Children's Services

PRACTICE NOTES

For North Carolina's Child Welfare Workers

From the NC Division of Social Services and the Family and Children's Resource Program

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This publication for child welfare professionals is produced by the North Carolina Division of Social Services and the Family and Children's Resource Program, part of the Jordan Institute for Families within the School of Social Work at the University of North Carolina at Chapel Hill.

In summarizing research, we try to give you new ideas for refining your practice. However, this publication is not intended to replace child welfare training, regular supervision, or peer consultation—only to enhance them.

Let us hear from you!

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Safety Resources and Kinship Care

In August 2014 the NC Division of Social Services surveyed NC's county DSS child welfare professionals about what they'd like to learn more about through publications or webinars. The response was strong—nearly a third of the estimated 3,000 county DSS child welfare professionals in the state responded.

Survey respondents rated their interest in 20 topics related to child welfare practice. "Safety Resources and Kinship Care: Best Practice" was among the top choices for DSS directors, program managers and administrators, supervisors, and line staff.

This interest isn't hard to understand. Though they are common, there seems to be some inconsistency in how agencies define and use safety resources and kinship care. This can give rise to questions and confusion.



This issue of *Practice Notes* seeks to provide clarity and useful suggestions for the appropriate, successful use of safety resources and kinship placements in NC.

Safety Resources: Definition, Benefits, and Challenges

Use of safety resources is a strategy that can help North Carolina's child welfare system achieve safety, permanence, and well-being for children and their families. However, some in the field have questions about this practice: What exactly are safety resources? When should we use them? For how long should we use them?

Safety resources are discussed in North Carolina's child welfare policy (see Chapter 8, Section 1408, item F), but the questions above aren't answered there. During 2015 the NC Division of Social Services will begin working with county DSS agencies through the In-Home Services Workgroup to make policy on safety resources more comprehensive.

In the meantime, this article seeks to answer common questions about safety resources, based on conversations with representatives from the Division and county DSS agencies.

Definition

In the broadest sense, a **safety resource** is any intervention to address specific, immediate child safety concerns during the delivery of child protective services. Typically they are needed when a child is found unsafe during a CPS assessment or during in-home services. Their use is intended to address immediate safety issues—significant, clearly observable threats to the child.

resource is really any CPS intervention to address immediate safety concerns.

A safety

Safety resources can take many forms. Examples include providing priority day care to enable a parent to get an assessment, or having a neighbor stop in daily to help a parent or child take a needed medication.

Temporary Safety Placements

One of the most common forms of safety resource in North Carolina is the temporary safety placement provider. This is someone, usually a relative, that parents ask to temporarily care for their children to ensure their safety during a CPS assessment or during the delivery of CPS in-home services.

Some people use "safety resource" and "kinship care" interchangeably. This is incorrect, though it's easy to see why this mistake occurs. Both involve placement with relatives, and in both the agency checks criminal history and uses the "Kinship Care cont. page 2

Initial Assessment" (DSS-5203) and the "Kinship Care Comprehensive Assessment" (DSS-5204) to assess the prospective caregiver.

There are important differences between safety resources and kinship care, however. Chief among them is court involvement. Strictly speaking, in our state the term kinship care is properly applied only to a court-ordered placement of children with their relatives. Courts do not oversee county DSS agencies' use of safety resources.

Other differences between safety resource placements and kinship placements include the following:

Custody. With kinship placements, the court has typically given custody of the children to the county DSS agency. With safety resource placements, parents retain custody and full access to their children. For example, with a temporary safety placement, DSS cannot require supervised visitation.

Duration. Kinship placements last months and sometimes years. Safety resource placements, on the other hand, should be very short, lasting only as long as it takes to gather the information needed to reach a decision about whether the immediate safety concern can be adequately addressed and the children returned home. Policy is not specific on this point, but the NC Division of Social Services suggests this might reasonably range from several days to as long as 60 days.

If the agency is uncomfortable returning the children home after a reasonably brief period, it should consider petitioning the court for custody.

Prevalence

Conversations with staff from county DSS agencies suggest the use of safety resource providers is common. Unfortunately, specific information about this practice is seldom—if ever—systematically tracked at the county level. There is no state-level data about the use of this practice. This makes it difficult to talk about patterns or link the use of safety resources to child and family outcomes.

The professionals we spoke with

Should I Use a Safety Resource with this Family?



This issue of Practice Notes tries to make it easier to decide when it is appropriate to use safety resource placements. But when you work with people, gray areas inevitably arise. What should you do if you're uncertain a safety resource placement is needed?

Kevin Kelley, Chief of Child Welfare Services in North Carolina, suggests a good first step is to look back to the purpose and phi-

losophy of CPS as outlined in policy (Chapter VIII, Section 1400). As this policy explains, children should be placed outside their homes only when their safety cannot be assured in the home. As policy states, deciding whether to remove a child "should be based on an analysis of the risk of harm balanced with implementing reasonable efforts to ensure safety within the family."

We must engage families in decisions related to child safety, while at the same time being transparent and executing our authority only when needed.

were clear, however, that in their experience there are both benefits and challenges connected with the use of temporary safety resource placements.

