INCREASING KNOWLEDGE OF THE ADOPTIONS PROCESS AND
CONCURRENT PLANNING OF PRE-ADOPTIVE FAMILIES

By

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ABSTRACT

INCREASING KNOWLEDGE OF THE ADOPTIONS PROCESS IN PREADOPITIVE FAMILIES

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The purpose of this project is to identify and create needed information and training material on the concurrent planning process in foster care taking place through Child Welfare Services in Humboldt County. Participants were professionals currently working in the Adoptions Unit at Humboldt County Child Welfare Services. The data was collected through in person interviews. Several educational needs were identified and include: more information about concurrent planning, clear explanations of terms used by CWS and other foster care agencies, the types of adoptions, the adoptions process, and of legal matters including the legal implications of adopting a child, and providing this information prior to parents agreeing to become foster care providers or adoptive parents. Additional research is needed to identify what post-adoptive families believe the needs to be in educating, preparing, and supporting them in their experience of foster care, adoption, and the concurrent planning practices and implications. Feedback from those who have experienced this process is the best source of information for identifying how to improve services and policies through their subjective, lived knowledge.
# TABLE OF CONTENTS

ABSTRACT ........................................................................................................................ ii

TABLE OF CONTENTS ................................................................................................... iii

LIST OF APPENDICES ................................................................................................. iv

INTRODUCTION ...............................................................................................................1

REVIEW OF LITERATURE ...............................................................................................4

METHOD .......................................................................................................................... 11

RESULTS ...........................................................................................................................12

DISCUSSION ....................................................................................................................13

REFERENCES ..................................................................................................................16
LIST OF APPENDICES

APPENDIX A-INTERVIEW QUESTIONS.................................................................20
APPENDIX B-INFORMED CONSENT .................................................................21
APPENDIX C- HANDBOOK..................................................................................22
INTRODUCTION

The adoptions process is legally, technically, and emotionally complicated and at times difficult. Even for those with extensive knowledge and experience with the adoption process, it can be emotionally overwhelming. There are multiple types of adoption, each with their own challenges.

When adoptions take place with children who are in the care of Child Welfare Services (CWS) the process can pose even greater challenges to the adoptive families and the children. Of particular concern is the practice of concurrent planning, the process of working towards family reunification, and an alternative permanent placement at the same time (Concurrent Planning Handbook, 1999).

Concurrent planning is beneficial to the children involved by decreasing the amount of time they spend in foster care and reduces the number of moves the child will experience. Concurrent planning is the practice of identifying and pursuing two permanent placement options for children in out-of-home care. The first option is reunification with the parents, the second is an alternative permanent placement. Alternative permanent placements include guardianship, long term foster care, adoption, and Tribal customary adoptions.

While concurrent planning offers multiple benefits to the children in care, it is emotionally difficult for preadoptive families since they may lose the child they have bonded to. Preadoptive families are expected to support reunification efforts with birth parents at the same time as readying themselves for a possible permanent addition to their
family. Concurrent planning is also challenging for the children and their birth families, who must also cope with difficult and conflicting feelings related to the uncertainty of the process in Child Welfare. Social Workers are faced with their own challenges of trying to balance intensive reunification efforts with alternative permanent placement options, while carrying high case loads and working under expedited time-lines.

Many adoptive families are unaware of what concurrent planning entails when they make the commitment to be foster care providers or adoptive parents because they are not being provided with a more detailed review of the concurrent planning process. Many of these families would likely have benefited from having a better understanding of the legal, technical and emotional costs associated with the concurrent planning adoptions process. Preadoptive families in Humboldt County are not receiving in-depth information about concurrent planning in the current educational courses offered. Many social workers do not have a comprehensive understanding of what the concurrent planning process requires of them, nor do they have sufficient time or resources to accomplish these requirements.

**Purpose**

The purpose of my community project was to work in collaboration with Humboldt CWS adoptions unit to create an informational handout and accompanying educational presentation about the adoptive process with an emphasis on concurrent planning. It will be distributed to preadoptive families, and this information will be presented to families who are new to the adoptions process, with the purpose of
increasing education and understanding of the adoptions process and concurrent planning here in Humboldt County.

