

SOS CHILDREN'S VILLAGES ILLINOIS Parent Handbook



Sponsored by SOS Illinois Racial Justice Committee



SOS CHILDREN'S VILLAGES ILLINOIS

Mission Statement

At SOS Children's Villages Illinois, we build Villages that unite brothers and sisters in foster care, surround them with a community of hope, and help them grow into caring and productive adults.

Who We Are?

SOS Children's Villages Illinois offers an innovative approach to traditional foster care. Our model of care gives children the opportunity to live in a nurturing, stable, single-family home with their brothers and sisters in the care of a full-time, professionally trained Foster Parent in one of our private single-family homes on one of our Villages. Children benefit from the stability of remaining with their siblings as well as the support of neighboring SOS Illinois Professional Foster Parents and the entire community.

Our Villages

The unique strength of the Village is the collective power of loving Foster Parents, dedicated staff that ensures safety, security, and a surrounding community who work together to help children gain confidence, trust, and a renewed sense of hope. Our aim is to provide SOS Illinois youth with the tools and resources they need to grow into caring, responsible, self-reliant adults.

***This Parent Handbook is Sponsored by
SOS Children's Villages Illinois Racial Justice Committee***

The SOS Illinois Racial Justice Committee Declaration

SOS Children's Villages Illinois recognizes the systems of inequity that disproportionately impact people of color; socioeconomic deprivation, poor education and lack of access to resources. We recognize the role this disparity plays in the dissolution of the family unit. We are therefore committed to mitigating through these challenges in order to reunite families or ensure a permanent outcome for children where they can continue to grow and thrive. We will do so by building bridges between our biological parents and our Foster Parents throughout the communities we serve.

Committee Goal

Advance the core mission of SOS Children's Villages Illinois by critically assessing and creating strategies with a focus on innovative methods to create on-going plans for continued areas for education, training, and advocacy in areas of promoting equality, addressing racism and bias, and advocating for social justice reforms both within the organization and surrounding communities.

SOS Illinois In- Home Family Support Services

Before a case is brought to the attention of DCFS, Family Advocacy Centers (FACs) are available for support, guidance, and to advocate on the families' behalf.

There are over 30 Family Advocacy Centers (FACs) located throughout the state. SOS Children's Villages Illinois operates an FAC located at 4538 S. Hermitage. We encourage families to seek services before, during, or after their case is brought to the attention of DCFS.

Many Family Advocacy Centers offer walk- in consultations without a referral. FACs offer a variety of free programs for all families, including DCFS-referred families. These services include, but are not limited to, domestic violence counseling, anger management classes, parenting classes, wellness classes, referrals for therapy, assistance with applications for public benefits, and much more.

To inquire about services provided by SOS Children's Villages Illinois, please call (773) 247-7725.



INTRODUCTION

This handbook is designed for parents and guardians whose children have been placed in the custody of Illinois Department of Children's Family Services (DCFS) in the care of SOS Children's Villages Illinois (SOS Illinois). The information in this handbook is designed to assist parents with understanding the SOS Illinois process while their children are in the custody of DCFS. The handbook also stresses the importance of communication and involvement between parents, their children and the agency.

SOS Illinois staff is committed to make children's time in care as short as possible. Teamwork is an important part of making this happen. Parents will work with a team of professionals to assist in addressing the concerns that brought the children into care with our agency. The team consists of the parent, the SOS Illinois case manager, the Professional Foster Parent, relative and/or fictive-kin, support person for parent, service providers, (therapist, psychiatrist, etc.) and the courts, which could consist of Guardian at Litem GAL and attorney. The goal of this team is to strengthen the family structure as well as assist in creating a productive environment for parents and their children to live.

It is important that the parent stay connected to his/her case management team. Cooperation and involvement are vital to the success of this case. Asking questions and expressing concerns as the parent. The goal is for everyone to work together to ensure a safe return home as soon as possible.

