A copy of the minutes shall be maintained at the local office or at a centralized location within the region and relevant portions may be added to a child's case record.
- I. Justification for Selection of an Adoptive Family: The Adoption Committee will select the best adoptive family to meet the needs of the child or sibling group and document the proceedings in the meeting minutes according to the following:
 - 1. Document the rationale, including how the selection of the proposed adoptive family meets the long-term best interests of the child.
 - 2. If none of the proposed adoptive families are selected, document the rationale.
 - 3. If siblings are not placed together, document the reasons.
- J. When a prospective adoptive family for the child has been selected, the caseworker will notify the family in writing of their selection.

- K. A family that is not selected for an adoptive placement of a specific child shall have no right to appeal the decision unless they have been the child's current licensed foster family for six months or more. In these cases, the foster parent due process rights for removal of a child applies. [See: Utah Administrative Rule [R512-31](#).]

402.2 Legal Requirements For Selecting An Adoptive Family For A Child

Major objectives:

- A. In the adoptive family selection will be in the best interest of the child.
- B. The court may not consider a request for guardianship or adoption of the child by an individual who is not a relative of the child, or prevent Child and Family Services from placing the child in the custody of a relative of the child, until after the day on which the juvenile court makes the findings.
- C. If an individual who is not a relative of the child desires to adopt the child, the juvenile court shall, before entering an order for adoption of the child, determine whether due weight was given to the relative's preferential consideration.
- D. The adoptive family selected for a child or sibling group must be based on a thorough assessment of each child's current and potential developmental, medical, emotional, educational needs. As well as the child's need for family and cultural connections.
- E. Sibling groups should not be separated. When separation is necessary to protect the well-being of one or more children in the sibling group, all reasonable efforts must be made to maintain contact between siblings.
- F. The ability of the relative or prospective adoptive family to successfully meet the child's needs and to nurture and accept the child as a fully integrated member of the family must be considered.

Applicable Law

42 U.S.C. Section 1996b - Interethnic Placement Act
25 U.S.C. Section 1901 et seq. - Indian Child Welfare Act,
Utah Code Ann. [§80-2-301](#). Division responsibilities.
Administrative Rule [R512-40](#). Recruitment, Home Studies, and Approval of Adoptive Families for Children in the Custody of Child and Family Services.

Practice Guidelines

- A. Procedure for selecting a prospective adoptive family who can meet the needs of a child who is in need of a permanent family.
 - 1. Priority Guidance for Selecting Adoptive Parents:

- a. The Indian Child Welfare Act (ICWA) takes precedents for an adoption of an Indian child who is a member of a federally recognized tribe or Alaskan native village.
 - b. Relative of the child.
 - c. Caregiver or adoptive family who have biological siblings of the child.
 - d. Kinship or friend.
 - e. Non-relative couple or single adult.
- B. The court may not consider a request for guardianship or adoption of the child by an individual who is not a relative of the child, or prevent Child and Family Services from placing the child in the custody of a relative of the child, until after the day on which the juvenile court makes the findings.
- 1. There is a rebuttable presumption that placement of a child with the child's relative during a child welfare proceeding is in the best interest of the child. It requires Child and Family Services and the juvenile court to consider the rebuttable presumption at certain times throughout a child welfare proceeding, and requires the juvenile court to:
 - a. determine whether Child and Family Services considered the rebuttable presumption and preferential consideration for placement of a child with a relative at the child welfare review hearing;
 - b. provide preferential consideration to a relative's request for placement of a child at the permanency hearing; and
 - c. consider whether a child's relative was given due weight as a placement for the child during the child welfare proceeding before entering a final order of adoption for the child.
 - 2. If an individual who is not a relative of the child desires to adopt the child, the juvenile court shall, before entering an order for adoption of the child, determine whether due weight was given to the relative's preferential consideration.
- C. Current caregivers of the child should be considered if the child has substantial emotional ties with the caregiver and if removal of the child from the caregiver would be detrimental to the child's well-being.
- D. The child's preference should be considered if the child is of sufficient maturity to articulate their wishes.
- E. Geographic boundaries alone should not present barriers or delays to the selection of an adoptive home.
- F. Child and family Services cannot deny to any individual the opportunity to become an adoptive parent on the basis of the race color, or national origin of the individual, or of the child, involved; or to delay or deny the placement of a child for adoption or into foster care, on the basis of the race, color, or national origin of the adoptive or foster parent, or the child involved.

- G. The selection of a prospective adoptive family will be based upon the child's needs and the family's ability to meet the child's needs. The assessment of the child's short and long term needs, strengths and interests and how the prospective adoptive family will meet them should be taken into account.
1. Chronological age alone should not be the determining factor for the selection of adoptive parents. Physical condition of the applicants should be taken into consideration to protect the child against a repeated, foreseeable loss of parents through death or incapacitating illness. It is important for applicants to be physically and emotionally capable of meeting the needs of the children as they grow and develop.
 2. An adoptive parent must be 10 years older than the child being adopted. If a couple is being considered to adopt the child, one of the couple must be 10 years old than the child.
 3. A child should not be placed in a prospective adoptive home if the placement would put other children residing in the home at risk of harm.
- H. If a non-relative is being consider as an adoptive family for the child or sibling group, the following will be taken into account:
1. Race, Ethnicity, and Culture – While culture is important for a child's identity, an adoptive placement cannot be delayed or denied on the basis of race, color, or national origin of the adoptive or foster family or child, as required by federal law.
 2. Religious Preference - A child's religious preference will be taken into consideration in the selection of an adoptive family.
- I. Guardian ad Litem (GAL) Recommendation - The caseworker should solicit and consider the input of the child's GAL in selecting the adoptive placement.

403 Requirements For Adoptive Families

Major objectives:

Families who wish to become adoptive families, including kin or Child and Family Services employees, must meet all of the following requirements:

- A. Complete adoption training program approved by Child and Family Services (preferably before the child is placed in the home).
- B. Be assessed and approved as an adoptive family following completion of a home study by Child and Family Services, Office of Licensing or a licensed adoption child placement agency contract to conduct home studies.
- C. Obtain a foster care license issued by the DHHS, Office of Licensing, or meet the same standards, or receive a written waiver of a standard.

Applicable Law

Utah Code Ann. [§78B-6-115](#). Who may adopt -- Adoption of minor -- Adoption of adult.
Administrative Rule [R512-40](#). Adoptive Home Studies, Recruitment, Approval.

Practice Guidelines

- A. Procedures for families who wish to become adoptive families, including kinship caregivers or Child and Family Services employees, must be able to provide a safe home for the child or sibling group and meet all the child's unique and medical, developmental, educational, behavioral, and mental health needs. The prospective adoptive family must comply with Utah Code Ann. [§78B-6-115](#).
 1. Background Clearances must be complied with as follows:
 - a. The prospective adoptive family, approved for the child, must have all background clearances, including the FBI fingerprint-based background clearance for all those 18 years old and older in the home.
 - b. Prospective adoptive parents who are not licensed or are licensed as proctor or professional parents will need to have their background screening, including FBI fingerprints, conducted as part of their adoptive home study. The adoptive home study, with background screening, must be completed within 12 months immediately preceding placement of the child who is to be adopted in accordance with Utah Code Ann. [§78B-6-115](#).
 2. Prospective adoptive parents must be at least 10 years older than the child being adopted.
 3. Couples or single adults will be assessed as follows:
 - a. Indian Child Welfare Act (ICWA) placement preference may be relatives or non-relatives and may be married, single, or cohabiting.
 - b. A relative of the child may be married, single, or cohabiting.

- c. Non-relatives must be legally married couples or have a court document for registration of a common law marriage from a court of competent jurisdiction.
 - d. Non-relative single adults may not be cohabiting with another person.
- B. Adoption Home Study (referred to as a pre-placement evaluation in Utah Code Ann. [§78B-6-128](#)). The caseworker will ensure that the following requirements are included in a home study. The home study may be done by Office of Licensing, Child and Family Services, or a DHHS home study contract):
- 1. The home study must be completed or updated within 12 months of the adoptive placement.
 - 2. Information gathered in the home study should include the following:
 - a. Criminal background clearances for all adults in the home.
 - b. Child abuse registry clearances for all adults in the home.
 - c. Stable marital relationship and/or commitment and stability in existing family relationships and/or the ability to sustain long-term relationships that would provide a foundation for an adoptive child.
 - d. The specific child intended to be adopted or the age and type of child that will fit into the home.
 - e. Commitment to the legal adoption of the child as a permanent member of the family.
 - f. Parenting skills and emotional openness and flexibility to meet the unique needs of the child.
 - g. Capacity, proper motivation and realistic expectations of a child who has experienced trauma and other effects of abuse and neglect and may have other special needs.
 - h. How children living in the home will be affected by the adopted child.
 - i. How prospective adoptive parent will preserve the child's family connections and culture.
 - j. How supervision for the child will be arranged in accordance with the child's age and developmental ability at times when the prospective adoptive parent is not able to be in the home.
 - k. Health status of the prospective adoptive parents.
 - l. Financial status that verifies income sufficient to provide for a child's needs.
 - m. Social support system for both the parent and child.
 - n. Knowledge of resources to help raise a child.
 - o. Factors that may significantly contribute to adoption disruption including:
 - (1) History of emotional or psychological problems or substance abuse.
 - (2) Marital or relationship difficulties and incompatibilities that seriously compromise the ability to meet the needs of the child.
 - (3) Serious problems in child rearing.
 - (4) Unrealistic expectations of self and child.
 - (5) Impulse control disorders.

- 550 (6) Disruptive and/or crisis filled lifestyle.
551 (7) Criminal activity.
552 3. For information on how and when to release the home study for adoptive
553 purposes, refer to Practice Guidelines [Section 305.6](#).
554
555 C. Employees of Child and Family Services may apply to adopt and may adopt children in
556 state custody in the following manner:
557 1. The person applies in the region of residence.
558 2. The home study will be completed by a contracted provider or staff of another
559 region on a cooperative basis upon the request of the region director.
560 3. If the employee is not a relative of a child, the approval of placement of a child in
561 an employee's home will be by the region having custody of the child. If the
562 prospective adoptive parent is from the same region as the child, the placing
563 committee will consist of the child's caseworker, outside child welfare specialists,
564 and the State Adoption Specialist.
565 4. Post placements visits will be by the placing region, unless the child and
566 prospective parent are from the same region, in which case, another region will
567 provide supervision.
568
569 D. The caseworker will ensure that the family:
570 1. Has completed Child and Family Services approved adoption training;
571 2. Has an approved home study by Child and Family Services, Office of Licensing
572 or a contracted home study provider.
573 3. If the prospective adoptive family is not a relative or ICWA-preferred placement
574 preference, has the prospective adoptive family received a foster care license
575 issued by the Office of Licensing.
576 a. If the family is interested only in a child who is legally free for adoption at
577 the time of placement, a license is not required, but there must be
578 documentation that the standards of a foster care license are met.
579 4. If the prospective adoptive family is a Child and Family Services employee, the
580 appropriate procedure have been followed to ensure that no conflict of interest
581 exists in completion of the home study, placement, and supervision. [See: Utah
582 Administrative Code [R512-40.5](#) and Practice Guidelines [Section 702](#).]
583

403.1 Adoption Training

Major objectives:

- A. Education that specifically addresses a prospective adoptive parent's ability to meet the needs of a child who has:
 - 1. Suffered abused, neglected, and/or
 - 2. Been exposed prenatally to drugs or alcohol, and/or
 - 3. Grieve from loss of parents, relatives, friends, and/or community.
- B. Education to facilitate a child's cultural identity.
- C. Education to understand other special needs of a specific child, such as medical, cognitive delays, or behavioral challenges.

Applicable Law

Utah Code Ann. [§80-2-301](#). Division responsibilities.