The goal for creating this handout and presentation is to increase preadoptive families understanding of the process of child placement and the concurrent planning process and how it will and may affect them based upon their interactions with the children and their birth families, social workers, and the courts. The adoptions unit at Humboldt CWS believes there is a need for increased education for preadoptive families concerning concurrent planning: with increased understanding of how and why there is concurrent planning in CWS, it is believed that preadoptive families will be better prepared for what they may experience during this process.
REVIEW OF LITERATURE

Concurrent planning is the practice of working towards two different permanency plans at the same time – family reunification and an alternative permanent placement. Literature on concurrent planning has little information on outcomes or evidence based practice. There has been little research on concurrent planning outcomes, and in the research that has been completed, there have been small sample sizes, as well as difficulty in comparing programs due to inconsistent implementation, resulting in little empirical evidence of efficacy of this practice (CalSWEC, 2009).

However, it appears there is at least some support for this approach (Child Welfare Information Gateway, 2012). Concurrent planning was developed in the late 1980's and early 1990's and was based on research that explored childhood attachment in the foster care system, gathered from the late 1950's through the late 1970's (Katz, 1999). It became clear that years of traumatic moves had serious and long lasting consequences on the children involved. Ward (2009) found that children who lack stability can have compromised wellbeing, attachment, self esteem, identity an access to education and health care. Children thrive under stable conditions: they have better developmental outcomes in health, scholastic achievement, and better interpersonal skills (Harden, 2004).

Concurrent planning was developed in the 1980’s and is based heavily on the work of Linda Katz, Norma Spoonemore at the Lutheran Social Services of Washington state and Idaho, and Chris Robinson at the Washington Division of Children and Family
Services (Katz, Spoonemeore & Robinson, 1994). This practice was designed for small, private agencies, with two social workers being assigned to concurrent planning cases who had reduced caseloads (D'Andrade, & Berrick, 2006). Concurrent planning was designed specifically for young children that were unlikely to be reunified with their birth parents and who were likely to experience foster care drift (Katz, Spoonmore & Robinson, 1994).

Concurrent planning is “encouraged” as a practice as a result of the passing of the Adoption and Safe Families Act of 1997 (CalSWEC, 2009; D'Andrade & Berrick, 2006; Patton & Pellman, 2005). Ott (1998) identified concurrent planning as being designed to:

- Achieve early permanency for children
- Decrease children’s time spent in foster care
- Minimize the negative impact of separation from family and siblings
- Reduce the number of moves and relationship disruptions
- Develop a network of adults who can work towards reunification and also serve as permanency resources, and
- Maintain continuity in children’s family and sibling relationships

Concurrent planning has offers several benefits for children in foster care. It lessens the number of moves by combining intensive family involvement in all aspects of their child’s case, reduces time-lines from 18 months to 12 months for reunification efforts, and identifies, prepares and involves potentially permanent family foster care placements. This increases the likelihood of “timely” permanency (Guidera, 2000; Katz,
2001). With early and extensive visitation with birth parents and families, children are able to maintain existing positive connections, which can help children cope with transitions. (McIntosh, 1999). Another benefit from concurrent planning is that foster care families are able to give the children a much more balanced view of the birth parents, something that has shown to be a protective factor for the children’s ability to develop healthy attachments in the future (Kenrick, 2010).

Some research suggests that concurrent planning is working: it appears that children in foster care achieve permanence with families more quickly and with fewer moves, resulting in less trauma experienced by the children (Child Welfare Information Gateway, 2012; Katz, 1999). It is suggested that openness and direct communication between birth parents and caregivers in concurrent planning may lead to more voluntary relinquishments and open adoptions, as well as increasing respect given to biological families by drawing them into case planning early on in the process (Child Welfare Information Gateway, 2012).

While there are clear benefits to concurrent planning for children, the process can be profoundly challenging for preadoptive families. As Katz (1999) writes:

> Recruitment of any kind of foster parents is a challenge, but not more so in concurrent planning. Agencies must prepare to educate the public on the concept and to offer enhanced training and support to caregivers. The foster parents' role is difficult, often painful, but families do come forward.

> The better the understanding foster parents have of the concurrent planning process, their own vulnerabilities and possible emotional reactions, the better able they will be to cope with this process. Concurrent planning is emotionally intensive
There is a high level of uncertainty for preadoptive families, and there are absolutely no guarantees in concurrent planning cases. Foster parents are not the only ones who struggle with the uncertainty and duality of concurrent planning.

It is also difficult for social workers who are asked to put equal effort into both reunification and adoption. Originally, concurrent planning was developed with two social workers per case (D'Andrade et al., 2006). Many social workers experience discomfort and strained relationships with the children’s family of origin and foster care families (Frame et al., 2006). Research as found that when agencies are not properly resourced and social workers are not properly trained, reunification efforts are minimized (Frame et al., 2006; Tilbury & Osmond, 2006). D'Andrade and Berrick (2006) reviewed literature and found that there is an agreement amongst professionals and academics that concurrent planning requires two social workers per case, or if there can only be one, they need a reduced caseload.