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IMPORTANT NAMES AND PHONE NUMBERS

Your family Case Manager is:

CW Name: _____

Contact Information: _____

CW Supervisor: _____

Contact Information: _____

Case Manager can be reached during working hours at:

For emergency afterhours, please contact the on-call line at:

We have three locations in the State of Illinois

Listing of the Village children are placed: _____

SOS Children's Villages office address is: _____

Your Public Defender/Attorney is: _____

Contact Information: _____

The GAL for your children is: _____

Contact Information: _____

COMMON QUESTIONS

Most parents have questions when their children enter care. Our goal is to answer as many of the questions that we can.

Please continue to read as we have included some of the frequently asked questions after removal of a child.

How soon can I visit with my child? Staff will schedule a visit between you and your child(ren) within 48 hours after placement with SOS Illinois, unless otherwise specified. It usually requires a court order to prevent visitation but may be done by the agreement of the family support team.

When can my child(ren) return home? The decision to return a child to a parent home is made by the court with information provided by the Child and Family Team (CFT) members. This decision should be discussed in your Child and Family Team Meetings (CFTM). However, the goal of the SOS Illinois is to return children home as quickly as possible if their safety can be assured.

Can my children be placed with a relative? Illinois statutes require SOS Illinois to make every effort to place the children placed in DCFS custody with a grandparent or other relative. The case manager will obtain information from you regarding, non-custodial parent, grandparents, and other relatives at the time of removal or at the time of the first Child and Family Team Meeting. The relative or fictive-kin that you suggest must pass a background check before the child(ren) can be placed in their home. This background check includes a child abuse and neglect, and criminal records check of individuals.

Have my parental rights been taken away? Your child(ren) is in the custody of DCFS, but you have not lost your parental rights. You still retain legal rights unless a court terminates those rights. Termination of parental rights is a possibility whenever a child is removed. However, this must be done by the court and does not happen immediately. If you have concerns about this possibility, you should speak to your attorney who can provide you with additional information on this issue.

GLOSSARY AND ABBREVIATIONS

The Department of Children and Family Service (DCFS) Definitions

Alternative Care (AC): For the DCFS this means all child caring facilities, residential facilities, licensed foster families, licensed relative or fictive-kin families, public or private institutions, and adoptive families (until the decree of adoption is granted) into which DCFS will place and maintain a child in custody.

Attention Deficit Disorder (ADD) or Attention Deficit – Hyperactivity Disorder (ADHD)- A childhood syndrome characterized by hyperactivity and short attention span.

Behavior Disorder (BD)- A childhood syndrome characterized by the child's inability to control their behavior over a period of time in various settings.

Care/Custody- Care/custody means the exercise of supervision or have parental authority over a child under age eighteen through the ability to control, dictate, coerce, persuade, or require a child to act or perform in some desired manner. This type of control or supervision or parental authority as used here, is the responsibility for the care, nurturance, and socialization of the child, including providing for the physical and emotional needs of a child.

Case Manager- The children's service worker at SOS Children's Villages Illinois who has the responsibility of coordinating all services delivered to a child and his/her family. The case manager may or may not provide all services directly but must ensure that the services needed to accomplish the objectives of the case plan are made available through direct provision, referral, or purchase (includes all types of contracted services). The worker's title is Case Manager.

Child Abuse/Neglect (CA/N)-

Abuse is defined as any physical injury, sexual abuse, or emotional abuse inflicted on a child other than by accidental means by those responsible for the child's care, custody, and control, except that discipline including spanking administered in a reasonable manner, shall not be construed to be abuse.

Note: Foster Parent, relative and/or fictive-kin care providers are not permitted to spank or use any form of corporal punishment on children in alternative care. Neglect is defined as failure to provide, by those responsible for the care, custody, and control of the child, the proper or necessary support, education as required by law, nutrition or medical, surgical or any other care necessary for the child's well-being.

Court Appointed Special Advocate (CASA): Volunteers that work with Juvenile Court staff to ensure that appropriate plans are made for children.