Practice Guidelines

- A. Training for Adoptive and Adoptive/Foster Care families may consist of classroom courses and/or in-home study materials as approved by Child and Family Services and regional training staff. Training may be provided by the Child and Family Services, or Child and Family Services may accept training provided by another agency if it meets the standards of Child and Family Services. The caseworker will verify that all required training has been completed. The training must address at least the following:
 - 1. Permanency for children;
 - 2. Trauma and drug and alcohol effects on early brain development and behaviors;
 - 3. Importance of primary family connections;
 - 4. Greif and loss for children;
 - 5. Child development;
 - 6. Abuse and neglect;
 - 7. Sexual abuse;
 - 8. Attachment/separation issues;
 - 9. Discipline;
 - 10. Cultural issues;
 - 11. Effects of care giving on the family.
- B. Specialized Training - The adoption caseworker may require the adoptive family to receive more specialized training before placement to ensure the parents have the necessary skills to meet the needs of the child that they are willing to adopt. Specialized training may address such topics as medically fragile infants, adolescents, behavioral challenges, and others.

404 Disclosing Child's Information

Major objectives:

- A. Prospective adoptive parents need all known information about the child to help understand and raise the child.
- B. Information to preserve the child's history, culture and identity.
- C. Information to help the child understand their life experiences and what brought them into foster care.

Applicable Law

Utah Code Ann. [§63G-2-202](#). Access to private, controlled, and protected documents.

Utah Code Ann. [§78B-6-143](#). Nonidentifying health history of adoptee filed with office – Limited availability.

Practice Guidelines

The caseworker shall provide detailed information about the child to the prospective adoptive parents, allowing sufficient time for the prospective adoptive parents to make an informed decision regarding placement of the child in their home. When relevant, the caseworker shall encourage adoptive parents to consult with other family members living in the home in making the decision.

- A. The prospective adoptive parents should review the child's file before making the life-long decision to adopt. The file may contain information that will help the family decide if they have the skills and support to raise the child. The file also has important documents that the family would want to copy, for example immunization records and school placement information. [See: DHHS, Office of Licensing, Child Placing Agencies, [R501-7-9](#), Services for Children and [R501-7-10](#) Services to Adoptive Parents.]
- B. The prospective adoptive parents need to know that the information in the child's file is important in two ways.
 - 1. First, it will help them decide whether or not they should adopt the child, and
 - 2. Second, this information is part of the child's history. The prospective adoptive parents should gather information from the file and share it with the child as he or she grows. Information from the file will help the child understand himself or herself and his or her history.
- C. Information about the "child" may be shared as follows:
 - 1. Licensed foster parents who are considering adopting a child in Child and Family Services custody shall have access to information contained in the child's file that is important to understand and raise the child. Licensed foster parents are contracted by Child and Family Services as a provider to care for the child. Thus, they may view any parts of the child's file that help them understand the child and the child's background for purposes of adopting and parenting the child.

2. Prospective adoptive parents, who are not licensed foster parents, should also have information that is important to raise a child. Pursuant to the Government Records Access and Management Act (GRAMA), Child and Family Services has determined that, when adopting a child, the interest in sharing the child's information outweighs the privacy interests in the record.
 - a. Appropriate information about the child should be shared; however, neither the biological parents' nor foster parents' medical, psychiatric, psychological, or other personal information should be disclosed to individuals who are not licensed foster parents.
 - b. Child and Family Services must use prudent judgment in providing non-licensed prospective adoptive parents information about the child that may be important for the stability of the child's adoptive placement. Confidential information that is important to raising the child may be shared, but should be shared in a non-identifying way.
 3. Utah Code Ann. [§78B-6-143](#) states that adoptive parents may have the Health Department's "Vital Records and Statistics" information that contains medical, psychological, and social history about the child's biological family; however, it must not identify the biological parents or members of their families. Child and Family Services collects the same information on the Health Data report in SAFE. A permanency caseworker transfers information from the Health Data Report to the Vital Records and Statistics 'Non-Identifying Health, Genetic, and Social Histories' form for adoptive parents.
 - a. A permanency caseworker shall print the Health Data Report without the child's name for the purposes of the adoption finalization to be submitted to Vital Records and Statistics for required 'Non-Identifying Health, Genetic, and Social Histories' forms.
 - b. Printing the Health Data Report for the purposes of adoption is conducted by going to the Person Health window in SAFE. Check the bottom of the screen called Health Detail button, then from the "file" tab select "Print Health Data Report". At the bottom of the Health Data Report, you will find "Adoption Use Only" and "Vital Stats Letter & Health Data Report". Then press the "print" button. This will print a letter to Vital Statistics and Records, the non-identifying family health history data and child's health history.
 4. The prospective adoptive parents should be aware that the information in the file is often the subjective opinions of the caseworker or therapist written at one time in the child's life. Circumstances and the child's development can change the way a child behaves and adjusts to current life situations. For instance, the child may have received many different mental health diagnoses. The mental health diagnoses in a child's file is affected by each therapist's interpretation, the child's developmental stage, factors in the child's environment, and different life circumstances.
- D. Child and Family Services File Review Guidelines.

1. The confidentiality agreement must be signed by the prospective adoptive parents. [SAFE form DCFS02.]
2. The caseworker should orient prospective adoptive parents to the structure of the files and where information is located.
3. The caseworker should counsel prospective adoptive parents to consider specific types of information, such as medical conditions, developmental delays, disabilities, mental health diagnoses, placements and transfers, educational needs, and other considerations for the child.
4. The booklet called “Prospective Adoptive Parent’s Guide to a Child’s File Information” directs the prospective adoptive parents to look for specific information they will need to parent the child and identify information to copy for future reference. [*Red type* identifies information to copy for the prospective parents, if they decide to adopt the child. Originals of pictures, letters, and belongings should be given to the family adopting the child. Copies can be retained in the file.]
 - a. Medical Information: *Immunizations, all allergies including food allergies, disabilities and treatments, current medications and implications of discontinuing medications, history of illnesses. Disabilities and treatments.* Conditions from abuse or neglect, *serious accidents, surgeries, past doctors, and hospital of birth.*
 - b. Dental Information: Dental records, *past dentists*, and orthodontic work, and *orthodontist*.
 - c. Educational Information: *Schools and grades, evaluations, special education plans such as Individual Education Plans (IEP) or Student Education and Occupational Plans (SEOP), learning disability including specific disability, and test results.*
 - d. Mental Health Information: *Current and prior therapists* and history of treatment, diagnoses, and especially current diagnosis. What the diagnosis means in raising a child, what behaviors are connected with the diagnosis, and how are connected behaviors best dealt with. The prospective adoptive parents should be encouraged to talk directly with the child’s mental health therapist when possible.
 - e. Family Story: *Health Data Report* information that is transferred to the Vital Records and Statistics ‘Non-Identifying Health, Genetic, and Social Histories’ form, family situation, moves or stability factors, abuse and neglect history, domestic violence, reason for the child’s removal from their biological family, culture, *genogram including the siblings (with their birth dates), timelines.* Family member’s talents, hobbies, and interests. *Family photos, especially photos with the child as a baby and early in life. Letters to the child from relatives, especially the mother and/or father.*
 - f. Child’s Personal Information: Developmental history, when available. Placement history including the child’s adaptation. Birth certificate. Photos of the child, of pets, of foster parents, or of other significant caretakers. The child’s artwork, creations, or projects. Stories about the

child's birth and early life. Church records, such as baptismal, christening, GBar mitzvah, and confirmation records. Activities such as scouts, sports, choir, etc. Favorite foods, favorite toys or stories, names of friends, and other things that may help the child feel more secure, such as chores and house rules or bedtime routines.

- E. After the prospective adoptive parents have looked through the file, talk with them about what they found. Give them health and mental health diagnoses summary sheets, and answer questions they may have.
- F. Helpful websites include:
1. American Academy of Child & Adolescent Psychiatry: www.aacap.org.
 2. American Psychological Association: www.apa.org.
 3. American Academy of Pediatrics: www.aap.org.
 4. Substance Abuse and Mental Health Services Administration: www.samhsa.gov.
- G. The caseworker shall respond to questions or concerns of the potential adoptive parents and give the prospective family time to think about all they have learned. The caseworker should also encourage them to set another appointment to talk and ask other questions.
- H. The adoptive parent(s) shall be advised of possible financial and medical assistance available through adoption assistance to meet the special needs of the child.
- I. The caseworker will have the prospective adoptive parents sign the Child and Family Services' information disclosure SAFE form AD13 to acknowledge they have been provided relevant information obtained by Child and Family Services while the child was in state custody.
- J. No identifying information regarding the adoptive parents shall be released to birth families without the written consent of the adoptive parents.

404.1 Transition Planning

Major objectives:

Transition planning is critical to assure the child and family a successful adoption. Child and Family Services will make every effort to achieve a smooth and effective transition for a child with the adoptive family. All out-of-home requirements continue to be applicable until the adoption is finalized and the case is closed.

- A. Address the differences between an adoptive family and out-of-home caregiver with both the child and the prospective adoptive family.
- B. Help the prospective adoptive family emotionally claim the child as permanent member of the family.
- C. If child is not living with the adoptive family, develop transition plans to build the relationship between the child and prospective adoptive family.

Practice Guidelines

- A. When the prospective adoptive parents have decided that they want to move forward with the adoption of the child, the caseworker shall develop a transition plan by holding a Child and Family Team Meeting inviting the following to participate (when appropriate and applicable): the child, the current caregivers, prospective adoptive parents, other children in the home, caseworker, therapist, teacher, clergy, as well as any other significant people in the child's life.
 - 1. For relatives or foster families who have had the child in their home, the caseworker will address the differences between adoption and foster care. The caseworker will include a discussion about:
 - a. The differences in funding between foster care and adoption.
 - b. The family's ability to make decisions without Child and Family Services.
 - c. The differences in community supports available between fostering and adoption.
 - d. Letting the family know that they may see more negative behaviors as the child adjusts to the new circumstances, even if the child has been in the foster home for a period of time.
 - e. Post Adoption Services and will provide the brochure with the name and contact information of their post adopt caseworker.
 - 2. For children transitioning to a new family, the caseworker shall establish a transition plan that includes times for structured visits to allow the child and new family to get to know each other. The transition plan should start with short visits, then longer visits, and move gradually into overnight visits. The Child and Family Team will decide when the child is ready to move in with the new family and whether a change in schools is necessary. In all cases, the prospective adoptive parents shall have the opportunity to meet the child prior to permanent placement.

3. Address how the child's family connection will be maintained and connection with siblings if they are not being adopted together.
 4. Address common adoption myths with the child and prospective adoptive family, such as adoption requires changing the child's name, that the child will have to choose one family to love, the adoptive family or their family of origin and that they are betraying the other family, or that adoption is only for babies.
 3. The caseworker may also talk to the family about ceremonies and/or things the family may want to do to establish the permanency the adoption brings the child and family. Ceremonies may include extended family members and friends, and/or may include a church ritual. Another thing that may help mark the change for the child and the family is to get a family photo taken. The caseworker will explain to the family that while the child is gaining a new family, adoption also signifies that they have lost their other family in a more profound way. Thus, the family may see an escalation in the child's grief and negative behaviors.
 4. The caseworker will explain to the family the importance of keeping the child's information and history as the child will have different questions and understand things in a different way as they grow.
 5. The caseworker will encourage the adoptive family to review the child's file several times and especially after the child has been with the family for a few months.
- B. When an approved adoptive family agrees they intend to adopt a specific child who has a permanency goal of adoption, the adoptive parents and a representative from Child and Family Services shall sign an "Intent to Adopt Agreement" (SAFE form AD12).
1. The caseworker shall record the date the "Intent to Adopt Agreement" is signed in SAFE (under the Permanency tab, Adoptive Placement/Subsidy radial button of the Permanency tab, on the lower left hand side of the Adoptive Placement section for the "Intent to Adopt Signature Date")
 2. The caseworker shall set a date for the family to review the file again before the finalization of the adoption. If the family declines additional reviews of the file, the caseworker will document this in an activity log.