Birth parents/families struggle with concurrent planning in that they must participate fully in reunification services while at the same time being asked to identify permanent alternative options for their children’s care (D'Andrade, Frame & Berrick, 2004). Kenrick (2010) found that foster care providers contact with birth parents within days of placement which often heavily disrupts creating or maintaining schedules, having to have contact with birth parents and develop a relationship with them, dealing with dysfunctional birth families, and difficulties in transporting the children to visits. Another challenge is the possibility of experiencing Secondary Trauma as a result of having a
relationship with children who have been impacted by trauma, and many children in out-of-home care have experienced multiple traumas.

Children in foster care often display intensely negative behaviors following these visits with their birth families. Foster parents must be committed to dealing with these difficult situations, as intensive contact with birth families limits the grief and loss children experience and are in the best interest of the children’s long term mental wellbeing. The research of Gauthier, Fortin, & Jeliu (2004) and of Fahlberg (1982), found that when children experience losing contact with their families and friends, it is traumatic and there are serious short and long-term consequences, including cognitive problems, psychological and behavioral problems, as well as developmental delays.

The children in foster care themselves are at times challenging for foster parents. Children in foster care often have genetic defects, prenatal exposure to drugs and/or alcohol, histories of complex trauma such as chronic neglect, physical and sexual abuse, and exposure to domestic violence, as well as problems stemming from separation from or loss of significant others and/or multiple out-of-home placements (Kagen & Delaney, 2011). These children have high rates of medical issues; 60% have at least one chronic medical condition, 50-85% have significant emotional, behavioral, or developmental problems, and 40-60% have at least one diagnosed psychiatric disorder (Kagen & Delaney, 2011).

Frame, Berrick and Coakley (2006) noted that both recruiting and retaining concurrent planning foster parents is a common problem across agencies, and that the best solution to those problems is education. Brodzinsky (n.d.) and Berry (1988) both
also write that education is key to positive outcomes and success in adoption, although their focus was of education around agency policies and legal procedures. With increased education, preadoptive families tend to have more realistic expectations, better parenting skills, be more likely to seek support, have an increase in stability of adoptive placement, an increase in satisfaction with adoption, and reduced adjustment problems for both adoptive parents and adoptive children post adoption (Brodzinsky n.d.; Evan B. Donaldson Adoption Institute, 2008).

**Theoretical Framework**

I approached this project with a constructivist self-development theory, which lends itself to the process of preadoptive families’ education in regard to concurrent planning. Constructivist self-development theory is based in the belief that individuals have basic psychological needs that include safety, dependency, trust, power, esteem, intimacy, independence, and cognitive schemata that shape how life is experienced and understood (McCann & Pearlman, 1990). Preadoptive families are asked to empathize and connect with children in order to meet these needs. By bonding with these children, who likely have experienced high levels of trauma, preadoptive families are at risk for experiencing secondary trauma. The emotional pain can be further compounded if the child ends up being returned to the family of origin or placed in another home.

Secondary Trauma is defined by Figley (1995) as “the natural consequent behaviors and emotions resulting from the knowing about a traumatizing event experienced by a significant other (p.7). Pryce, Shackelford & Pryce (2007) found that
Secondary Trauma produces the same reactions and symptoms as those that are found in Post Traumatic Stress Disorder, which include: re-experiencing the trauma, avoidance and emotional numbness, withdrawal from others, a loss of interests, feeling flat, a sense of loss of future, persistent arousal, insomnia, anger outbursts, difficulty concentrating, hypervigilance, exaggerated startle response, and physical reactions to memories of the trauma (p.12). This trauma can in turn alter the cognitive schemata, perhaps permanently, as well as challenge their beliefs and expectations in regard to life and others (Pryce, Shackelford & Pryce, 2007).