Benefits

May increase child safety. Temporary safety placements are likely to reduce the child's exposure to the safety concern.

Keeps children with family. Safety resource placement providers are family or family-like individuals. This is consistent with law and policy, which are clear: relatives should be the first ones considered as alternative caregivers.

Gives CPS "space" to work. CPS assessments can be complex and time

consuming. Safety resource placements can give CPS the extra time it sometimes needs to adequately assess safety. This can help avoid unnecessary foster care placements. As Robby Hall, director of Richmond County DSS put it, temporary safety placements can "give you time to evaluate the needs of the family without taking drastic steps."

The box below provides an example of the appropriate, effective use of a safety resource placement.

Challenges

Parents can feel coerced. Although technically the use of a safety resource provider is up to the birth family, in reality the presence and power of CPS

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Example: Successful Use of a Temporary Safety Placement

A mother of three children under age 6 has been involved with DSS on multiple occasions due to domestic violence. There have been three prior reports and the environment has deteriorated—the mother now says she has begun to use drugs frequently in the presence of the children.

Recently the Sheriff arrested the mother's boyfriend for using her home to make and sell methamphetamine. The mother was also arrested.

DSS was contacted and responded to the scene. The mother identified her parents as possible safety resource caretakers for the children. DSS completed the appropriate Kinship Care Assessment tools and background checks and approved the grandparents as a temporary safety placement.

After several weeks the mother was released on bond and complied with

efforts to identify and resolve the risk related to the injurious environment (domestic violence, substance use, criminal activity).

The grandparents provided alternative housing for the mother and the children to ensure the boyfriend no longer had access to the family.

Placement with the grandparents was needed for only a few weeks to allow the mother the opportunity to set up treatment services, re-establish a safe home for her and the children, and demonstrate effective use of the safety plans.

The grandparents and other family members assisted with finances and care of the children while the mother completed treatment. There was no need for child welfare-related court intervention or further intervention from the DSS.

make it possible (some would say likely) parents feel they are making this decision under duress. This can make partnering with and supporting the family more difficult.

May deprive parents of their rights. Although it's good to avoid unnecessary foster care placements, using safety resources longer than is appropriate may deprive parents of the right to due process guaranteed in the fifth amendment to the U.S. constitution, which states that no person shall be "deprived of life, liberty, or property, without due process of law."

Can prevent birth parents from getting needed resources. For example, with the children out of the house, parents may become ineligible for Food Stamps or other assistance. This can exacerbate the difficulties that caused them to come to the attention of CPS in the first place.

It is harder to serve the family once they're in separate places. As Jon Cloud of Granville County DSS put it, "We feel it's much more effective to work with the family as a unit.... It's difficult to provide treatment to children when they are somewhere else."

DSS can find it hard to stay within time limits. It is not uncommon for safety resource placements to continue well beyond what a reasonable person would consider short or temporary, extending to many months or even longer.

Sometimes this occurs because agencies begin focusing on risk instead of safety. As a reminder, safety concerns involve threatening family conditions and current, significant, and clearly observable threats to the immediate safety of the child or youth. Risk concerns revolve around the likelihood of future maltreatment (CWIG, 2014).

Case progress/permanency may be delayed. Those we interviewed suggested agencies often feel less urgency once they know kids are "in a safe place." This, in turn, may contribute to a tendency to use safety resource placements for longer periods than is appropriate.

The Use of Safety Resources and Title IV-E Funding

The first objective of child welfare agencies is to keep children safe. Funding influences the way agencies achieve this goal. In our state and throughout the country, federal Title IV-E dollars are a key source of funding for services for children who are in foster care or who are at imminent risk of entering foster care. States must follow federal rules for use of IV-E funds and are subject to periodic reviews/audits by the federal government.



Can Title IV-E funding be used to cover administrative costs* when children have been placed by their parents with a safety resource? To date, the federal Administration on Children and Families has not issued written guidance about this issue. In general, ACF approves the use of IV-E funds when a child is removed from the home by a child-placing agency, not voluntarily by the parents. However, if agencies can convincingly document that the child is at imminent risk of placement in foster care, use of IV-E when children are placed with a safety resource seems defensible. Effective documentation here is vital.

Of course, IV-E isn't the only option. If a county DSS believes "the child and family could benefit from services and potentially decrease the risk of future reports of maltreatment, but there is insufficient information to justify that the child is at imminent risk of removal and placement, county staff can still decide to provide in-home services" (NCDSS, 2012). These services would just need to be paid for with other funds.

* IV-E support for foster care board rate payments in this situation is incorrect—temporary safety resource placements are not foster care placements and receive no board rate.

May create a false sense of security. Because safety resource placements aren't court-ordered, providers may not share the agency's concern about the child's safety. For example, CPS may stop by the safety resource provider's home only to learn the children have been at their parents' house "for a few hours so I can do some errands." One county DSS director stated that this type of thing happens "all the time."

And, because they retain custody and the court is not involved, parents can see the children or end the arrangement whenever they wish.