404.2 Adoptive Placement

Major objectives:

- A. Help child with becoming part of the adoptive family.
- B. Provide information and support to the adoptive family.
- C. Help adoptive parents with the Adoption Assistance process.
- D. Help adoptive family prepare for legal requirements for the adoption finalization.
- E. Provide adoptive family with information about post adoption supports.

Practice Guidelines

A. Preparation of the Child and Family for Adoption:

1. When appropriate, the caseworker shall encourage continuation of a child's relationships with individuals with whom the child has previous, supportive emotional ties such as a foster family, a caseworker, a therapist, and/or extended family members. The caseworker shall counsel the adoptive parents concerning the issues the child may have as the transition is made to an adoptive placement.
2. The caseworker shall ensure that the child's life book is prepared to accompany the child to the adoptive placement. The child's life book, including personal information regarding the child's life and family of origin that has been gathered by the foster family or biological family, shall be forwarded to the adoptive family. This may include written records, photographs, birth information, and schoolwork.

B. Steps to Prepare for an Adoptive Placement:

1. The caseworker shall provide ongoing support to the adoptive parents during the transition, placement, and supervisory period.
2. The caseworker will inform the adoptive family of community services and adoption assistance available before and after the adoption is finalized. Child and Family Services will provide ongoing support to the child and adoptive parents during the transition until finalization of the adoption. At a minimum, the finalization will take six months. Child and Family Services' involvement will continue until the adoption is finalized. The caseworker shall maintain contact with the adoptive family including frequent visits with the child for at least the first six months after placement. As part of the supervision, Child and Family Services will develop a service plan within 30 days of placement.
3. The caseworker shall inform the adoptive family about specific services that are available during the supervisory period and after finalization. These services may include adoption assistance, Post Adoption Services, and/or training that may be available to help the parents respond to special needs of the child. Adoptive parents shall verify in writing that Post Adoption Services were offered.
4. The caseworker shall notify the family that if they are requesting adoption assistance, an adoption assistance agreement must be signed prior to the finalization of the adoption.
5. The caseworker shall inform the family that they have the right to apply for adoption assistance. The regional adoption subsidy committee will determine if the child qualifies. If the child is denied adoption assistance, the family will be sent a notification of a right to a fair hearing at which they can appeal that decision.

C. Payment to Adoptive and Foster/Adoptive Care Parents Prior to Finalization:

1. The caseworker shall explain the appropriate types of adoption assistance to the adoptive parents and assist them with the process.

- 925 2. The caseworker shall explain to the adoptive parents that funds for the child who
926 is not legally free for adoption are foster care funds.
- 927 3. The caseworker shall explain that assistance for the child who is legally free for
928 adoption may be foster care funds or upfront adoption assistance funds if the child
929 is eligible for adoption assistance and Child and Family Services funding is
930 available. The amount and type of payments for a child in Child and Family
931 Services custody placed with an adoptive family may be the same as for any other
932 child in custody until finalization.
- 933 4. The caseworker will negotiate the level of adoption assistance. The Adoption
934 Committee will approve or disapprove the negotiated level of adoption assistance.
935 If the proposed level of adoption assistance is disapproved, the caseworker will
936 renegotiate the level of adoption assistance with the adoptive family prior to
937 finalization.
- 938 5. The caseworker shall inform the family that they have the right to apply for
939 adoption assistance. The regional adoption subsidy committee will determine if
940 the child qualifies. If the child is denied adoption assistance, the family will be
941 sent a notification of a right to a fair hearing at which they can appeal that
942 decision.
- 943
- 944 D. The caseworker shall inform adoptive parents of appropriate community services, as
945 needed, after placement but before the adoption is final. The caseworker shall facilitate
946 linking the family with community services to help the child become successfully
947 integrated into the adoptive family.
- 948
- 949 E. Parental Request or Concerns with Adoptive Placement - Child and Family Services shall
950 consider removal of a child before an adoption is finalized if the adoptive parents request
951 removal or if serious circumstances impair the child's security or development.
- 952 1. Prior to removal, Child and Family Services shall respond to an adoptive family's
953 concerns in a timely manner, counsel with the family, and, if possible and
954 appropriate, offer further treatment, including intensive in-home services or
955 temporary removal of the child from the home for respite purposes.
- 956 2. If removal is sought, the Child and Family Team shall review the placement
957 progress and present situation and decide to either continue placement with
958 further services or to remove the child from the home. The placement committee
959 will be notified and will assist the Child and Family Team to locate a placement.
960 The region director will review and approve the decision.
- 961 3. Child and Family Services shall consider removal of a child before an adoption is
962 finalized if the adoptive parents request removal or if serious circumstances
963 impair the child's security or development.
- 964 4. Removal of a child from an adoptive family shall be documented in the child's
965 record and in the adoptive family record.
- 966 5. If a decision is made to remove the child, a Notice of Agency Action shall be sent
967 to the adoptive parents notifying them of their due process rights. The adoptive
968 family shall be offered the same rights as those offered a foster family regarding
969 removal of a child. [See: Utah Administrative Rule [R512-31](#).]

- 970
- 971 F. Court Finalization of an Adoption - The caseworker will help adoptive parents
- 972 understand the juvenile, district, or tribal court proceedings for finalizing the adoption:
- 973 1. Adoptions are finalized in the juvenile or tribal court that has jurisdiction of the
- 974 case of the child.
- 975 2. If the child has reached the age of majority (18 years of age or older), the
- 976 adoption is finalized in juvenile or tribal court that has jurisdiction of the case as
- 977 long as:
- 978 a. The juvenile or tribal court determined that the child cannot safely return
- 979 to his or her parents, and
- 980 b. The juvenile or tribal court has terminated parental rights of the parents of
- 981 the child in custody, and
- 982 c. The child has reached the age of majority and continues to be in state
- 983 custody.
- 984 3. If the child has reached the age of majority while in custody but the
- 985 parental rights of the parents have not been terminated or voluntarily
- 986 relinquished, the adult adoption must be finalized in district court in the
- 987 district where the adopting family resides.
- 988 4. The adopting parent(s) are responsible for hiring a private attorney to
- 989 petition the court and pay for fees associated with the adoption
- 990 finalization. Up to \$2,000 of attorney and filing fees may be reimbursable
- 991 to the adopting parent(s) by submitting receipts.
- 992 5. At the request of the attorney, the court proceeding may be closed for an adoption
- 993 finalization proceeding.
- 994
- 995 G. Tax Credit Information – Inform the adoptive family who was selected for a child that
- 996 there is a tax credit for adopting a child from foster care. The family can find out more
- 997 about the tax credit by going to the Adoption Connection website at utahadopt.org and
- 998 looking up tax credit information under the “Considering Adoption” tab.
- 999
- 1000 H. Adult Adoptee or Adoptive Family Request for Records - The adoption records of Child
- 1001 and Family Services shall be made available to the adoptive parents or adult adoptee
- 1002 upon written request in accordance with GRAMA. [See: Utah Code Ann. [§63G-2.](#)]
- 1003

404.3 Contact Between Adopted Child And Birth Family Members

Philosophy:

Help children stay connected with birth family members after adoption to help relieve loss, cultivate a pride in their heritage, and answer questions about family histories of medical and mental health conditions.

Major objectives:

Child and Family Services will help children who are adopted benefit from contact with birth family members when all parties agree it is safe and appropriate. Contact with birth family members may help a child:

- A. Relieve grief and loss. Children have often lost connections with birth family members through being in out-of-home care and further lose connections after they are adopted.
- B. Cultivate pride in their biological heritage to develop self-worth and good self-esteem. Contact with appropriate birth family members can help an adopted child understand their biological heritage.
- C. Explain things like their genetic traits and possible inherited medical and mental health conditions.

Applicable Laws

Utah Code Ann. ~~§80-3-410. Adoptive placement time frame—Contracting with agencies~~ §80-2-804. Adoptive placement time frame -- Division contracts with child-placing agencies.

Utah Code Ann. [§78B-6-146](#). Postadoption contact agreement.

Definitions

- A. Post Adoption Contact Agreement: A document, agreed upon prior to the finalization of an adoption of a child in custody of Child and Family Services, that outlines the relationship between an adoptive parent, birth parent, or other birth relative and an adopted child after the finalization of adoption.
- B. Other Birth Relative: A grandparent, stepparent, sibling, stepsibling, aunt, or uncle of the prospective adoptive child.

Practice Guidelines

- A. The caseworker shall discuss with the Child and Family Team the short- and long-term advantages and disadvantages of a post adoption contact agreement with birth family members.
 - 1. Determine if there are birth family members who can be safe and appropriate.
 - 2. Determine if contact with safe and appropriate birth family members would benefit the child and be in the child's best interest.

- B. The caseworker shall discuss with the prospective adoptive parents if they are willing to consider contact with safe and appropriate birth family members. If so:
1. Assess if a relationship with birth family member(s) can be non-judgmental and trusting and if not, what things would be helpful to develop a basic trust.
 2. Assess whether both the prospective adoptive parents and birth family member(s) for who contact is being considered agree that they want contact.
 3. For each birth family member for whom contact is agreed upon by both the adoptive parents and the birth family member, determine:
 - a. What kind of contact (such as letters, email, telephone calls, video conferencing, or face-to-face visits).
 - b. How often contact would be beneficial. Examples may be yearly, quarterly, or monthly.
 - c. The kind and frequency of contact should be defined separately for each birth family member for whom contact would benefit the child.
- C. The caseworker shall educate the prospective adoptive parents that post adoption contact agreements may be a:
1. Verbal agreement between them and the birth family member.
 2. Written agreement between them and the birth family member which details agreed-upon contact. This type of agreement is written in good will but is not legally enforceable.
 3. Legally enforceable written post adoption contract agreement between them and the birth family member that is submitted in court at the time of the adoption finalization.
- D. The caseworker shall help the prospective adoptive parents think through how changes in the agreed-upon contact will be addressed in the future.

Legally Enforceable Post Adoption Contact Agreement

- A. When both the prospective adoptive parents and birth parent or other birth relative agree to enter into a legally enforceable post adoption contact agreement, a caseworker may help in the development of that agreement.
1. Child and Family Services may NOT take into account a prospective adoptive parent's willingness, or unwillingness, to enter into a post adoption contact agreement before placing the prospective adoptive child for adoption.
 2. Child and Family Services may NOT imply a legally enforceable post adoption contact agreement is required before an adoption may be finalized.
 3. In order to be legally enforceable, a post adoption contact agreement shall be:
 - a. Approved by the court before the finalization of the adoption, with the court making a specific finding that the agreement is in the best interest of the child;
 - b. Signed by each party claiming a right or obligation in the agreement; and
 - c. Approved by the child, if the adopted child is 12 years of age or older.

- B. The caseworker shall ensure that the post adoption contact agreement includes the following;
1. A description of visits, if any, that shall take place between the birth parent, other birth relative, prospective adoptive parent, and adopted child, and the degree of supervision, if any, that shall be required during a visit between a birth parent, other birth relative, and adopted child.
 2. What information, if any, shall be provided to a birth parent or other birth relative about the adopted child and how often that information shall be provided.
 3. A description of what grounds, if any, on which the adoptive parent may;
 - a. Decline to permit visits between the birth parent or other birth relative and the adopted child; or
 - b. Decline to permit information provided to a birth parent or other birth relative about the adopted child.
- C. The caseworker shall ensure that all parties understand that a violation of a post adoption contact agreement is not grounds:
1. To set aside an adoption; or
 2. For monetary damages.
- D. Child and Family Services and the court shall presume that the adoptive parent's judgment about the best interest of the child is correct in any action seeking to enforce, modify, or terminate the post adoption contact agreement.
- E. The caseworker will ensure that all parties understand that in the case of a violation of a post adoption contact agreement, the court that approved the post adoption contact agreement may order the parties to attend mediation if it is determined to be in the child's best interest. The mediation will determine if:
1. The parties performed the duties outlined in the post adoption contact agreement in good faith;
 2. There is a reasonable alternative that fulfills the spirit of the post adoption contact agreement without ordering mandatory compliance with the post adoption contact agreement; and
 3. Enforcement of the post adoption contact agreement is in the best interest of the adopted child.
- F. The caseworker shall ensure that the post adoption contact agreement does not limit the adoptive parent's ability to move out of state.
- G. The caseworker shall have the prospective adoptive parents and any birth family member who is a party of the draft agreement read and sign the agreement.
- H. The caseworker shall send the post adoption contact agreement to the Assistant Attorney General and the child's Guardian ad Litem for input and to be written as a court document.