Additionally, Ecological Systems perspective views individuals as part of a larger collective, and the experiences of the individual in turn shapes the larger whole. By increasing knowledge about concurrent planning and developing support for individuals entering the adoptions process, all of the parties involved will have a better understanding of the processes, reducing anxiety and tensions, and increasing the likelihood of a successful placement. The result is system-wide benefits; the children attain permanency faster and with fewer traumatic moves, preadoptive families are better prepared to cope with concurrent planning, and the agency, counties, states and federal government all spend less money over time. Increasing preadoptive families’ knowledge of the adoptions process from multiple levels eases the process for individuals, the family, and the larger system. Informing foster care providers and preadoptive families of what they can expect to experience allows for more realistic expectations and less emotional pain and frustration for themselves and the children they are caring for.
METHOD

The sample consisted of six professionals who work within the adoptions unit at Humboldt County CWS to participate in an interview to discuss what topics and information they believed would be most beneficial to preadoptive families. These workers have seen how preadoptive families respond to the concurrent planning process and how difficult it can be for them. This information was then included in the handbook and presentation.

My initial contact with CWS adoptions workers was in person. During this meeting, I scheduled an interview with those able to participate. The interviews took place in a private office setting. Prior to the interview, participants were required to read and sign the consent form (see Appendix A). Consent forms were collected and given to Dr. Michael Yellow Bird, Humboldt State's MSW Graduate Coordinator and my committee chair for safekeeping and storage in his secured office. The interviews were semi-structured and open to discussion of ideas the participants brought up. Interview questions included, but were not limited to: (a) what topics do you think are most relevant for this handbook, (b) what specific information do you feel preadoptive families would benefit most from, and (c) what do you hope to get out of the handbook for the preadoptive families?

The product of this project was informational handout and presentation material of that information to possibly be presented to preadoptive families in 2014.
RESULTS

The Adoptions workers at Humboldt County CWS were interviewed over multiple sessions during the month of March, 2014. The most often reoccurring recommendation made by the social workers was to offer preadoptive foster care providers with clear explanation and definition of concurrent planning and other terms used by social workers and other service providers. Additionally, clear outlines of the different types of adoptions, the concurrent planning process, legal implications and timelines were advised.

Other recommendations included:

- Collaboration between the child's primary Social Worker and Adoptions Social Worker to identify families who may be willing to be concurrent placement options
- Adoptions Social Workers going out to the home to talk to families about the possibility of them being a concurrent placement option as soon as possible after having a child placed with them
- Ensure that all Social Workers involved in a case are able to clearly outline and explain expectations, the process, time-lines, and emotional difficulties associated with concurrent planning
DISCUSSION

The adoptions process can be emotionally challenging and at times confusing, especially for families who are new to this process. Ensuring that preadoptive families are educated about the agency policies and legal processes is associated with positive outcomes for the adoptive child and for the adoptive family according to the professionals I interviewed for this project and from prior research by others. By partnering with Humboldt County's CWS Adoptions Unit, I was able to identify the information that will be most beneficial to preadoptive families in preparing them for the adoptions process, with an emphasis on understanding both the rationale and the practice of the concurrent planning process.

It is clear that more education is needed, and it needs to start early on in the recruitment process so that an adequate pool of concurrent planning foster parents can be gathered. Additionally, Social Workers need to be fully trained and supported by the agency in order to truly offer concurrent planning to their clients. Preadoptive families, birth families, and Social Workers all need education and support in order to cope with the grief and loss that is inherent in Child Welfare involvement, removal, concurrent planning and the adoption process. Ongoing supports for all individuals involved need to be in place and readily available. There is a paucity of research on how families involved in concurrent planning address and cope with their own grief and loss, as well as that experienced by the children they adopt or had hoped to adopt.
There is currently little information in regard to Tribal Customary Adoption available within the county. As Humboldt county has a relatively high Indigenous population, as well as disproportionate rates of Indigenous children within our CWS and Adoptive systems, it would be beneficial to increase knowledge of and about the practice of Tribal Customary Adoption and to encourage Social Workers to consider this as a permanency option for Indigenous foster care children. Some research has found that by utilizing Tribal Customary Adoption for Indigenous youth helps to lessen the negative effects of being raised by a family other than their own (Atkinson, 2010, p.47).

There is little research, particularly in the US, about the effects of concurrent planning on Indigenous youth and communities. Richard (2004) proposed that Indigenous children need to be connected to their cultural background and communities in order to develop a positive sense of self as adults. Indigenous children that have been removed from their communities face many challenges when developing positive Indigenous identities (Silburn et al, 2006; Halton Multicultural Council, 2008). Richard (2007) found that Indigenous children are the least likely group of children to be reunified with their families or within their communities, the least likely to be adopted, and experience the most moves in out-of-home care.