Court Jurisdiction (for DCFS)- The authority of the DCFS Juvenile Division of the Circuit Court to act. A child is subject to determination of delinquency, dependency, neglect, abuse, termination of parental rights and adoption.

Custody- Illinois statutes refer to several different types of custody. The following definitions are taken from the statutes or interpreted for DCFS purposes.

Custodial and non-custodial parent- custodial parent is the parent that lives with and cares for their minor child for all (sole physical custody) or most (primary physical custody) of the time. This contrasts with the non-custodial parent, who might have the child on a limited basis or only have visitation rights.

Legal Custody- the right to the care, custody and control of a child and the duty to provide food, clothing, shelter, ordinary medical care, education, treatment, and discipline of a child.

Judicial Custody- the ability of a juvenile officer or law enforcement officer to take temporary custody of a child who is in immediate danger and place him/her in the control of child protective services for no longer than 24 hours.

Physical Custody – those persons or agencies designated to provide 24-hour care for a child on a continuous basis. Generally, it is used to differentiate the person or agency caring for the child from that person or agency having “legal custody” of the child.

Protective Custody – Emergency measure taken to detain a child, for 24 hours, often in a hospital or foster home, until a written detention request can be filed. Police, law enforcement officers, or doctors have statutory authority to detain minors who are in imminent danger.

Temporary Custody- Temporary custody hearing is held within 48 hours of DCFS taking protective custody of a child after investigating an allegation of child abuse or neglect.

ADDITIONAL DEFINITIONS & ABBREVIATIONS

Department of Mental Health (DMH)- A department within Illinois government which provides mental health services.

Department of Social Services (DSS)- A department within Illinois government that oversees the DCFS.

Client Number (ID)- This is the 8-digit case number assigned to a client (child or adult) of the Illinois DCFS. This is also the Medicaid number.

Date of Birth (DOB)- This is the date (month, day, and year) on which a person is born.

Deputy Juvenile Officer (DJO)- This person represents the Juvenile/Family Court in most court hearings.

Child Family Team (CFT)- The Child Family Team is comprised of you, your family, your child(ren), your attorney, the Juvenile Officer, GAL and/or CASA, case managers, foster/relative/fictive-kin care provider, and service providers. The CFT meets regularly for the purpose of determining the need for placement and developing a plan for reunification or other permanency options, determining the appropriate placement of the child, evaluating case progress, and establishing and revising the service plan.

Child and Family Team Meeting (CFTM)- A meeting to address the areas outlined in the previous definition.

Foster Care for Youth with Specialized Needs- A specialized resource family placement program designed for the child who needs a family setting with greater structure and supervision. Children placed in these settings may have severe behavior problems and may have experienced multiple placements. Other placements including Residential, Group homes and Juvenile Detention.

Emancipation- a child's release from the custody and control of his or her parents or guardian. Special emancipation order can be issued for minors between the ages of 16 and 18. This order allows minors to live independently from their parents.

Permanency- means 'family'. It means having positive, healthy, nurturing relationships with adults who provide emotional, financial, moral, educational, and other kinds of support for children.

Guardian- A guardian is an individual appointed by a probate court to have care and custody of the person of a child under age 18, or an incapacitated person. The guardian may grant physical custody of the child to someone else but retains the rights of legal custody over the child.

Guardian Ad Litem (GAL)- An adult individual appointed by a court to protect the best interests of a child under the age of 17 or 18 in a specific legal action; may be, but is not necessarily, an attorney.

Independent Living Option program (ILO)- A youth living on his/her own under agency supervision. The youth's custody may or may not be assigned to the Division.

Individualized Education Plan (IEP)- A plan devised specifically to help meet the child's educational needs.

Learning Disorder (LD)- Certain conditions that affect the child's ability to learn and process information.

Transitional Living Program (TLP)- TLP operates to empower youth aged 17-21 who have experienced out-of-home placement to develop the potential to become self-sufficient, yet interdependent with the community and to successfully transition into adult living.