405 Adoption Assistance

Philosophy:

Adoption assistance was originated by the federal government to address the financial barrier to adopting a child with special needs who waits in public foster care for a permanent family. The purpose of the Adoption Assistance Program is to aid an adoptive family to establish and maintain a permanent living arrangement for a child who qualifies.

Adoption preparation is much more than helping a prospective adoptive family understand financial and medical assistance. It involves helping the family understand all the ways things will change as they go from fostering a child to adopting and being the legal parent to a child with special needs.

Major objectives:

- A. The caseworker will begin to educate the permanent family about the changes adoption will bring to their family at the time reunification services are no longer offered or the permanency goal changes to adoption.
- B. The Child and Family Team will help the prospective adoptive family assess what they will need to parent the child in the present and in the future.
- C. The Child and Family Team will help the prospective adoptive family begin to think about all the needs the child has and the services that have been and/or will be required to meet those needs.
- D. The caseworker will help the family determine what they may or may not have available to them after the adoption.
- E. The caseworker, through the prior objectives, will help the family start thinking about their adoption assistance needs.

Applicable Laws

Federal Law Title IV-B Part 2 Promoting Safe and Stable Families

Federal Law Title IV Part E Adoption Assistance Program

Federal Regulations 45 CFR 1356.22,30,40,41, 50, 60, and 71

Utah Code Ann. ~~§26-18-703. Medical assistance identification~~ §26B-3-141. Medical assistance from division or Department of Workforce Services and compliance under adoption assistance interstate compact -- Penalty for fraudulent claim.

Utah Code Ann. §80-2-801. Definitions.

Utah Code Ann. §80-2-806. Division adoption assistance -- Eligibility -- Limitations.

Utah Code Ann. §80-2-807. Division supplemental adoption assistance -- Department advisory committee.

Utah Code Ann. §80-2-808. Division termination or modification of adoption assistance.

Utah Code Ann. §80-2-809. Interstate compact adoption assistance agreements.

Utah Administrative Code, Rule R512-43. Adoption Assistance.

Types of Adoption Assistance

- A. Reimbursement of Non-Recurring Adoption Expenses (SAR).
- B. State Medical Assistance (SA Medicaid).
- C. Monthly Subsidy (SUB Federal or SAP State).
- D. State Supplemental Adoption Assistance (SAC).
- E. For details see Utah Code Ann. [§80-2-801](#).

Adoption Support

In addition to adoption assistance, an adoptive child and family may be supported with Federal Adoption Promotion and Support Funds, Promoting Safe and Stable Families Grant funding (FPA).

General Requirements for Adoption Assistance

- A. Child and Family Services is responsible for notifying a prospective adoptive family of the availability of adoption assistance when the family begins an adoptive placement of a qualified child in public foster care.
- B. Adoption assistance is based upon the child meeting qualifying factors, not the adoptive family.
- C. Basic Qualifying Criteria: A child meets the basic qualifying criteria for adoption assistance if all of the following are met:
 - 1. State Has Determined Child Cannot or Should Not Return Home: The state has determined that the child cannot or should not be returned home. This means:
 - a. The child received services through Child and Family Services and parents have voluntarily relinquished parental rights or the court has terminated parental rights.
 - b. The child who is an SSI recipient at the time the adoption proceedings are initiated cannot return home because parents have voluntarily relinquished parental rights or the court has terminated parental rights.
 - 2. Efforts to Place Without Adoption Assistance: Child and Family Services has documentation that reasonable efforts were made to place the child for adoption without adoption assistance.
 - a. An exception applies if the child has significant emotional ties with the prospective adoptive family prior to the adoptive placement and it is not in the child's best interest to consider a different adoptive placement.
 - 3. Child/Youth with a Special Need: The child meets at least one of the following special needs factors:
 - a. Five years of age or older.

- b. Under 18 years of age with a physically, emotional, or mental disability. A child is considered to meet this requirement if under age five years old and at risk of developing a physical, emotional, or mental disability due to specific factors identified in the child's or birth parents' health or social histories.
 - c. Member of a sibling group placed together for adoption.
 - D. A child must be a U.S. citizen or qualified alien to receive adoption assistance.
 - E. An application for adoption assistance is submitted to the regional Adoption Subsidy Committee on a form provided by Child and Family Services.
 - F. Application for adoption assistance, approval, and completion of the adoption assistance agreement, including signatures of an adoptive parent and a representative from Child and Family Services, are to be completed prior to finalization of the adoption.
 - G. Adoption assistance usually begins after finalization of an adoption. However, adoption assistance may be initiated at the time of placement if the child is legally free for adoption, the adoptive home is approved, adoption proceedings are initiated, an adoption assistance agreement is fully executed prior to placement, and foster care maintenance payments are not being provided for the child.
 - H. An adoption assistance agreement shall be approved and signed by an adoptive parent and Child and Family Services representative before any payments may be made to an adoptive family or before state medical assistance may be initiated.
 - I. Refer to Administrative Rule [R512-43-3](#) General Requirements for Adoption Assistance for additional details. Also see Utah Code Ann. [§80-2-806](#). Division adoption assistance -- Eligibility -- Limitations.

Reimbursement of Non-Recurring Adoption Expenses (SAR)

- A. Child and Family Services may reimburse an adoptive family up to \$2,000 per child for non-recurring adoption expense directly related to the legal adoption of a child, such as, attorney fees, court costs, adoptive home study, health and psychological examinations of adoptive parents, supervision of placement, and transportation and reasonable costs of lodging and food for the child and parents during the placement or adoption process.
- B. To qualify for reimbursement of non-recurring adoption expenses the criteria in the prior section "Basic Criteria for Adoption Assistance" must be met.
- C. The regional Adoption Subsidy Committee must approve non-recurring expenses.
- D. Adoptive parents are responsible to provide necessary receipts for reimbursement. This funding may not be provided in advance. It is a reimbursement of costs already incurred.

1271 E. Refer to Administrative Rule [R512-43-4](#) Reimbursement of Non-Recurring Adoption
1272 Expenses for additional details. Also Utah Code Ann. [§80-2-807](#). Division supplemental
1273 adoption assistance -- Department advisory committee.

1274
1275 F. Summary Table of Qualifications for Non-Recurring Costs Reimbursement.

Requirements to Qualify for Reimbursement of Non-Recurring Costs	
All three of the following must be met:	
1. The state has determined that the child cannot or should not be returned home.	
2. Child and Family Services has documentation that reasonable efforts were made to place the child or youth for adoption without adoption assistance OR the child has significant emotional ties with the prospective adoptive family prior to the adoptive placement and it is not in the child's best interest to consider a different adoptive placement.	
3. The child meets at least one of the following special needs factors:	
a. Five years of age or older.	
b. Under 18 years of age with a physically, emotional, or mental disability.	
i. A child is considered to meet this requirement if under age five years old and at risk of developing a physical, emotional, or mental disability due to specific factors identified in the child's or birth parents' health or social histories.	
c. Member of a sibling group placed together for adoption.	

1276
1277 G. Table of Frequent Types of Scenarios requesting Non-Recurring Cost.

Licensed Resource Family (including kin)	A child in public foster care who is placed with a licensed resource family meets the qualifications for non-recurring cost if documentation shows the child meets the three requirements in the prior summary table in this section.
Unlicensed Kin Caregiver	The family qualifies for non-recurring costs if documentation shows the child meets the general qualifying factors for adoption assistance. The first requirement for reimbursement of non-recurring cost may be met if Child and Family Services provided services and parental rights have been terminated voluntarily or by the court, and the child may or may not have ever been in Child and Family Services custody. Documentation must also show that the child could not be placed without adoption assistance or has an emotional tie to the adopting family and that the child has a special need as defined in prior requirement table in this section.
Private or Independent Adoption	A family that adopts through a private or independent adoption only qualifies for reimbursement of non-recurring costs if documentation shows the child meets the three requirements in the prior requirement table in this section, and qualifies for Social Security Income (SSI) disability at the time the adoption proceedings are initiated or was a recipient of services by Child and Family Services.

1278
1279 Monthly Adoption Subsidy (AAM) and Medicaid (SA)

1280 A. Monthly financial adoption subsidy and Subsidized Adoption Medicaid promote
1281 adoptions of children and youth from foster care by financially helping adoptive families
1282 meet the needs of the children who they adopt. Children/youth who have been in foster
1283 care often have special needs from the trauma of abuse, neglect, grief, and loss. They
1284 may also have other special needs. The monthly financial adoption subsidy and Medicaid

are designed to help adoptive families address special needs for which their adopted children may struggle.

- B. The amount of monthly adoption subsidy to be paid for a child is based on the child's present and long-term treatment and care needs and available resources, including the family's ability to meet the needs of the child. A combination of community resources, the parents' resources, and monthly adoption subsidy should cover the ordinary and special needs expenses of the child projected over an extended period of time.
- C. The monthly subsidy may be used according to the parents' discretion. Some examples of the uses of the monthly subsidy payment are medical, dental, or mental health services not paid for by the state medical assistance or family insurance, special equipment for physically or mentally challenged children, respite care, day care, therapeutic equipment, minor renovation of the home to meet special needs of the child, damage and repairs, speech therapy, tutoring, specialized preschool based on needs of the child, private school, exceptional basic needs such as special food, clothing, and/or shelter, visitations with biological relatives, and cultural and heritage activities and information.
- D. Qualifying Child/Youth for Monthly Adoption Assistance: In order to qualify for a monthly adoption subsidy, the child must meet the three BASIC QUALIFYING CRITERIA in the above section, AND must also meet the definition of a child in public foster care, qualify for SSI, or be a prior recipient of adoption assistance.
1. Child or Youth in Public Foster Care: For the purposes of adoption assistance, a child is considered to meet the definition of a child in public foster care if the child was placed with the family who adopts from the temporary or legal custody with Child and Family Services. For example:
 - a. A child is in foster care (state custody) until the adoption is finalized.
 - (1) The child is adopted either by a licensed foster care provider or an approved adoptive family through an upfront adoption subsidy, OR
 - b. A child or youth who was taken into protective custody and, as a result of the protective episode, was placed with a relative who was given legal custody meets the definition of a child in public foster care. This includes:
 - (1) If the court orders Child and Family Services to continue to provide Protective Supervision Services (PSS) for the family in making safety and permanency decisions for the child, including placement decisions and permanency goals. And
 - (2) This may include a change in placement to another relative while the PSS continue to be court ordered, OR
 - c. Guardianship of a child in foster care is given to the licensed foster care provider and that provider adopts the child, OR
 - d. The parent of the child to be adopted is in foster care and, although Child and Family Services did not take custody of the child to be adopted, Child and Family Services did make a maintenance payment on the child's behalf as the child of a minor who is a foster care recipient, OR

- 1329 e. The child was placed in foster care with Child and Family Services
1330 through a Voluntary Placement Agreement and a foster care maintenance
1331 payment was made for the child.
- 1332 2. Supplemental Security Income (SSI) Recipient: The child qualifies as a
1333 recipient of Supplemental Security Income (SSI) for a disability at the
1334 time the adoption proceedings are initiated. This means that prior to
1335 initiation of the adoption proceedings, the child has received written notice
1336 from the Social Security Administration that he or she qualifies for SSI
1337 payments, or the child has been receiving SSI payments.
- 1338 3. Prior Subsidized Adoption: The child was in a prior adoption in which an
1339 adoption assistance agreement was executed for monthly adoption
1340 subsidy.
- 1341 4. Exclusions:
- 1342 a. A child **cannot** qualify for adoption assistance if adopted by one of his or
1343 her biological parents whose parental rights were previously terminated.
- 1344 b. A child who is adopted through a private or independent adoption **cannot**
1345 qualify for a monthly adoption subsidy **unless** he or she qualifies as a
1346 recipient of SSI for a disability at the time the adoption proceedings are
1347 initiated.
- 1348
- 1349 E. Eligibility for Federal Adoption Assistance: When the adoption subsidy worker has
1350 determined that a child qualifies for adoption assistance, it is the responsibility of the
1351 eligibility worker to determine if the monthly adoption assistance is eligible for Title IV-
1352 E funding.
- 1353
- 1354 F. Summary Table regarding Qualifications for Monthly Adoption Subsidy.