Research out of Australia and Europe emphasize that Indigenous people have a right to self determination and it should be promoted (NSW, 2007). The government of New South Wales (NSW, 2007; NSW, 2003) maintains that Indigenous children gave a right to stay connected to their communities and to grow up with a strong sense of their cultural identity, and that every effort must be made so that Indigenous children are...
supported in sustaining their cultural heritage and cultural identity if they must be
removed from their birth families and community. More research in the US is needed to
determine the effects concurrent planning has on Indigenous youth's outcomes as a result
of out-of-home care.

It is strongly recommended that the county to ask foster care and adoptive parents
that have already been through the concurrent planning process about what they would
have benefited most from knowing at the beginning of the process. I was unable to recruit
any foster care or adoptive parents in time for this projects deadline, but I believe that if
the county coordinated with the foster care and adoptive parent support groups, these
parents would be willing to offer critical feedback of their experiences in concurrent
planning and providing foster care. This would enable the county to improve both
services and outcomes.
REFERENCES


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APPENDIX A-INTERVIEW QUESTIONS

1) What aspects of the adoptions process do believe are most relevant for this handout?

2) What specific information do you feel preadoptive families would benefit most from?

3) What do you hope to get out of the handout for preadoptive families?
APPENDIX B-INFORMED CONSENT

Your participation in this project is strictly voluntary. The purpose of this project is to gain information about what topics should be included in an informational handbook for Humboldt County's preadoptive families. The information you provide during the interview may be considered for inclusion in the handbook. This project is part of my Master's in Social Work program. Direct quotes from the interview may be used for the master's project paper, but will not be included in the handbook.

Your confidentiality will be protected. I may use your generic job title and/or description but will not name the specific agency you represent if different from Humboldt County Child Welfare Services; nor will your name be used in the research project or the handbook.

Participants will be asked some general questions about the information they feel would be beneficial to new preadoptive families, but no specific clients or families shall be identified or used for the purpose of this project. The interview process may take up to an hour, depending on the depth of discussion. The interviews may take place in private offices or confidentially over the phone. The researcher may be taking notes during the interview, but the notes will be kept locked up and will be destroyed after the handbook and project are complete. All records will be destroyed appropriately after the project is complete.

The benefits of participating include but are not limited to creating easier transitions into the adoptions process and participating in concurrent planning. The handbook could be a resource for those who have limited experience with the adoptions process or with concurrent planning. There are minimal foreseeable risks involved in participating in this study. In the case that difficult emotions or memories arise as a result of this interview, please feel free to contact Humboldt County Mental Health at (707) 445-7715 or the Psychology Community Counseling Center at (707) 826-3921.

If you have any concerns or questions the Primary Investigator for this project is Shannon M. Bates and she can be reached at smb960@humboldt.edu or (541) 261-9511. The Faculty Supervisor for this project is Dr. Michael Yellow Bird and he may be reached at mjy9@humboldt.edu or (707) 826-5346.

I understand that the Investigator will answer any questions I have about this study. I also understand that my participation is voluntary and that I may stop at any time.

If you have any concerns with this study, contact the Chair of the Institutional Review Board for the Protection of Human Subjects, Dr. Ethan Gahtan, at eg51@humboldt.edu or (707) 826-4545.

If you have questions about your rights as a participant, report them to the Humboldt State University Dean of Research, Dr. Rhea Williamson, at Rhea.Williamson@humboldt.edu or (707) 826-5169.

Participant’s Signature: _________________________________ Date: ____/____/____
Concurrent Planning:
A guide for foster Care parents

Prepared for Humboldt County Child Welfare Services

2014

Adapted from Los Angels County Department of Children and Family Services A Guide to Permanency Option for Youth and Ramsey County Community Human Services Concurrent Permanency Planning: Resource Parent Roles and Responsibilities
Deciding to become a foster care provider for concurrent planning placements is a big decision for families to make. Concurrent planning is the practice of pursuing two permanency placement plans at the same time—the first plan is reunification with the birth family and the second plan is for one of the following: Kinship care, foster care, guardianship, adoption, or Tribal customary adoption, depending on which option has been deemed as in the best interest of the child.

In concurrent planning placements, the foster care parents are expected to be part of the professional team that is working toward a child gaining permanency. While all foster care parents are expected to provide the day to day care and nurturing of the child in foster care, concurrent planning placements are expected to work much more closely and intensively with the team and the birth families.