Administrative Case Review (ACR)- An administrative process conducted for the purpose of determining the continued appropriateness of a child's placement, progress in care toward the short- and long-range goals, and the need for continued care.

Reasonable Efforts- The diligence and care by the Agency/DCFS to identify child protection problems and provide services to solve those problems to prevent out-of-home placements and/or promote family reunification.

Service Provider (SP)- This is a person, licensed through the DCFS, to provide care for a child who is in out-of-home care. This person may also be called a resource parent.

Parenting Class- An educational course for parents that teaches parents about raising their children and what they should expect as children develop and how to navigate complicated issues as they grow older.

Parent Coaching- is a short-term intervention that provides biological parents, foster, adoptive, relative, and/or fictive-kin parents/other caregivers with hands-on tools for bringing about dramatic improvement in the children and family life.

Social Security Number (SSN)- A 9-digit number assigned to an individual by the Social Security Administration.

Supplemental Security Income (SSI)- Income provided to families by the Social Security Administration due to a death or a disability of a family member.

Termination of Parental Rights (TPR)- The severing (cutting off) of the legal ties of a child from his/her natural parents or adoptive parents.

Written Service Agreement (WSA)- An agreement designed through a mutual process of negotiation between the Division, the parent(s), and the juvenile court (if required by the court) setting out those activities.



FOSTER CARE – A TEMPORARY ALTERNATIVE

Out-of-home care, including foster care, is an alternative for a child when something occurs within the family that threatens and prevents the family from safely staying together. This is usually because of suspected abuse or neglect, illness, substance abuse or when no caretaker is available to care for the child.

The decision to remove a child is determined by the juvenile court. The child is then placed in foster care after it has examined information about the family. Placement away from their parents is made to ensure the safety and well-being of a child during a family crisis. The goal of SOS Illinois is to help you resolve the problem and bring your family back together safely as soon as possible. At SOS Illinois we specialize in keeping sibling groups together.

During the time that children are away from the parent's daily care, the parent(s) will still need to maintain contact to let the child know that love and care continues. A child's need for a parent does not stop while he or she is in foster care.

In addition, the parent will be working as a team member with others to strengthen their family and make appropriate plans for the parent and child(ren). The SOS Illinois case worker assigned to the family, will be the primary contact between the parent(s) and this agency as well as for all members of the Child and Family Team. Other team members include the GAL or CASA worker, parent's attorney, and the placement provider for the child.

PLACEMENT OPTIONS

There are different types of placements in alternative care. They range from placement with a relative or kin to residential care.

You have a voice in where your children are placed, and their placement should be reviewed at each team meeting. You can provide names of relatives or people with whom you and your children have a relationship to your Child Welfare Worker.

If these persons are interested in providing care to your children, a background check will be completed on them, and the team will determine if placement with them is appropriate and will make a recommendation to the court.

The court makes the final determination as to the placement type.

The different types of placements (from least to most restrictive) are:

Parental Care – the child may be placed with a non-custodial parent. The child would still be in DCFS until either the child can be reunified with the custodial parent, or the noncustodial parent obtains an order giving them custody of the child.

Relative Care – the child is placed with a blood or step relative. This could be anyone from a grandparent to a cousin to a stepsibling. The relative and all household members aged 14 and older must have child abuse and neglect as well as criminal background checks completed prior to the child being placed in the home. There are additional requirements, such as a safety check of the household, which must be done prior to placement. Your worker can provide more detail on these requirements.

Fictive-Kin Care – the child is placed with someone they know and with whom they have a prior relationship but there is no blood relationship. The household members aged 14 or older must have the background checks completed prior to the child being placed in the home. As with Relative Care, there are additional requirements that must be met before placement may occur.

Traditional Foster Care – this is a home where the parent(s) have been licensed by the state to provide alternative care to one or more children. The resource providers have received training and have completed background checks. This type of foster care is provided to most of the children in alternative care.