**Requirements to Qualify for Monthly Adoption Subsidy
(including Medicaid only)**

All three of the following must be met:

1. The state has determined that the child cannot or should not be returned home.
2. Child and Family Services has documentation that reasonable efforts were made to place the child for adoption without adoption assistance OR the child has significant emotional ties with the prospective adoptive family prior to the adoptive placement and it is not in the child's best interest to consider a different adoptive placement.
3. The child meets at least one of the following special needs factors:
 - a. Five years of age or older.
 - b. Under 18 years of age with a physically, emotional, or mental disability.
 - i. A child is considered to meet this requirement if under age five years old and at risk of developing a physical, emotional, or mental disability due to specific factors identified in the child's or birth parents' health or social histories.
 - c. Member of a sibling group placed together for adoption.

In addition to the three requirements listed above, at least one of the following situations must also exist:

- Child/youth is in Utah's public foster care or was in foster care immediately prior to the adoptive placement.
- Child/youth qualifies for SSI prior to the initiation of the legal adoption proceedings.
- Child's parent is in foster care and child received a maintenance payment.
- Child/youth was in prior subsidized adoption.

(Except in situations in which the child is adopted by one of his or her biological parents.)

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1356

G. Table of Frequent Types Scenarios requesting Monthly Adoption Subsidy

Licensed Resource Family	A child in public foster care who is placed with a licensed resource family meets the qualifications for monthly adoption subsidy if documentation shows that the three requirements defined in the prior requirement table are met and the child is adopted directly from foster care.
Unlicensed Kin Caregiver	A child or youth who was taken into protective custody and, as a result of the protective episode, was placed with a relative who was given legal custody meets the definition of a child in public foster care. If the court then orders Child and Family Services to continue to provide Protective Supervision Services for the family in making safety.
	and permanency decisions for the child, including placement decisions and permanency goals, this also meets the definition of a child in foster care. This may include a change in placement to another relative while the Protective Supervision Services continue to be court ordered. The child would then qualify for monthly adoption subsidy if documentation shows the three basic qualifying factors defined in the prior requirement table are met. A child or youth does not qualify for monthly adoption subsidy if the child or youth was never in protective custody or foster care
Private or Independent Adoption	A child who is adopted through a private or independent adoption only qualifies for monthly adoption subsidy if documentation shows the three

	requirements defined in the prior requirement table are met and he or she qualifies for SSI disability at the time the adoption proceedings are initiated.
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- H. Follow the objectives under the Major objectives section above to begin the adoption assistance process.
- I. A child who qualifies for adoption assistance should be provided with state medical assistance (Medicaid) if the child has health factors that warrant Medicaid coverage. This may be provided to the child with an Adoption Assistance Agreement, even if it is determined that no financial monthly adoption subsidy is needed.
- J. Process for Determining Monthly Subsidy Amount
1. The Monthly Adoption Subsidy may not be denied based on a means test of the adoptive family.
 2. The monthly financial subsidy is negotiated based on the level of needs of the child to be adopted and the ability of the prospective adoptive family to meet those needs.
 3. The Adoptive Parent Statement of Disclosure items must be reviewed in depth by the caseworker and adoptive parent prior to subsidy negotiation.
 4. The caseworker will use the FORM AD 19: Subsidy Consideration Guidelines to talk with the prospective adoptive family about the level of child's special needs and the family's ability to meet those needs.
 5. Determining the amount of the monthly financial subsidy can be derived from the level of the child's special needs outlined in the chart on FORM AD 19.
 6. The amount of the monthly subsidy may not exceed the payment that would be made if the child was placed in a foster family home at the point in time when the Adoption Assistance Agreement is being initiated or revised.
 7. After talking with the prospective adoptive family, the caseworker completes FORM AD21A: Subsidy Program Application and brings it with documentation regarding special needs of the child to the Adoption Subsidy Committee for review and recommendation.
 8. A child's adoption assistance level may be increased by one level if the adoption assistance committee determines that the child's permanency may be compromised due to financial barriers to the child's adoption. At least one of the following circumstances must also apply:
 - a. The child has been in state custody for longer than 24 months.
 - b. The child is nine years of age or older.
 - c. The child is part of a sibling group of three or more children being placed together for the purposes of adoption.
 9. When the prospective adoptive family agrees on the negotiated monthly subsidy amount, the Adoption Assistance Agreement is signed by the prospective adoptive parents and returned to the Child and Family Services office, then signed by a Child and Family Services representative to initiate the monthly adoption subsidy, beginning the month following the final foster care payment.

10. Adoption Assistance Agreement will be written to terminate the end of the month of the youth's 18th birthday.
 11. The amount of monthly adoption subsidy may increase or decrease when the child's level of need or the family's ability to meet those needs changes. The family or the caseworker may initiate a change in the amount of monthly adoption subsidy at any time when needs or resources change.
 - a. The monthly adoption subsidy is increased to meet the special needs of the child for a limited time period, such as when a youth is admitted to a residential treatment program. The Adoption Assistance Agreement would then be written for a period of time up to one-year and reassessed based on the youth's special needs.
 12. The amount of the monthly adoption subsidy is subject to the approval of the regional Adoption Subsidy Committee. If the requested amount is not granted, the adoptive parent has a right to appeal.
- K. Refer to Administrative Rule [R512-43-5](#), Monthly Subsidy, and [R512-43-6](#), State Medical Assistance, for additional details. Also Utah Code Ann. [\[§26-18-703. Medical assistance identification\]](#)§26B-3-141. [Medical assistance from division or Department of Workforce Services and compliance under adoption assistance interstate compact -- Penalty for fraudulent claim.](#)

Changes in Adoptive Parents' Circumstances

- A. In the Adoption Assistance Agreement, the adoptive parents verify that they will immediately notify Child and Family Services in writing if any of the following changes in circumstances occur:
 1. The adoptive parents have a change of address and/or telephone number.
 2. The adoptive parents divorce. Verification of the parent granted physical custody of the child will be needed.
 3. The adoptive child no longer resides with the adoptive parents.
 4. The adoptive parents are no longer providing any financial support to the child, or are providing reduced financial support for the child.
 5. The adoptive parents no longer have physical custody or legal guardianship of the child.
- B. If an adopted child who is receiving Adoption Assistance comes back into out-of-home care, the adoption subsidy worker and the adoption subsidy worker's supervisor shall receive a SAFE notice.
 1. The adoption subsidy worker shall send a notification letter, SAFE form SUB04 "Notification of Child Coming into Foster Care", to inform the adoptive parents that the amount of the monthly adoption subsidy will be re-assessed based on changes in the child's special needs and the parents' ability to meet those needs based on coming into out-of-home care.
 2. The notification will inform the adoptive parents they will continue to be financially responsible for the child and that Office of Recovery Services will be assessing child support for the care of their child.

3. Medicaid will be re-assessed by an eligibility worker for a child in out-of-home care and issued the appropriate Medicaid benefits.
4. If the adoptive parents do not contact Child and Family Services within 30 days of the date of the letter to re-assess the adoption monthly subsidy, the monthly adoption subsidy will be suspended beginning the month following the day the notification should have been made.

Annual Review of Adoption Assistance

- A. Annually a Review of Adoption Assistance letter will be sent to adoptive parents of a child who receives adoption assistance. The annual letter:
1. Provides current contact information for the post adopt worker, the subsidy worker, and the Medicaid worker.
 2. Reminds the parents of the signed agreements language to notify Child and Family Services of changes in address, phone, and legal and/or financial responsibility for the identified adopted child.
 3. Reminds the parents of grounds for termination of the Adoption Assistance Agreement. Those reasons are listed in the section below.
 - a. The Annual Review of Adoption Assistance letter includes language that the Adoption Agreement Assistance continues until the month the youth reaches his or her 18th birthday even if the youth is in high school at that.
 4. When sending an Annual Review of Adoption Assistance letter to adoptive parents who reside in Utah, a current Utah's Post Adoption Resource Connection booklet and Post Adopt Services brochure should be included.

Renewal of Adoption Assistance Agreement

- A. A renewal of an Adoption Assistance Agreement would be warranted when:
1. The Adoption Assistance Agreement has never been converted to the long term (age 18 years of age) agreement because of an oversight by Child and Family Services or because there was a problem locating the adoptive family for a period of time.
 2. The child qualifies as a child with a disability and will continue to receive the monthly subsidy beyond his or her 18th birthday.

Amendment of an Adoption Assistance Agreement

- A. An amendment of an Adoption Assistance Agreement would be warranted when:
1. There is a change in the monthly subsidy.
 - a. The changed amount may be approved for the duration of the agreement (end date being the end of the month of the child's 18th birthday), or
 - b. The changed amount may have a "time-limited" end date.
 - (1) Time-limited end dates need to tracked.
 - (2) Time-limited subsidy changes include changes in the amount of the monthly subsidy due to out-of-home treatment or a child re-entering foster care.
 2. A "zero" subsidy is changed to a monthly subsidy.

3. When there are two adoptive parents in the family, the parent to receive the payment changes:
 - a. At the request of the family.
 - b. Because the parent receiving the payment dies.
 - c. The adoptive parents divorce and the parent awarded custody is not the one receiving the payment.
4. The adoptive parent gets married, or re-marries, and the new spouse legally adopts the child and wants to be added to the agreement.
5. There is a change in the eligibility.

Termination of Adoption Assistance

- A. A monthly adoption subsidy is in effect as long as the adoptive parents continue to be legally responsible to provide financial support for the identified adopted child until the youth turns 18 years of age, unless any of the following reasons exist:
 1. The adoptive parents request termination of the Adoption Assistance Agreement.
 2. The child dies.
 3. Both of the adoptive parents die.
 4. The adoptive parents' legal responsibility for the child ceases.
 5. The state determines that the child is no longer receiving financial support from the adoptive parents.
 6. The youth marries.
 7. The youth enters the military.
- B. The monthly adoption subsidy cannot be extended beyond the month of a youth's 18th birthday even if the youth is still in school, unless disabled as described below.
- C. The monthly adoption subsidy may extend until the youth reaches age 21 years old when the regional Adoption Subsidy Committee has determined that he or she has physical or mental disability as defined in the criteria for DHHS, Division of Services for People with Disabilities (DSPD).
 1. In such cases the young adult may also likely be eligible for SSI for a disability, the amount of the monthly adoption subsidy would be taken into account by the Social Security Administration in determining the Social Security disability Income (SSI) amount. Parents of an adopted young adult who has a disability will want to determine if there is an advantage in continuing with the monthly adoption subsidy. If the young adult meets the criteria for DSPD, he and she may also be eligible for an array of adult special services, when available.
- D. Termination of State Medical Assistance (Medicaid) is subject to the policies of the Division of Health Care Financing, DHHS.
 1. For a youth who is not Title IV-E eligible, Subsidized Adoption Medicaid terminates at age 18, even if adoption assistance continues due to disability. The youth may qualify for continuing Medicaid coverage until age 19 under another Medicaid program.

2. For a youth who is Title IV-E eligible, Subsidized Adoption Medicaid may continue until the Adoption Assistance Agreement ends. This means the Subsidized Adoption Medicaid may continue for a disabled youth up to age 21, if the Adoption Assistance Agreement is extended. If the Title IV-E Adoption Assistance Agreement ends at age 18, the youth may still qualify for continuing Medicaid coverage until age 19 under another Medicaid program.