<u>Safety resource providers may feel</u> confused, coerced, or excluded. They may feel pressured to help a family member without a clear sense of what the financial and emotional toll (especially if it is a sibling group) will be on them or of how long the arrangement may last. Despite the best intentions, DSS agencies do not always paint a complete picture of what providers are taking on and what is expected of them. In some instances, safety resource providers even mistakenly think the children are in foster care and therefore should have access to foster care-related benefits (e.g., NC REACH). Finally, another challenge that occurs is that safety resource providers sometimes feel excluded from the team serving the child and family.

Conclusion

This article has defined what safety resources are, described the pros and cons of this practice, and explained why it is different from kinship care. For practical tips about the use of safety resources from people in the field, see the next article.

Want to Learn More about Foster Care Funding?

Sign up to take Money Matters: Foster Care Funding Basics. This 4-hour, self-paced online course reviews the various funding streams that support foster care placement and the technical systems which reimburse costs to the agencies that provide care to clients. To learn more or to register, log in to your account on ncswLearn.org.

Using Temporary Safety Resource Placements: Best Practices

We've talked about the benefits of using temporary safety resource placements. We've also made it clear that there can be cons. What can agencies do to maximize the benefits, minimize the cons, and achieve the best possible results for children and families?

To answer this question, we asked child welfare professionals from a number of county DSS agencies and the NC Division of Social Services what they consider best practice based on their experience. The following suggestions are based on their advice.

When Considering Safety Resource Placements

Be flexible in your thinking about safety resources. Many of us hear "safety resource" and think of just one thing—parents choosing to temporarily place the child with a relative. Practitioners should first consider whether there are other resources or strategies that would address the safety concerns and allow the child to remain at home.

In other words, whenever possible, employ the proven technique from NC's Multiple Response System (MRS) of frontloading services. By immediately connecting the family to needed community resources, child safety is increased. This beats waiting 30 or 60 days for CPS inhome services to connect the family to services; delay may cause the family to struggle even more than when the report was made.

Remember that safety resources can be many things.

For example, if the safety concern relates to alcohol or drug use, school absenteeism, medication management, medical follow up, or setting and maintaining appropriate limits, having a family member or friend come stay at the house could provide needed support, supervision, and safety without separating the family. Relatives can provide functional support to the parents and child while also being an additional set of eyes and ears in the home. In some instances it is sufficient to have relatives check in on the family on a daily basis. Respected family or friends can also be an invaluable source of emotional support and informal coaching for a parent having a hard time.

Build behaviorally-specific plans. In CPS work—even during assessments—some amount of planning must occur. When building a plan with the family, remember to be behaviorally specific. To address safety concerns, plans should clearly describe the behaviors or conditions that you want to see, not what you do not want to see.

For example, instead of "child must not miss school," a behaviorally-specific case plan might read "child will attend school every day in the next month unless the parent calls in an excused absence for illness."

As one program manager put it, "We need to be reasonable about our safety goals. We let our use of safety resources go on too long sometimes because we get stuck on 'what ifs' rather than on 'what is.'"

Supporting Safety Resource Providers

"These families need support just like foster parents. . . . Sometimes they don't realize what they're getting into. . . . It's not just financial. It's other things, too. Are they part of CFT meetings? Are they getting help managing behaviors and getting services?"



— Margaret Dixon, Program Administrator, Pitt County DSS

Using Safety Resource Placements

Don't use them unless you believe the safety concerns can be quickly resolved. If you doubt safety concerns can be resolved quickly, consider petitioning the court for custody.

Rigorously assess safety resource providers. According to one agency we spoke with, if the court eventually becomes involved in the family's case, the judge sometimes sees the initial DSS approval of a safety resource provider as a "blessing" that sets a precedent. This can lead to the court ordering formal placement with the safety resource provider, even if DSS has learned more and now has concerns about that provider. Their advice: use those kinship assessment forms seriously and with great care.

Give full disclosure to the safety resource provider. A family member or friend taking on responsibility for the child deserves to know what they are signing on for and how uncertain the outcome of the family's involvement with CPS can be. For example, DSS cannot guarantee the child will return home within a particular time frame ("It will only be for a month while we do our assessment"), since individual family situations may play out so differently. See the next page for an example of a written document one county uses to facilitate full disclosure with safety resource providers.

Involve safety resource providers. Give them a seat at the table. Actively include them in planning and keep them up to date on time frames, services, and expectations. Involve them in child and family team meetings (CFTs) so everyone is fully informed.

Actively support safety resource providers. Caring for a child is a big undertaking. Safety resource providers may need support to address financial, behavioral, or emotional challenges that occur when children come to live with them. Although they are doing it voluntarily, they face the same challenges faced by kinship and non-relative foster care providers.