Medical Foster Care – this is care that is provided to a child with physical, emotional, or psychological conditions that require extra care and attention. The resource providers may receive special training to manage the child's condition and are required to provide more intensive care to the child than to a traditional child.

Youth specialized Care – this is a more restrictive type of foster care. The resource providers have had the same training and background checks as traditional resource providers but have also had additional training in working with children with behavior issues. These resource providers provide behavior modification to the children in their care and meet on a regular basis with a consultant to address the ongoing concerns or improvements in behavior.

Residential Care – this is the most restrictive placement type available. The child is placed in a facility that is staffed 24 hours a day, seven days a week. The staff works with the child on their behavioral issues in addition to the child meeting with a therapist on a regular basis. The facilities also encourage family therapy and will want you to participate. Residential facilities are not in every county so this may require traveling if your child is placed in a residential facility.

Most children will start in a traditional foster care placement and will remain in this type of placement unless they move to a relative or kinship care placement. Less than 25 percent of foster children are in Youth with Elevated Needs or residential placements.

Once a child is placed in one of the placement types, there is ongoing evaluation for the continuing need for this type of care. If you have questions about the type of placement your child is in or is being recommended, you should speak to your Child Welfare Worker. They can explain why a particular placement type is being recommended.

You should also talk to the placement provider to understand the behavior issues and how they are working with your child to improve these. This can provide you with information on how to help your child during visits because consistency is important for behavior modification.

SOS Illinois makes every effort to keep siblings together when they enter alternative care. It is a difficult time for children and being together can help alleviate some of the stress. If your children are not placed together, SOS Illinois will arrange visitation for them until a home can be located to take them together.



CHILD AND FAMILY TEAM PROCESS

The Child and Family Team (CFT) is designed to help move families through the system and to reduce the amount of time that children spend in alternative care. The team meets at regular intervals throughout the course of the case. The timeframes for these meetings are intended to coincide with court time frames (which are covered in greater detail later in this handbook).

In about 72-hours after your child has entered care, a Child and Family Team will meet to assist your family with developing an initial treatment plan. An initial visitation plan will also be made at this meeting.

The service plan will state what you and your worker will need to do to correct the concerns that brought your child into care. Often, the service plan will include the expectation that you participate in counseling or receive other services to strengthen and support your family. Because this meeting is for you, we encourage you to bring a natural helper with you to be a part of the Child and Family Team. A natural helper is anyone who you can rely on to provide you with support. It can be a family member, a friend, a minister, or anyone else that you choose.

Other people who help make up the Child and Family Team are the Juvenile Officer, placement provider (foster parent, relative or kin) for each child, parent's attorneys, GAL/CASA, and service providers (therapists, parent aides, etc.). Others may also be included if needed, such as teachers, physicians, etc.

Additional Child and Family Support Team meetings will be held at 30, 60 and 90 days after your child enters care and every quarter thereafter. These meetings are to track progress on the service plan and to address any additional issues, or make changes to the service plan, if your child is not returned to your home within the first 30-days. A Child and Family Team meeting is also held whenever a placement change is needed or has occurred. The process of selecting a placement should include a discussion of your preferences for the placement of your child.

Because out-of-home care is intended to be temporary, permanency in a placement for your child is one of the primary goals as we work with your family. Permanency most often includes returning your child home. It might also include placement with a relative or, in some cases, the termination of your rights as a parent and the placement of your child in an adoptive home.

As part of the permanency commitment, a review of your situation is made regularly. Every six months a formal review is held which will include you, your worker, your child (if age appropriate), the Child and Family Team members and an independent third party. You will receive at least two weeks' notice of the review, called a Permanency Planning Review Team (PPRT) meeting.

After the meeting, your Children's Services worker will submit a report of the review to the court. This report will include recommendations made by the team for you and your child. There are two issues that the team must deal with from the beginning of the case until resolution. Those are permanency plans and concurrent planning.