- E. Refer to Administrative Rule [R512-43-10](#), Termination of Adoption Assistance, for additional details. Also Utah Code Ann. [§80-2-808](#) Division termination or modification of adoption assistance.

Interstate Adoption Assistance

- A. If a child in Utah foster care is placed for adoption with parents in another state, Utah's Child and Family Services is responsible to determine if the child qualifies for adoption assistance. If the child qualifies, Utah's Child and Family Services provides adoption assistance regardless of the state of residence of the adoptive family.
- B. If a child with a previous Title IV-E Adoption Assistance Agreement enters public foster care because the adoption was dissolved or ended due to the result of the death of the parents, the state in which the child is taken into custody in public foster care is responsible to provide adoption assistance in a subsequent adoption.
- C. If a child with a previous Title IV-E Adoption Assistance Agreement does not enter public foster care when the adoption dissolved or ended due to the death of both parents, the new adoptive parent is responsible to apply for adoption assistance in the new adoptive parent's state of residence.
- D. A parent desiring to adopt an out-of-state child who is not in public foster care but is receiving SSI for a disability shall apply for adoption assistance in the parent's state of residence.
- E. Provision of Medicaid is subject to the Interstate Compact on Adoption and Medical Assistance (ICAMA). Medicaid services vary considerably from state to state.
1. If the adoption assistance is funded through federal Title IV-E, the interests of the Child will be protected through the Interstate Compact on Adoption and Medical Assistance. All States will allow Title IV-E Medicaid to be instated in the Adoptive Parent's state of residence.
 2. If the adoption assistance is funded through state funds, many states allow a child with adoption assistance to qualify for Medicaid in their state, however in some states this benefit may not be available
- F. Other services the child may need prior to finalization of the adoption are requested in the receiving state through the Interstate Compact for the Placement of Children (ICPC).

- G. If a needed service specified in the ICPC agreement is not funded by the new state of residence, the state making the original adoption assistance payment remains financially responsible for paying for the specific service.

Supplemental Adoption Assistance (SAC)

- A. Supplemental Adoption Assistance may be available for a child who meets all the qualifying criteria for a monthly adoption Subsidy and for whom an Adoption Assistance Agreement is in effect.
- B. Supplemental Adoption Assistance may only be used for extraordinary, infrequent, or uncommon documented needs not covered by a monthly adoption subsidy, state medical assistance, or other public benefit for which a child who has special needs is eligible.
- C. Supplemental Adoption Assistance is subject to the availability of state funds appropriated for adoption assistance. It is not an entitlement and will be granted only when justified by unique needs of the child and when all other resources for which a child is eligible have been exhausted.
- D. The post adopt or adoption subsidy worker will request verification from the payment technician to check CAPS (Contracts, Approvals, and Payment System) for any payments made to DSPD for the same child.
1. If there are no payments to the same child in DSPD records, then the worker may proceed to assess the request for SAC funding.
 2. If there are payments to the same child in the DSPD database, then the worker will check to see if there have been payments in the last six months. If not, the worker may proceed to assess the request for SAC funding.
 3. If there have been DSPD payments for the same child in the past six months, then the worker will check the DSPD payment against the request the parent has made for SAC funding. If the request is for a different service, then the worker may proceed to assess the request for SAC funding.
 4. If the request for SAC funding is for the same service as the DSPD payment, the SAC request will be denied.
 5. A DSPD worker will be identified in each region to address additional questions regarding DSPD payments for services for children adopted or receiving services through Child and Family Services.
- E. An email will be sent to the post adopt or adoption subsidy worker as well as the supervisor of the worker regarding the DSPD services purchased for the same child in the same period of time for whom SAC funds are being requested.
- F. Documented requests for Supplemental Adoption Assistance, including amendments or renewals, will be considered by the Adoption Subsidy Committee in the region where the adopted child's monthly adoption subsidy is managed.
1. Requests for amounts up to \$3,000 will be considered by the regional Adoption Subsidy Committee.

- 1621 2. Requests for amounts from \$3,001 to \$10,000 will be considered by the
1622 appropriate regional advisory committee established under Utah Code Ann. [§80-](#)
1623 [2-807](#).
- 1624 3. Requests for amounts exceeding \$10,001 will be considered by a state level
1625 advisory committee with the same membership composition as the regional
1626 advisory committee established under Utah Code Ann. [§80-2-807](#).
- 1627 4. Recommendations from the advisory committee are subject to the approval of the
1628 region director or designee.
- 1629
- 1630 G. When the amount of the Supplemental Adoption Assistance is approved by the
1631 appropriate committee, a Supplemental Adoption Assistance Agreement will be initiated
1632 for signature by the adoptive parents.
- 1633 1. The Supplemental Adoption Assistance Agreement will include both an amount
1634 and a time limit.
- 1635
- 1636 H. Refer to Administrative Rule [R512-43-7](#), Supplemental Adoption Assistance, for
1637 additional details. Also see Utah Code Ann. [§80-2-807](#).
- 1638
- 1639 Fair Hearings
- 1640 A. An adoptive family may request a fair hearing if:
- 1641 1. The Adoption Assistance Application is denied;
- 1642 2. The Adoption Assistance Application is not acted upon with reasonable
1643 promptness;
- 1644 3. Adoption assistance or supplemental adoption assistance is reduced, terminated,
1645 or changed without the concurrence of the adoptive parents;
- 1646 4. The amount of adoption assistance or supplemental adoption assistance approved
1647 was less than the amount requested by adoptive parents;
- 1648 5. Adoption assistance was denied because it was requested after finalization of the
1649 adoption.
- 1650
- 1651 B. Refer to Administrative Rule [R512-43-11](#) for more information.
- 1652
- 1653 Federal Adoption Promotion and Support, Promoting Safe and Stable Families (FPA) Funding
- 1654 A. Adoption Promotion and Support, Promoting Safe and Stable Families (FPA) federal
1655 funding is available to each state. The purpose of this program is to enable states to
1656 promote and support adoption services and activities designed to encourage more
1657 adoptions out of foster care. Activities include pre- and Post Adopt Services designed to
1658 expedite the adoption process and support adoptive families to make a lifetime
1659 commitment to their children.
- 1660
- 1661 B. FPA funds may be used within Child and Family Services for services to promote and
1662 support adoption.
- 1663
- 1664 C. FPA funds may be used to contract for services to promote and support adoption.
- 1665

- D. FPA funding may be used to help adoptive families directly.
1. A family who adopts a child from Child and Family Services.
 2. An adoptive family who is utilizing the services of Child and Family Services.

Federal Adoption Promotion and Support, Promoting Safe and Stable Families (FPA) Funding Regional Guidelines

- A. Each fiscal year each region is given an equal amount of base FPA funding, with the remaining FPA funding divided by the percent of adoptive families with Adoption Assistance Agreements who reside in the region.
- B. Annually each region will plan how the FPA funding will be best used in their region. Allocation of some funding for predictable requests such as the annual adoption conference and therapeutic summer programs could be part of the annual planning process.
- C. When considering a request for FPA funding, the post adopt or adoption subsidy worker will determine that the service is not available through Medicaid or other community funded services.
- D. FPA funds paid directly to a family cannot exceed \$2,000 per family per fiscal year. FPA payments to a family are taxable income. Direct payments to families are discouraged.
- E. Direct payment to a service provider may exceed \$2,000 with appropriate bids and contracts, as required by state procurement requirements.

Determining the Appropriate Funding Source

- A. When either State Supplemental Adoption Assistance (SAC) or federal Adoption Promotion and Support, Promoting Safe and Stable Families (FPA) funding could be appropriate for a funding request, the following guidelines should be considered:
1. Federal funds should be considered before state funds to assure all federal funds (which include a state match) are used in each fiscal year.
 - a. If the monthly adoption subsidy is from federal Title IV-E funds, it may be appropriate to amend the Monthly Subsidy Agreement for a limited time period, when a child would qualify for a higher subsidy to cover the costs. An example of higher costs might be room, board, and educational costs of a residential treatment program.
 - b. The federal FPA funds (which includes a state match) should be considered for use before State Supplemental Adoption Assistance.
 - c. The federal FPA funds are best used for time-limited expenditures of less than \$2,000 per family.
 2. State Supplemental Adoption Assistance funds are best used for extensive, expensive, or long-term costs after it is determined that increasing Title IV-E monthly adoption subsidy and federal FPA funding are not appropriate or available.

406 Post Adoption Services**Philosophy**

Adoption is an ongoing process that brings joys and challenges and unknown factors. The emotional highs and lows all families experience may be intensified by the many facets of adoption.

Child and Family Services has Post Adopt Services for families who have adopted children from foster care or who have been involved with Child and Family Services.

Major objectives

- A. The following Practice Guidelines are for use by post adopt workers.
- B. Post adopt workers will support families who have adopted children from any state's foster care system.
- B. Post Adopt Services are to prevent the disruption of children from adoptive placements.
- C. Post Adopt Services include:
 - 1. Helping adoptive families who have questions or concerns.
 - 2. Helping adoptive families find community resources specific to their needs.
 - 3. Accessing the adopted child's case file and information.
 - 4. Assisting adoptive families and their children with appropriate connections with birth family members.
 - 5. Providing clinical expertise to assess and help adoptive families with the challenges of parenting children who have special needs.

Applicable Law

Utah Code Ann. [§80-2-801](#). Definitions.

Utah Code Ann. [§80-2-301](#). Division responsibilities.

Utah Code Ann. [§80-2-803](#). Division promotion of adoption -- Adoption research and informational pamphlet.

Utah Code Ann. [§80-2-806](#). Division adoption assistance -- Eligibility -- Limitations.

Utah Code Ann. [§75-5-103](#). Delegation of powers by parent or guardian.

Utah Code Ann. [§78B-6-143](#). Nonidentifying health history of adoptee filed with office -- Limited availability.

Practice Guidelines

- A. Adoption Training. Post adopt workers will teach an eight-hour overview of Trust Based Relational Intervention (TBRI) and other adoption-related training for adoptive parents to help them understand how trauma, grief, and loss create challenging survival behaviors in the children they are adopting and raising. The training will also address common special needs found in children who are adopted from foster care such as fetal exposure, sexual issues, sensory-related challenges, and mental illness. The training will allow adopting parents to know the role of their post adopt worker and meet other adoptive parents, as

well as learn about resources such as support groups, respite care, and mental health providers.