Don't let safety resource placements go on too long. Safety resource placements are supposed to last only as long as it takes to gather the information needed to reach a decision about whether the immediate safety concern can be adequately addressed and the children returned home. This will probably be anywhere from several days to as long as 60 days. If the agency is uncomfortable returning the children home after a reasonably brief period, it should consider petitioning the court for custody. ◆

Sample Safety Resource Placement Memo of Agreement [insert name(s) of child(ren)] I agree to be a safety resource placement for: as a part of a Child Protective Services safety plan developed on this date: [insert name(s) of parent(s)] I understand that this is a voluntary arrangement made by the parent(s) and that the parents retain legal custody of their child(ren). They retain all their rights and parental authority, and can give or refuse permission and make decisions about the child(ren)'s confidentiality, education, medical treatment, etc. 1. I understand that the child(ren) are not in foster care; DSS does not have custody of the child(ren). 2. I understand this arrangement is intended to be temporary according to the time frame outlined in the safety plan. 3. I understand there is **no guaranteed financial assistance** (e.g., foster care board rate, clothing allowance, etc.) provided to me for the care of the child(ren) regardless of the length of time the child(ren) are in my home. I understand that if I am a relative to the above named child(ren) I may apply for child-only Work First/TANF benefits in the county in which I reside. That department will determine whether I qualify for benefits. I understand that I will need to apply for Medicaid on behalf of the child(ren) in the county in which I reside. • I understand that I may apply for Food Assistance in the county in which I reside and that eligibility for that assistance is determined according to the income of the entire household. • I understand that I am responsible for arranging for day care as needed, and may apply for day care subsidy in the county in which I reside as indicated. • I understand that I may contact the child support unit at DSS in the county in which I reside and seek child support or work out another financial support arrangement directly with the parent. 4. DSS approved of this safety resource placement based upon an initial kinship assessment. I understand that if this arrangement continues beyond 30 days, it will be necessary for DSS to complete a more thorough assessment. I agree to cooperate by providing needed information in any assessment or home study process. • I understand that criminal record checks of all adults in the household will be conducted and that other background checks, including drug screens, may be completed. · I understand that if any concerns that have the potential of placing the child(ren) at risk of harm are identified in these assessments or home studies, there is a possibility the child(ren) will be moved from my home. I understand that if DSS takes court action and it is necessary for the child(ren) to enter DSS custody, it may be necessary for the foster care licensing process to be completed for the child(ren) to remain in my home for an extended period. 5. Because DSS does not hold custody, the agency is not responsible for nor does it have the authority to either limit or arrange for contact between the child(ren) and the parents. It is my responsibility to arrange for contact between the parent and the child(ren) at a time and place that is mutually convenient for the parent and myself. I understand that any limits on parental access to the child(ren) are voluntary on the part of the parent unless a court order has otherwise established limitations. • If I feel contact between the parent and child(ren) is harmful to the child(ren) in some way, I must report that to DSS; I understand DSS may not be able to intervene unless sufficient grounds for a court order exist. 6. I understand that by agreeing to provide a safety resource placement for the child(ren), I am agreeing to assure the basic needs of care and supervision are met and that the child(ren) receive any identified needed services to address medical or behavioral health concerns. This may include assisting with transportation to and from appointments and following recommendations from service providers. I understand that if I am unable or unwilling to meet the needs of the child(ren), the child(ren) may be removed from my home. 7. I understand that the current plan is for the child(ren) to return to the care of the parent(s). I will work with the parent(s), DSS, and other service providers to promote this plan. This may include meetings with the parent(s) and regular DSS visits in my home. If I have concerns about child safety and/or the parent(s)' ability to care for the child(ren), I will notify the CPS social worker. I agree to notify the social worker immediately if the child(ren) leave my home or of any changes related to the care of the child(ren). I understand that DSS has the responsibility of assessing the safety and well-being of the child(ren). Safety Resource Placement Provider Safety Resource Placement Provider

Social Work Supervisor

Social Worker

Research on Kinship Care: Implications for Practice

Formal kinship care occurs when "children are placed in the legal custody of the State by a judge, and the child welfare system then places the children with grandparents or other kin. In these situations, the child welfare agency, acting on behalf of the State, has legal custody and must answer to the court, but the kin have physical custody.... Relative caregivers have rights and responsibilities similar to those of non-relative foster parents" (CWIG, 2010).

Child welfare agencies in our state rely heavily on formal kinship care. As the figure at right shows, today one in four children in the custody of a North Carolina county DSS is cared for by a relative (Duncan, 2014).

Given the important role it plays, it makes sense for us to understand what the research says about kinship care, and to carefully consider the implications for child welfare workers and their agencies.

Kinship Families

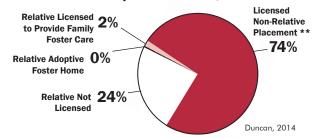
Kinship providers vary widely in their relationships to the children they care for. They include grandparents, aunts, uncles, young relatives, and other kin, as well as close friends who are like family (i.e., "fictive kin").

Kinship care providers are as diverse as the population of North Carolina. Although they all have many strengths—they would not be asked to care for vulnerable children if they did not—as a group kin caregivers have traits that have been known to make parenting harder: they are often older, poorer, single, and have less formal education than non-relative caregivers (Ehrle & Geen, 2002). They also report more health problems and higher levels of depression (sources cited in Winokur, et al., 2008).