PERMANENCY PLANS

Service Plan- written document that is developed with the parents and Agency based on the outcome of the initial assessment regarding family and child in foster care. It's developed within a reasonable period of time describing how the case plan is intended to achieve a safe placement for the child in the least restrictive and most family-like setting. This includes a discussion of how the placement is consistent with the best interests and special needs of the child, including a description of the services offered and provided to prevent removal of the child from the home and/or to reunify the family. It also serves to document the steps to finalize a placement when the case plan goal becomes adoption or placement in another permanent home.

Administration Case Review (ACR)- is a meeting scheduled at least every six months, where SOS Illinois identifies a permanency plan and discusses what services are available to the parent and their children.

Reunification - This is achieved when your child has been returned to your home and the court has released the child from the authority of the court and the custody of the Division. This is the most common goal in our case plans. **Only the juvenile court can approve the return of your child to your care.** The CFT will make a recommendation to the court when progress has been made and it appears that going home is the best plan for your child. You may also request a hearing or have an attorney represent you at any proceedings.

Guardianship - Guardianship usually is a recommendation when the child is placed with a relative or kinship care provider. The relative or kin are given legal custody of the child through the court, but the biological parents do not have to give up their parental rights. The juvenile court would release authority and DCFS would close our case. The guardian would have the legal rights of a parent to make decisions for the child but, if their circumstances change and the

biological parents believe they can adequately provide for their child, they can petition the court to regain custody of the child.

Adoption - This option requires the termination of parental rights. This should be chosen only when it is clear that the parents will not be able to adequately provide for the child's safety and guardianship is not an option. Once termination of parental rights has occurred, you would not have any legal relationship with or legal rights regarding your child. You would not be able to regain your parental rights to your child once termination has occurred.

Placement with a fit and willing relative - Relative placement does not preclude adoption or guardianship. If the child is with a relative who wishes to care for the child long-term, adoption and guardianship should still be explored as they offer more permanence for the child. Placement with a Fit and Willing Relative, without adoption or guardianship, is not a legally final permanency option. Therefore, the court must continue to hold annual permanency hearings until such time that the court enters a legally final permanency order (return to legal custody of parent, TPR and adoption or guardianship) or the child reaches age 21.

Another Planned Permanent Living Arrangement (APPLA) - Choosing this option is appropriate when there is a specific, long-term placement for the child and when the court finds compelling reasons exist which make the other permanency options unacceptable. According to Adoption and Safe Families Act (ASFA) regulations, examples of compelling reasons include when an older youth requests emancipation or when there is a significant bond, but the parent cannot care for the child due to disability.

Concurrent Planning- DCFS requires that a concurrent plan be discussed at each CFTM. The concurrent plan is a backup plan if the primary permanency plan cannot be achieved. For example, the primary plan may be for reunification, but the concurrent plan would be for guardianship with the relative care provider. What this would mean is that if at any point it became clear that the child would not be able to be returned home, the CFT would begin working toward guardianship. The concurrent plan does not mean that the DCFS or the CFT do not think that the child will be able to return home but if he/she cannot return home, there is a plan already in place for them. This is designed to keep children from remaining in the system too long and to help them achieve permanency as quickly as possible.



ADOPTION AND SAFE FAMILIES ACT TIMELINES

The Adoption and Safe Families Act (ASFA) is federal legislation that was passed in regard to child welfare. This act provides time frames for child welfare agencies to move children through the foster care system so they will not be living in foster care indefinitely.

ASFA requires the DCFS and the juvenile court to have hearings on the child at regular intervals. Hearings must be held every six months to review the permanency plan for the child.

ASFA also states that termination of parental rights (TPR) must be filed when a child has been in care for 15 out of the last 22 months. What this means is that if your child is in care for 15 continuous months, the court must file for TPR. It also means that if your child is in care for six months then returns home, but six months later returns to care, TPR would have to be filed after nine months in care.