- B. Place to Call for Help. Post adopt workers will help adoptive families who have questions or concerns.
- C. Community Resources for Adoptive Families. Post adopt workers will have a working knowledge of community resources that may help adoptive families with their specific situations. Post adopt workers may:
1. Connect families to helpful informational resources, support groups, schools, respite care options, mental health professionals, and an adoption lending library with many resources. Refer families to Utah's Adoption Connection website for updated adoption, trauma, and special needs resources as well as printed materials such as the Child and Family Services Adoption Connection newsletter and resources from the lending library.
 2. Cultivate resources or find creative alternatives to address the specific needs of adoptive families.
 3. All non-identifying family health history data and child's health history from the child's foster care record in the Health Data Report from the screen called "Vital Stats Letter & Health Data Report" should be printed for the adoptive parents.
- D. Access to Case Files and Information. Post adopt workers will access information from the adopted child's out-of-home file for parents to review for information needed to understand the child. Information may include the child's history that make connections between the child's past, timeframes for life events, gaps in information, and past services that may be helpful.
- The post adopt worker may help the adoptive parent share file information with the child as they grow. [See: [Section 401.4a](#) for information on file disclosure.]
1. The confidentiality agreement, SAFE form DCFS02, must be signed by the adoptive parent prior to viewing the file.
 2. Child and Family Services should orient the adoptive parent to the structure of the file and where information is located.
- E. Contact with Birth Family. Post adopt workers may provide their expert guidance to help bridge the gap between the adoptive family and the birth family at the adoptive parents' request.
- F. Clinical Expertise. Post adopt workers will provide clinical expertise and help access resources in the community to help adoptive families understand how trauma, fetal alcohol, and other special needs affect brain development and create challenges in parenting adopted children.
- Post adopt workers will provide or facilitate crisis and time-limited counseling to stabilize a difficult situation. When an adoptive family is in crisis:

1. The post adopt worker will conduct an assessment to determine the appropriate level of interventions needed to serve the child and preserve the family.
 2. The post adopt worker will develop a Child and Family Team and meetings will be held as needed to work concurrently with mental health, respite care, cluster groups, and other resources to provide the ongoing formal and informal supports needed to help stabilize the family.
 3. When an adoptive parent, who has adopted a child from foster care, contacts Child and Family Services to request services, Child and Family Services is permitted to reassess adoption assistance or use FPA grant funds or supplement adoption funds, when available, to help a child remain in the custody of his or her parents.
 4. If a case is opened by the post adopt worker to help the post adopt child and family, it will be opened under a post adopt In-Home Services code unless there are allegations of abuse and/or neglect.
 5. When a child has been adopted from foster care and there is a CPS investigation, the CPS caseworker will notify a post adopt worker to coordinate services.
 6. Unless the parents of the adopted child expressly request the child be removed (see subsection L), the child may not be removed based solely on the reason the adoptive parents are seeking services to help the child and adoptive family. Child and Family Services may not do any of the following unless there are indications of abuse and/or neglect:
 - a. File a petition for removal of a child from the child's home,
 - b. File a petition for a child protective order,
 - c. Make a supported finding,
 - d. Seek a substantiated finding,
 - e. File a petition alleging a child is abused, neglected, dependent, or abandoned, or
 - f. File a petition for termination of parental rights.
- G. Documentation of Post Adopt Services.
1. Referrals for services, short meetings, or conversations with an adoptive family will be logged in the Adoption Assistance (AAM) file.
 2. Assessments and short-term interventions will be documented in an IHS case.
 3. A post adopt (PAT) case will be opened for anything that involves a plan to develop services, based on assessments, even on a limited basis such as:
 - a. Intense intervention to prevent an out of home placement.
 - b. Intense intervention with the parents to coordinate treatment when there is a need for out-of-home care or treatment.
 4. When an adopted child who has an open AAM case comes into Child and Family Services custody, the post adopt worker may be assigned as a secondary worker on the foster care (SCF) case.
 - a. When the child returns home and the Child and Family Services foster care case is closed, the post adopt worker may open an IHS or PAT case to provide transition support at the request of the adoptive parents.

- 1845 b. If there are other Child and Family Services adopted children in the home
1846 in need of services, the post adopt worker may open an IHS or PAT case
1847 at the request of the adoptive parents.
- 1848 5. PAT interventions will include a UFACET and Child and Family Plan.
- 1849 6. If the PAT interventions include services that require funding considerations,
1850 funding requests will be coordinated with the Adoption Assistance Committee.
- 1851 a. If the AAM case is in a different region than where the family resides, the
1852 family will be asked by the post adopt worker if the AAM case could be
1853 transferred to the region where the family resides.
- 1854 b. When considering transferring an AAM case, the monthly adoption
1855 subsidy will be reviewed by the Regional Adoption Assistance Committee
1856 to assess a need for an increase before the case transfer is made.
- 1857 c. Post adopt and adoption assistance workers from each region will
1858 coordinate to make a request to transfer the AAM case.
- 1859 d. The combined recommendation from each region's post adopt and
1860 adoption assistance workers will then be submitted to the region director
1861 for the AAM case and funding transfer.
- 1862 7. Reviews of PAT cases.
- 1863 a. If there is a monthly adoption subsidy increase or a subsidy increase
1864 within the child's current adoption subsidy level range to address service
1865 needs, PAT cases should be reviewed at least every six months with the
1866 Adoption Assistance Committee.
- 1867 b. If there is an increase in the monthly adoption subsidy to a higher level
1868 range and/or use of Federal Adoption Promoting Safe and Stable Family
1869 (FPA) and/or supplemental funding requests to address the service needs,
1870 PAT cases should be reviewed at least every three months by the Adoption
1871 Assistance Committee.
- 1872
- 1873 H. Medicaid Carve-Out. When an adoptive family or Child and Family Services thinks that
1874 the family is not able to meet their mental health needs through the Public Mental Health
1875 Provider (PMHP), the post adopt worker will assist the parent in evaluating their needs
1876 and, if indicated, ask for an exemption from the PMHP. The post adopt worker will then
1877 help the parent select a contracted mental health provider that is willing to bill Medicaid
1878 and is best suited to help the family and adopted child achieve the desired outcomes.
- 1879 1. If the requested therapist is the mental health therapist who was treating the child
1880 while the child was in out-of-home care, the post adopt worker will discuss with
1881 the family what PMHP can offer that may not be available with the contract
1882 provider, such as a psychiatrist and psycho-educational groups.
- 1883 a. The post adopt worker will determine if the requested therapist contracts
1884 with the PMHP. If so, the post adopt worker will inform the parent they
1885 may remain in the PMHP and continue to receive services from the current
1886 therapist.
- 1887 b. If the parent wants to carve-out of (or be exempt from) the PMHP, the
1888 post adopt worker will contact the identified mental health therapist and

- 1889 verify their willingness to treat the family and obtain the date the treatment
1890 will begin.
- 1891 c. The post adopt worker will use the DHHS, Child and Family (DHCF)
1892 template to submit the PMHP exemption information and request to
1893 Medicaid. The request for the Medicaid carve-out should be sent via fax
1894 or email directly to the Department of Health, Medicaid adoption carve-
1895 out contact person.
- 1896 2. If a mental health therapist has not yet been identified, a clinical post adopt
1897 worker will work with the adoptive family to clinically assess the adopted child's
1898 treatment needs, including level and type of treatment (e.g., outpatient family or
1899 group therapy, residential treatment, etc.).
- 1900 a. During the clinical assessment, the post adopt worker will determine the
1901 clinical appropriateness of the Medicaid carve-out.
- 1902 b. The post adopt worker will obtain the child's treatment history from the
1903 parent, including any inpatient or residential treatment and involvement
1904 with the PMHP, including:
- 1905 (1) the names of providers;
1906 (2) the reasons for the treatment;
1907 (3) the length of the treatment episode;
1908 (4) when services were provided; and
1909 (5) the parent's perceived outcome of the treatment.
- 1910 c. The post adopt worker will determine if the child has been staffed by a
1911 multi-agency team. If the child has been staffed, the post adopt worker
1912 will obtain:
- 1913 (1) the name of the team and participating agencies;
1914 (2) when the staffing occurred; and
1915 (3) what was the recommendations of the staffing.
- 1916 d. The post adopt worker will discuss with the PMHP and parent,
1917 preferably together, whether the PMHP and parent can develop an agreed-
1918 upon treatment plan.
- 1919 (1) If they can, the Medicaid carve-out process ends.
1920 (2) If they cannot, the Medicaid carve-out process continues.
- 1921 e. The post adopt worker or professional team will provide information to
1922 the parent about the level and kind of treatment that has been
1923 recommended for the child.
- 1924 f. The post adopt worker will assist the parent with the selection of a mental
1925 health therapist by providing information about the therapist's areas of
1926 expertise and by offering several names of qualified contracted mental
1927 health providers who provide the level of services recommended and who
1928 practice in the family's area.
- 1929 g. The post adopt worker will submit the Medicaid exemption information
1930 and request to Medicaid via fax or email and will send the request directly
1931 to the DHHS, Medicaid adoption carve-out contact person. Using the
1932 DHCF template, the post adopt worker will provide the:
- 1933 (1) name of the child/youth;

- 1934 (2) Medicaid ID number;
- 1935 (3) parent's name;
- 1936 (4) name of the post adopt worker;
- 1937 (5) phone number and fax number of post adopt worker;
- 1938 (6) name of PMHP;
- 1939 (7) reasons for requested PMHP exemption (this is important so
- 1940 Medicaid can track trends and PMHP accessibility);
- 1941 (8) date of the carve-out request;
- 1942 (9) summary of the:
- 1943 (a) services requested (outpatient or residential);
- 1944 (b) name of the provider;
- 1945 (c) date the provider was contacted to verify that the provider
- 1946 is willing to treat the family;
- 1947 (d) name of the staff person contacted if different than the
- 1948 therapist (e.g., Mary Jones, receptionist at ABC counseling
- 1949 center);
- 1950 (e) date the provider will begin services; and
- 1951 (10) clinical recommendation.
- 1952 h. Medicaid will then implement the carve-out from the PMHP for mental
- 1953 health services and return the completed request to the post adopt worker,
- 1954 documenting the:
- 1955 (1) date the exemption request was received, and
- 1956 (2) date the exemption will be effective.
- 1957 i. The post adopt worker will inform the parent that the Medicaid carve-out
- 1958 has been processed and that a new Medicaid card will be issued.
- 1959 j. Medicaid will send information to the PMHP that the child has been
- 1960 exempt.
- 1961
- 1962 I. Out-of-Home Placement. When a family cannot address an adopted child's needs within
- 1963 their family setting, out-of-home placement may need to be assessed.
- 1964 1. Youth Service Centers (in regions where they exist) or Family Support Centers
- 1965 should be used to allow for a cooling down period for the family and to allow the
- 1966 post adopt worker to assess the child and family's needs.
- 1967 2. A Child and Family Team Meeting will be convened with the family, Child and
- 1968 Family Services staff, and any others who are involved or who may be helpful.
- 1969 3. The Child and Family Team will explore what services or supports may help
- 1970 address the problems while allowing the child to stay with the family.
- 1971 4. Extended respite care (two to 15 days) may be sought as a time to continue to
- 1972 assess family needs.
- 1973 5. If regular extended respite care could address the family's needs, then appropriate
- 1974 resources will be explored.
- 1975 6. If out-of-home placement is indicated, explore a voluntary agreement the family
- 1976 might make with a relative, friend, or proctor family (family-to-family) without
- 1977 Child and Family Services involvement. This allows the family to negotiate
- 1978 costs, visits, and other plans.

7. Voluntary family-to-family agreements should always address how the family will stay involved. The long-term view should be evaluated with questions such as; “Where will the child spend holidays and vacations? Who will help when the car breaks down or the child breaks a leg? Who will help with post-high school education? When the child becomes an adult, who will help with the wedding or when a baby is born?” In a voluntary agreement between an adoptive family and another family:
 - a. The adoptive family will arrange to give the family who is assuming physical custody a temporary Delegation of Custody and/or a properly executed Power of Attorney (Utah Code Ann. [§75-5-103](#)). The family may require legal advice.
 - b. The child’s Medicaid card will be sent to the family with physical custody of the child.
 - c. The monthly adoption subsidy will continue to go to the adoptive family who will forward it to the family with physical custody of the child.
 - d. The family with physical custody has no legal standing.
 - e. The adoptive family continues to be financially and legally responsible for the child.
 - f. Either family can revoke the voluntary agreement at any time.
 - g. The family with physical custody has the power to make decisions regarding routine medical and basic educational needs of the child.
 - h. Either family may stay in contact with Child and Family Services as needed.
 8. Legal custody and guardianship is a legal process in which an adoptive family may give another family the legal rights to raise the child. The following are required for such an arrangement:
 - a. Court involvement.
 - b. The child’s Medicaid card will be sent to the legal guardianship family.
 - c. The monthly adoption subsidy continues to go to the adoptive family, who continues to be financially responsible and they will forward it to the family with guardianship of the child.
 - d. Either family may stay in contact with Child and Family Services as needed.
 9. If an out-of-home placement is indicated and a voluntary family-to-family placement is not appropriate because of the mental health treatment needs of the child, a Medicaid carve-out for residential treatment may be assessed. Clear treatment objectives, family involvement, and the child’s return home plan will be part of the Medicaid carve-out plan.
 - a. A PAT case will be opened in SAFE.
 - b. Child and Family Team Meetings will be held as often as needed to keep the family involved in decisions and facilitate the return home plan for the child.
 - c. The case will be reviewed a minimum of every three months.
- J. Medicaid Carve-Out for Residential Treatment.