Kinship Care in North Carolina

Kinship care plays an essential role in North Carolina. Of the 9,891 children in DSS custody in our state in October 2014, 25.6% (n=2,534) were placed with relatives (Duncan, et al., 2014), most of whom were unlicensed.

Placements for NC Children in DSS Custody on October 31, 2014*



- This figure does not reflect the many people in North Carolina who act as temporary safety resources for their young relatives.
- ** Includes all other placement types, including foster care, therapeutic foster care, residential care, etc.

Kinship Care Outcomes

Placement Stability and Permanency. Children placed in kinship care experience more stability than those placed in non-relative foster care (Farmer, 2009; Koh, 2009; Gleeson, 2007; Cuddeback, 2004). Overall, children in kinship care tend to have fewer placements and experience less placement disruption (Winokur, Holtan, & Batchelder, 2014).

In the largest systematic review of the literature to date—which analyzed 102 of the methodologically soundest studies that have been done on kinship care—Winokur, Holtan, and Batchelder (2014) found no difference between kinship care and foster care when it comes to the length of time children spend in out-of-home care or rates of continued next page

Policies Can Powerfully Influence Outcomes

Research suggests policy can have a huge impact on kinship care and the outcomes it achieves. In one study, researchers used matched samples to compare the results of kinship care in five states. The differences found led researchers to speculate that state-specific policy and practice regimens might have more impact on children's ability to achieve legal permanence than the type of placement the children received (Koh, 2009).

Nationally, states take different approaches to kinship care policy. This has led to different definitions, differences in funding options, and a wide array of licensing requirements. In some states, attempts to standardize have produced a one-size-fits-all approach to placement

providers, resulting in unfair practices that don't meet kinship providers' needs (AIA National Resource Center, 2004).

There seem to be no easy kinship care policy fixes. Policy areas the field continues to wrestle with include:

Financing and funding. Debates focus on how to provide financial support to kin caregivers without creating a disincentive for reunification or other permanency options (Ehrle & Geen, 2002).

Service delivery approaches. We need a service delivery model that meets kinship caregivers' needs. A key question: How do we support kinship providers when they are not licensed and child welfare agencies do not formally supervise them (O'Brien, 2012)?

NC's Kinship Care Policy

Curious what our policy says about placing children with relatives? See Chapter IV, Child Placement Services, Section IV, item D, "Choosing the Best Placement Resource" http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CSs1201c4-05.htm



Kinship Care continued from the previous page

reunification. However, they did find differences in other means used to achieve permanence for children. Children in foster care were more likely to be adopted, while children in kinship care were more likely to achieve permanence through guardianship.

Safety. Most studies agree children in kinship care are as safe—if not more so—than children placed in non-relative foster care. In their litera-

ture review, Winokur, Holtan, and Batchelder (2014) concluded children are actually safer in kinship placements. In the studies these authors examined, children in foster care were 3.7 times more likely to be maltreated by their temporary caregivers than were children in kinship care.

Well-Being. When it comes to well-being, kids in kinship care seem to do better than those in foster care. Based on outcome data from the rigorous studies they reviewed, Winokur, Holtan, and Batchelder conclude that children in kinship care experience fewer behavioral problems, fewer mental health disorders, and better well-being.

Children in foster care do have better access to mental health services. They are more than twice as likely as children in kinship care to receive mental health services. Winokur and colleagues (2014) speculate that "training and supervision of foster parents may contribute to the higher identification of mental health problems, and as such contribute to higher levels of service utilization."

Other findings relevant to well-being: studies have found that compared to children in non-relative foster care, children in kinship care are more likely to be placed with siblings (Berrick, et al., 1994; Testa & Rolock, 1999), to perceive their placements positively (NSCAW, 2005), and to visit siblings and parents (sources cited in Geen, 2003).

Service and Support Needs

The outcomes experienced by children in kinship care are all the more impressive when you consider that many kinship caregivers may have unmet service needs. In general, studies agree kinship caregivers have fewer resources and receive less training, services, and financial support than non-kinship caregivers (Cuddeback, 2004).

Sometimes lack of awareness is the issue. For example, there is some evidence kinship caregivers may be less familiar with the mental health system and thus more inclined to try to address mental health/behavioral issues on their own. Research also suggests child welfare workers may be less likely to offer mental health services to children placed with kin (Cuddeback, 2004).

Other studies found that when children are placed with kinship providers, workers visit less often, are more ambivalent, and are less clear about their role (AIA National Resource Center, 2004; O'Brien, 2012).

esource Center, 2004; O'Brien, 2012). In addition, several studies have found notable dif-

Kinship
caregivers are
a valuable
resource for
our agencies
and the
children and
families we
serve.

ferences between workers and caregivers in their perceptions of what constitutes quality care. Workers tend to focus on safety as the primary indicator of quality care, while kinship caregivers focus on the child's school performance, behavior, and happiness. This discrepancy may create barriers in relationships between workers and kin caregivers (Gleeson, 2007).