This guide is meant to help foster care parents and families who are considering becoming concurrent planning placements understand what this means—the benefits, the costs, challenges, and expectations that go along with process of concurrent planning.
Definitions

**Concurrent Planning:** The process of working towards family reunification and an alternative permanent placement at the same time. The first goal is usually to reunite the child with their birth families, but in the event that reunification is not possible, there is an already established back up plan in place.

**Alternative permanent placement:** These include kinship care, foster care, legal guardianship, adoption, and Tribal Customary Adoption.

- **Kinship Care:** Children are placed with relatives or other kin, allowing the child to remain in relative care. Birth parents retain their parental rights, but authority is restricted.

- **Foster Care:** Birth parents retain their parental rights and may be involved in recommendations and the courts make the final decision. Foster care parents are responsible for the day to day care of the child but are not legally responsible for the child’s behavior. Foster care is usually not the best option for permanency—it is intended to be temporary. Youth often experience stigma from being in foster care, there is generally a negative connotation attached to being in foster care, many children in this care do not feel like part of the family, and foster care interferes with the day to day life of children and the foster care family.

- **Legal Guardianship:** In this placement, birth parents authority is restricted. Birth parents might retain the right to visitations, Guardians are liable for the child’s actions just as a birth parent is, can petition to have a child’s name changed, can move within the state (after first notifying the court), may consent to medical treatments for the child.

- **Adoption:** Birth parents rights are terminated and the adoptive parents assume all legal rights and responsibilities, can change the child’s name, can move without notification. Support from Child Welfare and the Foster Care system ends at the finalization of the adoption.
· **Tribal Customary Adoptions:** For Indian Child Welfare Act (ICWA) eligible children, they may be adopted by other family members or Tribal members without birth parents parental rights being terminated. This is a more culturally appropriate option for Indigenous children than the other types of permanency.
Benefits of Concurrent Planning

- Children are able to maintain contact with their birth family
- Children remain in foster care for shorter amounts of time
- Children experience fewer moves or changes in placement
- Birth families are involved in permanent placement planning
- Foster Care Parents are able to offer a more balanced view of birth parents to the children
- Children have better chances of developing healthy relationships and attachments in the future.
Challenges of Concurrent Planning

This is a stressful and emotionally challenging experience for everyone involved—children, birth families, foster care parents, and social workers. Foster care parents may face some of these challenges:

- Foster care parents must support reunification efforts by working as a member of a multidisciplinary team of service providers and working with birth parents and families.

- Foster care parents must commit to being willing to adopt the child if reunification efforts fail.

- The children will have early and intensive contact with birth parents and foster care parents must facilitate regular visits and this may include transporting the child.

- Foster care parents must develop a healthy relationship with the birth parents/family and show empathy.

- Foster care parents must be adaptable—plans can change significantly and quickly.

- Foster care parents experience uncertainty. They must cope with not knowing if the child will stay in their care or be returned to their parents.

- If the children can not be returned to the birth parents or remain in foster care, the concurrent planning placement parents must help with transitions.

- Foster care parents are at risk for experiencing secondary trauma.
Foster care parents must work cooperatively with and follow the decision making of the courts.
Timelines

When a child is removed from their home, a legally mandated timeline begins.

**Within 72 business hours:** The case can be closed, Informal supervision may be ordered, a petition to the courts can be filed, or parents can relinquish their parental rights. A detention or Arraignment Hearing is held.

**Within 15 days:** A Jurisdictional Hearing is held, where the facts of the case are examined by the judge. The petition for the children to remain out of the home is either dismissed or sustained.

**Within 10 days of the Jurisdictional Hearing:** A Dispositional hearing will take place where the judge decides on the case plan— it will be decided if reunification efforts will be provided or if the case will move straight to permanency planning.

**Within 6 months of Dispositional Hearing:** A six month Review Hearing will be held. The child may be returned home, remain in foster care with a continuation of reunification efforts, or remain in foster care without reunification efforts.

**Within 12 months:** 12 months Permanency Hearing. The judge will decided whether or not reunification efforts will be continued.

**Within 18 months:** 18 month Permanency Hearing. The judge will decided whether the child will return home or if the child will remain in foster care without reunification. If child remains in foster care, a 366.26 Hearing will be held within 120 days of the termination of reunification efforts. At the 366.26 Hearing, it will be decided if the child should be placed for adoption, in guardianship or kinship care, long term foster care, or in a Tribal Customary adoption. A Post Permanency Planning Hearing will be held to monitor the placement plan.

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To become a Concurrent Planning Placement, you will need to attend the PRIDE training, have a Foster Care and an Adoptions Home Study completed.