- 2024 1. The post adopt worker and the parent together will determine if residential
2025 treatment is indicated, as well as the level and kind of residential treatment that
2026 would best meet the child's mental health needs.
- 2027 2. The post adopt worker may want to contact a Child and Family Services contract
2028 specialist to:
 - 2029 a. Obtain information on the most appropriate residential treatment provider,
2030 taking into account the location of the provider, provider expertise,
2031 availability of a bed, etc.
 - 2032 b. Obtain the correct Child and Family Services code (that would have been
2033 used for a child in out-of-home care) for the residential treatment provider
2034 ultimately selected (e.g., DRM, DIR, etc.). This is absolutely necessary so
2035 Medicaid can ensure that the provider bills only the rate agreed to in the
2036 provider's contract with Child and Family Services.
- 2037 3. The parent is responsible for the room, board, and educational costs of the
2038 residential treatment program. The post adopt worker will discuss with the parent
2039 how this will be paid. The parent may use the adoption monthly subsidy to help
2040 cover costs.
- 2041 4. The post adopt worker then:
 - 2042 a. Contacts the selected residential treatment provider to ensure the provider
2043 is willing to serve the child and determines the date the provider will begin
2044 providing services.
 - 2045 b. Estimates the length of treatment and develops an after-care plan,
2046 including a transition plan for the child to successfully return home,
2047 services the family will receive after discharge from the residential
2048 treatment to maintain stability, and whether the child will be re-enrolled in
2049 the PMHP.
 - 2050 c. Using the DHFC template, submits the exemption information and request
2051 to Medicaid via fax or email and sends the request directly to the
2052 Department of Health, Medicaid adoption carve-out contact person.
 - 2053 d. Using the DHCF template, provides the:
 - 2054 (1) name of the child;
 - 2055 (2) Medicaid ID number;
 - 2056 (3) parent's name;
 - 2057 (4) name of the post adopt worker;
 - 2058 (5) phone number and fax number of the post adopt worker,
 - 2059 (6) name of the PMHP;
 - 2060 (7) reasons for requested the PMHP exemption (this is important so
2061 Medicaid can track trends and PMHP accessibility);
 - 2062 (8) date of the carve-out request;
 - 2063 (9) summary of the:
 - 2064 (a) services requested (outpatient or residential);
 - 2065 (b) name of the provider;
 - 2066 (c) date the provider was contacted to verify if the provider is
2067 willing to treat the child;

- (d) name of the staff person contacted if different than the therapist (e.g., Mary Jones, receptionist at ABC counseling center);
 - (e) date the provider will begin services;
 - (f) level of care (e.g., DIR, DRM, etc.);
 - (g) proposed discharge date; and
 - (10) Clinical recommendation.
 5. Medicaid will implement the exemption from the PMHP for mental health services and will return the completed request to the post adopt worker, documenting the:
 - a date the exemption request was received; and
 - b. date the exemption will be effective.
 6. The post adopt worker will inform the parent that the Medicaid carve-out has been processed and that a new Medicaid card will be issued.
 7. Medicaid will send information to the PMHP that the child has been exempt.
 8. The post adopt worker will staff the case of a child who is in out-of-home treatment every three months to assess treatment progress, parent engagement, and needed adaptations and transition planning, including services needed for the child and family to be successful upon the return home.
 9. The post adopt worker will create a return home plan when a child has been in an out-of-home placement and the following circumstances exist:
 - a. Parents appear to be disengaged from the child and show no willingness to look at options of how the child will successfully return home, or
 - b. Parents actively refuse to allow the child to return home, or
 - c. Parents are not paying the fees for room and board, or
 - d. The child wants to go home and it may be harmful for the child's future success to remain in out-of-home services, or
 - e. There are no further benefits from out-of-home placement.
 10. If the parents are disengaged or refuse to allow the child to return home after efforts to engage them in a return home plan, the post adopt worker will staff with a CPS caseworker to determine if abuse, neglect, or dependency needs to be addressed and a CPS case open.
 - K. Determining the Appropriate Funding Source. When both state Supplemental Adoption Assistance (SAC) and federal FPA funding would be appropriate to use for a funding request, the following guidelines should be considered.
 1. Federal funds should be considered before state funds to assure all federal funds (which include a state match) are used in each fiscal year.
 - a. The level of Title IV-E monthly subsidy should be assessed to determine if it is appropriate to increase the monthly subsidy with a time-limited amendment to address the special needs of a child who requires residential mental health treatment.
 - b. Federal FPA funds (which include a state match) should be considered for use before state SAC funds.

- 2112 c. Federal FPA funds are best used for time-limited expenditures of less than
2113 \$2,000 per family. When using federal FPA funding, take into account
2114 other needs the region may have for the use of such funds.
- 2115 2. State SAC funds are best used for extensive, expensive, or long-term expenses
2116 after it is determined that increasing Title IV-E monthly adoption subsidy and
2117 federal FPA funding are not sufficient, appropriate, or available.
2118
- 2119 L. Juvenile Justice Services or DHHS Custody. Post adopt workers may need to help an
2120 adoptive family when an adopted child is involved with the Division Juvenile Justice
2121 Services and the court orders the child into the custody of Child and Family Services or
2122 an adopted child is taken into the custody of the DHHS to receive services for people
2123 with disabilities.
2124
- 2125 M. Requests for Child and Family Services to Take Custody. When a family requests Child
2126 and Family Services take custody of their child, the post adopt worker should offer the
2127 family respite care and help the family assess their options.
- 2128 1. The post adopt worker will offer the family respite care by having them take the
2129 child to Youth Service Centers (in regions where they exist), Family Support
2130 Centers, or other regional respite care options.
- 2131 2. A PAT case will be opened.
- 2132 3. Child and Family Team Meetings will be held to assess the family's strengths and
2133 challenges, what resources have been utilized, and what resources may be
2134 available. The Child and Family Team will explore what services or supports
2135 may help address the problems while allowing the child to stay with the family.
- 2136 4. A UFACET will be completed by the post adopt worker from information
2137 gathered from the team.
- 2138 5. When the parents insist on Child and Family Services taking custody of a child,
2139 the post adopt worker will explain to the parents about court involvement,
2140 permanency time frames and that the Office of Recover Services will assess child
2141 support payments.
- 2142 6. An out-of-home placement may be arranged if the assessment deems it is
2143 appropriate for the child and family.
- 2144 7. A Child and Family Plan for reunification services will be developed.
- 2145 8. Child and Family Services custody may be considered after the child has been in
2146 an out-of-home placement and the return home plan is unsuccessful.
2147
- 2148 N. Adoptive Parents Who Want to Relinquish Parental Rights. A family may want to
2149 voluntarily relinquish their parental rights to an adopted child.
- 2150 1. The post adopt worker will work with the family to show that reasonable efforts
2151 were made to keep the child out of state custody.
- 2152 a. Intensive family preservation services should be offered.
- 2153 b. Placement of the child with extended family, friend, neighbor, birth
2154 relatives, etc. should be explored.

2. If the child must be removed from the adoptive home immediately, have the parent sign a Consent to Place form giving custody and guardianship to Child and Family Services and place the child in shelter care.
 - a. Child and Family Services will maintain custody for 12 months following a Child and Family Plan, before relinquishment of parental rights are considered to allow court reviews and permanency hearings to take place.
 - b. Another alternative permanent family for the child should be in place before relinquishment of parental rights will be considered.
3. The adoptive family will need to hire their own attorney. The family's attorney will file a petition with Juvenile Court to terminate the parents' parental rights. Because the state has no jurisdiction, the family will be the party petitioning the court to dissolve the adoption. Once this is done, an Assistant Attorney General (AAG) will be involved and a judge and Guardian ad Litem (GAL) will be assigned to the case.
4. The court is often against the relinquishment of parental rights if it makes the child an orphan or terminates the parents' financial support of the child.
5. The current therapist, post adopt worker, and anyone who can address what is in the best interest of the child will need to write a report and may need to testify in court.
6. The post adopt worker should write a court report that clearly states what is in the best interest of the child, such as:
 - a. There are irreconcilable differences in the home (i.e., the child does not feel safe in the adoptive home, the child is a threat to other children in the home, or the home environment has become unsafe for the child).
 - b. There are other significant people in the child's life who will fulfill a parental role and who will adopt the child, or who will take custody and guardianship of the child.
 - c. The appropriateness of a goodbye visit or future contact with the adoptive parents.
 - d. Future contact with birth siblings, if there are birth siblings in the adoptive home.
 - e. A recommendation that the relinquishment of parental rights not be granted until another permanent family for the child is found.
7. The post adopt worker should inform the parents that the case could go to a full termination trial and the parents may not be allowed to voluntarily relinquish their parental rights.
8. The post adopt worker should inform the parent that the court will order them to contact the Office of Recovery Services and pay a portion of the out-of-home care costs until their parental rights are terminated or if parental rights are not terminated, until the child is no longer in state custody.
9. The adoption assistance worker should be informed of how long the parent will be paying child support.
10. If an adopted child was receiving adoption assistance and there is another family who wants to adopt the child, the child will continue to be eligible for adoption assistance without the child coming into state custody. In such circumstances:

- 2200 a. The child must be in the new adoptive home for at least six months.
2201 b. If the first adoptive family continues to receive the monthly adoption
2202 subsidy, and they must forward it to the second adoptive family during the
2203 six-month period as the payee cannot be changed.
2204 c. The first family can relinquish their parental rights and consent to the
2205 adoption, and the second family can adopt the same day.
2206 11. An adopted child who was receiving adoption assistance is automatically eligible
2207 for adoption assistance in the next adoption. It must be screened with the
2208 Adoption Assistance Committee prior to the finalization.
2209 12. Termination of the parent-child legal relationship does not terminate the child's
2210 right to inherit from the parents.
2211 13. When a child adopted in Utah resides in another state, a petition must be filed in
2212 the state where the adoptive family resides. Utah has no jurisdiction.
2213

407 Access To Adoption RecordsMajor objectives:

- A. Child and Family Services Adoption Records - When parental rights are terminated, the caseworker shall create a new file for the child from relevant information in the child's family file. The caseworker shall establish a separate file for each child or each sibling group placed with the same adoptive home.
- B. Access to Adoption Records - The information in the file relevant to an adopted child may be accessed by the adult adoptee or the adoptive parents. Identifying information about biological parents shall not be released by Child and Family Services, unless ordered by the court. A biological parent who has relinquished parental rights may only access case information up to the time of relinquishment. Information in the family file may be accessed as specified in the GRAMA procedures for Child and Family Services.

Applicable Law

Utah Code Ann. [§78B-6-141](#). Court hearings may be closed -- Petition and documents sealed -- Exceptions.

Practice Guidelines

- A. An option for sharing adoption information is a cooperative adoption, which is an agreement between adoptive parents and the birth family that allows sharing of information and/or maintaining a relationship between the child and identified members of the birth family, such as birth parents, grandparents, or other extended family members.
- B. Adoptee Request for Information - The region director shall designate staff who will respond to the following requests for information:
1. Request for Identifying Information - An adult adoptee seeking identifying information about biological parents shall be referred to the court. If contact with the biological parents is desired, the caseworker may also suggest that the adoptee register with the Utah Department of Health Adoption Registry. [See: Utah Code Ann. [§78B-6-144](#).]
 2. Request for Non-identifying Information - An adult adoptee seeking non-identifying information about biological parents, such as genetic and social history or health history, may request information from the Bureau of Vital Records as specified in Utah Code Ann. [§78B-6-143](#).
- C. Biological Parent Request for Information - A biological parent requesting information about a child after relinquishment of parental rights shall be notified that information about the child may only be released by court order. It is the responsibility of the biological parents to obtain a court order. The caseworker may also suggest that the biological parent register with the Utah Department of Health Adoption Registry if contact with the child is desired. [See: Utah Code Ann. [§78B-6-144](#).]