Implications for Agencies and Practitioners

Here are some recommendations for agencies and practitioners based on the research reviewed in this article:

- Know that kinship care has some strong upsides: compared to non-relative foster care, it is a more effective way to enhance children's placement stability and well-being, especially their behavioral development and mental health functioning.
- Understand the trade-offs. Historically, children in kinship
 care take longer to achieve permanency and have lower
 service utilization rates than children in foster care. When
 agencies place children with kin, they need to continue
 diligent permanency planning efforts, license kin whenever
 possible, and always ensure robust service provision.*
- The decision to use kinship care should always be individualized, taking into account the specific child's needs and the caregivers' ability to meet those needs.
- Don't write off foster care. Foster care also produces positive outcomes for children; it is still a viable option, especially when a kinship placement isn't possible.
- As an agency, discuss the differences between the kinship and non-relative foster care providers you work with.
 Explore ways to increase levels of caseworker involvement and service delivery with kinship placements. This may help you do a better job meeting caregivers' needs, making kinship care even more effective.
- Know what our state and county policies are regarding financial support for kinship caregivers. Ensure kinship providers get the information they need to take advantage of all available resources.
- When assessing and supporting relative placements, consider and address the kinds of needs commonly experienced by kinship care providers.
- Notify relatives when children enter foster care. See the next article for ideas.
- * On Dec. 15, 2014 this bullet was revised to make it clearer that the difference in permanency outcomes for kinship care and non-relative foster care may be due to differing levels of service provision.

North Carolina FFTA Kinship Summit January 27 and 28, 2015 Raleigh, NC For more info or to register, contact Liz Parker (828/713-6105; e.parker@grandfatherhome.org).

REACHING OUT TO RELATIVES WHEN CHILDREN ENTER FOSTER CARE

Adapted from Clunk & Epstein. (2010, October). Notifying relatives in child welfare cases: Tips for attorneys. Child Law Practice.

When grandparents and other kin step forward to care for children in foster care, the outcomes can be impressive. Yet even if children aren't placed with them, relatives can still contribute to the safety, permanence, and well-being of children in many ways, including:

- Attending child and family team meetings (CFTs)
- Visiting children in care
- Sharing information (e.g., health)
- Maintaining cultural connections and family relationships

Though these potential benefits are reason enough to identify and reach out to relatives, child welfare agencies have another: the Fostering Connections to Success and Increasing Adoptions Act of 2008.

Among this federal law's many provisions are several that direct child welfare agencies to notify relatives when children enter foster care. Though North Carolina law and policy fully reflect these requirements, change in practice and policy at the county, unit, and worker level can take time.

This article offers practical suggestions for meeting policy and legal standards for (1) searching for and (2) giving adequate notice to extended family when children enter foster care in North Carolina.

SEARCHING DILIGENTLY

The extent to which agencies search diligently for relatives will be assessed as part of NC's next federal Child and Family Services Review, which will occur in 2015. Failure in this area could negatively impact our state's performance on the CFSR or result in the loss of at least a portion of our state's Title IV-E payments. To ensure you meet Fostering Connections' "due diligence" requirement:

Get started early. Start identifying and notifying potential relative caregivers as soon as the child enters

your agency's custody. This may mean conducting interviews on the day of removal and exploring potential relative caregivers prior to removal.

Ask the parents to identify other relatives for the agency to contact. In North Carolina, child welfare agencies must contact all adult relatives and kin suggested by parents, as well as adult maternal and paternal: grandparents, aunts, uncles, siblings, great grandparents, nieces, and nephews.

Cast a wide net. Interview household members, friends, family members, and other knowledgeable people (e.g., teachers, health professionals, child care providers, clergy) to develop a list of possible adult relative caregivers.

Use the FPLS. Fostering Connections authorizes child welfare agencies to use the Federal Parent Locator Service (FPLS), a database that collects and updates information to enforce child support obligation. Using the FPLS you can obtain the absent parent's social security number, information on the parent's employment income and benefits, and information about assets or debts owed. Fostering Connections intends child welfare agencies to use

this information to find and potentially place the child directly with the absent biological parent or, alternatively, to contact the absent parent to help identify relatives.

Develop checklists to ensure consistency. To ensure everyone in your agency asks similar questions and conducts a sufficient relative search for each child, develop a checklist of questions to ask during interviews and a standard list of people to interview. See below for sample questions.

Document your efforts to identify and notify relatives. It is a good idea to create a checklist of ways to identify maternal and paternal relatives. Leave enough space on the checklist to take notes on your efforts. Keep the checklists and notes in the child's file. Documenting your efforts in this way may help prevent delays in achieving permanency for the child if a relative arrives late in the case, claiming not to have known the child was in care and wanting to be part of the child's life.

GIVING ADEQUATE NOTICE

The US Children's Bureau urges agencies to notify relatives **in writing** when children enter foster care. This gives relatives a chance continued next page

Sample Questions

Here are some questions for conducting a comprehensive interview regarding the child's background. (This is not an exhaustive list.)

- 1. Who does the child live with? What is the relationship of the child to these household members?
- 2. How long have these household members lived with the child?
- 3. Do you know any other relatives of the child on both the mother and father's side? What is their contact information?
- 4. Does the child have any siblings, half-siblings, or step-siblings? What is their contact information?
- 5. Does the child's family have any close friends? Do you know their contact information?
- 6. How would you describe the child's relationship with these relatives and close family friends?
- 7. Does the child have any health issues? Are there any we should be immediately aware of, such as asthma or anemia?

Source: Clunk & Epstein, 2010

to review and digest the information and ask questions. Consider using or adapting the sample letter on this page for this purpose. Other best practices related to giving adequate notice include:

Ensure relatives understand the **notice**. It may be necessary to provide both English and Spanish (or other language) versions of the written notice, accommodate a relative with a disability, or make other reasonable accommodations for the relatives (e.g., provide an interpreter to explain the notice and answer any questions).

Document notification efforts in writing. In the checklist recommended above, include items and space to document notification as well as identification efforts.

Include all required information in the notice. For a list of all required information, consult North Carolina's children's services policy manual: http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/chg/CSs1201c4.pdf.

Give notice within 30 days to all adult maternal and paternal grand-parents, aunts, uncles, siblings, great grandparents, nieces, and nephews.

Keep in touch. Although it is not required by law, it is a good idea to keep relatives informed and engaged throughout the case. Doing so can really benefit the child, especially if a change of placement is ever needed.

CONCLUSION

By following the law and identifying and notifying adult relatives when children enter foster care, child welfare professionals further the child's best interest by inviting relatives to play an important role in the child's placement and life. •

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SAMPLE NOTICE LETTER

Reprinted from FosteringConnections.org

Dear (RELATIVE),

I am contacting you because you have been identified as a relative of (child's name) who was born on (DOB) and is now in the custody of (insert agency). I am a (INSERT TITLE) for the (INSERT AGENCY).

We recognize that relatives play an important role in the lives of children, especially those who must be temporarily cared for by someone other than their parents. Children do better when they are placed with or able to stay connected in other ways to people who know and care about them. Children who are able to stay connected to their extended family and culture experience more stability and less trauma than those who are not connected.

We are contacting you to see if you are interested in being considered as a temporary home for or otherwise staying in contact with (CHILD'S FIRST NAME) while (S/HE) is in our custody. In the next few days, I or someone from my agency will call you to review your options for helping to care for (CHILD'S FIRST NAME). For example, you may want to offer a temporary home for (CHILD'S FIRST NAME) so (S/HE) does not need to be in foster care or to apply to be a foster parent for (CHILD'S FIRST NAME). Should permanent care later be necessary for (CHILD'S FIRST NAME), there may be various opportunities for guardianship or adoption. More information about your options is attached.¹

If you are not able to provide a temporary home for (CHILD'S FIRST NAME), there are other ways for you to stay involved in (HIS/HER) life and offer important family connections. You might visit regularly, arrange regular weekend or holiday visits at your home, or offer to transport (CHILD'S FIRST NAME) to and from school, doctor's visits or other activities.²

Keeping (CHILD'S FIRST NAME) connected to family (AND THEIR TRIBE) is important. Please get in contact with us so you don't lose the opportunity to connect with (CHILD'S FIRST NAME) now or in the future. We will call you in the next few days to explore your options, but feel free to contact me sooner at (PHONE/CONTACT INFO). I also ask that you share with me names and contact information of other relatives you think may be interested in connecting with (CHILD'S FIRST NAME).³ Thank you.

Sincerely,

- 1 To comply with federal law, notice must: 1) explain the options the relative has under federal, state, and local law to participate in the care and placement of the child, including any options that may be lost by failing to respond to the notice; 2) describe the requirements to become a foster family home and the additional services and supports available in such a home; and 3) describe how the relative guardian may enter into a guardianship assistance agreement with the agency if the state has taken the option to operate a Guardianship Assistance Program (GAP). It is suggested that you provide all of this information in an attachment. Wyoming, for example, has provided much of this information in Q&A format as an attachment to its notice letter. Kansas attaches a brochure of the supports available in the community.
- 2 Some states have designed response forms that go into detail about what activities relatives may participate in and allow them to check the boxes of activities that they would be interested/willing to participate in for the child.
- 3 Some states provide a form for the relative to fill out that specifies the name and contact information for other relatives who might be able to provide care for the child

For further information on the Identification and Notice to Relatives, please contact Beth Davis-Pratt from the Children's Defense Fund at edavis-pratt@childrensdefense.org

KINSHIP CAREGIVER BENEFITS CHECKLIST

Are relative caregivers and children receiving the support they need?

CASH BENEFITS

Temporary Assistance for Needy Families (TANF) "Work First" in North Carolina	 Child-only TANF: Nearly all children in kinship care are eligible for child-only grants. Considers only the needs and income of the child. Since few children have income or assets of their own, almost all relative caregivers can receive a child-only grant on behalf of the children in their care. TANF family grants: Caregivers need to meet the state's TANF definition of a kin caregiver to apply for benefits. Time limits and work requirements are associated with family grants, thus they may not be appropriate for retired relative caregivers or those who need longer term assistance. 	
Foster Care Board Rate	Relative caregivers who are licensed foster parents taking care of children placed with them by their local child welfare agency or court may be eligible for payments.	
Adoption Subsidy	May be available to relative caregivers who adopt the children in their care.	
Old-Age Survivors and Disability Insurance (OASDI)	Children being raised by grandparents may be eligible for social security dependent benefits under OASDI if the child's parent is collecting retirement or disability insurance benefits or if the parent was fully insured at the time of his or her death. Caregivers can apply for benefits on behalf of the child based on the work record of the child's parent, or if not receiving these benefits, may qualify for dependent benefits based on his or her grandparent's work record. Generally the grandparent must be raising the child because the child's parents are deceased or disabled, and the child began living with the grandparent before age 18.	
Supplemental Security Income (SSI)	May be available to children or caregivers who are disabled. This is also available to anyone over age 65. This is an important source of assistance for grandparents and other relatives raising children who are blind or who have other serious disabilities. This program, administered by the U.S. Social Security Administration (SSA), provides a cash benefit to the child. Child must meet age, disability, income, and asset criteria.	
Social Security	If a child's parent or parents are deceased and were insured through the Social Security system at the time of death, the kin caregiver is eligible to receive a Social Security payment on the child's behalf.	
Child Support	Until a court has terminated parental rights, a parent generally remains financially responsible for his or her children. A child support enforcement agency may assist grandparents and other relative caregivers in obtaining child support on behalf of the children in their care. Amount of support is based on child's needs and resources and ability of the parent to pay. Kinship caregivers who receive federally funded foster care payments or TANF may receive only a small portion of child support collected, as most of the support goes to helping the state recoup the costs of providing assistance.	
Veteran's Benefits	Survivor's benefits, disability benefits, educational benefits, etc. may be available to relative caregivers who are veterans or caring for child survivors of deceased veterans. http://www.vba.va.gov/VBA/	
TAX CREDITS		
Earned Income Tax Credit	May be available for certain low or moderate income relative caregivers who are working. This tax credit is refundable so that even workers who do not earn enough to pay taxes can get cash from the IRS. Credit amount depends on income earned and number of qualifying children in the family.	
Child Tax Credit	May be available to some grandparents and relatives raising children. Age limits for dependents.	
Child and Dependent Care Tax Credit	May be available to kinship caregivers who incur child care expenditures in order to work.	

continued page 11

BENEFIT CHECKLIST from p. 10

SUBSIDIZED CHILD CARE

Infants	and	pre-school		
age children				

North Carolina's Division of Child Development uses a combination of state and federal funds to provide subsidized child care services to eligible families through a locally administered, state-supervised voucher system. Local DSS agencies have information about subsidies and eligibility.

Before school and after school care for school-aged children Many school districts offer reduced program rates depending on a family's income and need.

FOOD ASSISTANCE

Food Stamps

Available to families with incomes below a certain level. The entire household's income is considered, and the relative children can be included in family size for determining benefit amount. A caregiver cannot apply for food stamps for the children only. Application for food stamps is generally made at the same office where TANF (Work First) applications are made.

WIC (women, infants, and children)

Infants and children up to age 5 are eligible. They must meet income guidelines, a State residency requirement, and be individually determined to be at "nutrition risk" by a health professional. A person who participates or has family members who participate in certain other benefit programs, such as the Supplemental Nutrition Assistance Program, Medicaid, or Temporary Assistance for Needy Families, automatically meets the income eligibility requirement.

HEALTH CARE

Medicaid or Other Health Coverage

Medicaid is a health insurance program for low-income individuals and families who cannot afford health care costs. Medicaid serves low-income parents, children, seniors, and people with disabilities. Medicaid is a little different, depending on who you are and your situation. To determine whether they or the child they are caring for are eligible for Medicaid, relative caregivers should consult their local county DSS. This site provides eligibility information that may also be helpful: http://www.ncdhhs.gov/dma/medicaid/who.htm.

Mental Health Services

To determine whether North Carolina relative caregivers and/or the children they care for are eligible for publicly funded services for mental health, developmental disabilities and substance abuse services, contact your Local Management Entity (LME). A list of NC's LMEs can be found here: http://www.nc-council.org/nc_members/lmes/

EDUCATION

Does the McKinney-Vento Homelessness Assistance Act apply? (42 U.S.C. 11435(2)) If so, the school must enroll the child without paperwork.

Special Educational Needs

Does the child have a physical, emotional, or learning disability that impairs school performance? If so, has the school recognized the disability and conducted assessments? If not, the caregiver can request evaluation and an IEP (Individual Education Plan) under the IDEA (Individuals with Disabilities Education Act).

TRANSITION SERVICES FOR OLDER TEENS

If the youth is 14+ and deemed dependent...

He or she may be eligible for transition benefits, college tuition, etc.

If the youth is 14+ and disabled...

Transition services should be provided through the school and the Department of Vocational Rehabilitation.

Sources: American Bar Association, (n.d.); Children's Defense Fund, 2004; USDHHS, 2005; USDA, 2009

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