The six months they were previously in care count toward the 15 months since it would be less than 22 months since your child first entered care.

The court can give permission to not file for TPR, but there are only a few specific reasons for not filing for termination that are allowed under ASFA. These are:

- 1. Family is making progress toward reunification, but the child cannot yet return home.*
- 2. The child is over age 13 and does not want his parent's parental rights terminated.*
- 3. The child's behavior is such that termination would not be in the child's best interest.*
- 4. The child is placed with relatives.*

Unless one of these compelling reasons is given to and accepted by the court, termination of parental rights will be filed with the court.

Filing of termination of parental rights does not mean that TPR will be granted. There must be a hearing to determine if TPR is justified in the case. It is also important to note that TPR may still be filed even if one of the compelling reasons exists.

For example, one child may be over age 13 and not want TPR to occur but the other siblings are under age 13 and it would not be in the best interest of the children to terminate parental rights on the younger siblings and not the oldest. Termination of parental rights is a legal ending to the parent/child relationship and any questions you have regarding this topic should be directed to your attorney.

Until a decision is made by the court to terminate parental rights or transfer custody through guardianship or adoption, DCFS is still required to prepare parents through services that include but are not limited to:

- education about legal rights and planning for participation in the legal process, when appropriate and desired discussion of plans for visitation/ family time that are in the best interest of the children
- education about the importance of permanency and stable homes,
- counseling and support to cope with voluntary or involuntary termination of parental rights, grief, separation, loss, and the lifelong implications of adoption
- education on issues related to confidentiality, search and reunion information and counseling on the continuum of openness in adoption, when desired
- discussion of changing roles and relationships in guardianships or in situations when the birth parents will have an ongoing relationship with the adoptive family
- planning for participation in the adoption process, when appropriate and desired
- planning for the immediate future and referral for needed services

All the recommended services above are intended to prepare parents for termination of parental rights and transfer of custody in the event the court makes a decision to terminate parental rights.

COURT INFORMATION

The Juvenile Court is the final decision maker in all DCFS cases. The court removes children from their homes, approves the permanency plans and visitation schedules, and decides if a child returns home or if termination of parental rights will be granted. The court is a vital component of your child's life, as well as yours once your child enters care. It is important to know when and why you will be in court as well as how to dress and conduct yourself in the courtroom.

HEARING TYPES AND TIME FRAMES

Protective Custody – this hearing is held within 72 hours (about 3 days) of your child being taken into care. This hearing is to decide if the emergency removal of the children from your home was appropriate and if the children should continue in the temporary custody of DCFS.

Adjudication Hearing – this hearing is held within 30-60 days (about 2 months) of your child entering care and is an evidentiary hearing on whether the allegations which led to the removal of the child are true. The adjudicatory hearing determines if the children will be placed in the legal custody of DCFS and will no longer be in temporary custody.

Dispositional Hearing – this hearing may be held immediately following adjudication but must be held within 90 days (subject to the court's calendar) of the child's removal from the home. This hearing is to determine the permanency plan for the child.

Dispositional Review Hearing – this hearing should be held within 90 days of the Dispositional Hearing and may be held as often as needed to determine the appropriate permanency plan for the child. These are not held once the Permanency Hearing has been held.

Permanency Hearing – this hearing must be held within 12 months of the child entering care. This hearing determines the permanency plan for the child and if DCFS has made reasonable efforts to finalize this permanency plan. This hearing must be held annually.

Permanency Review Hearing – this hearing may be held as often as is necessary but must be held at least every 6 months following the permanency hearing. The purpose of this hearing is to determine if the permanency plan in place is the most appropriate option for the child and whether DCFS has made reasonable efforts to finalize the plan.



ETIQUETTE AND DRESS

Court is a formal hearing to address your child's custody and case plan. It is important that you dress and behave accordingly. It is strongly suggested that you wear dress clothes. These do not have to be formal such as a business suit or dresses. However, business casual wear should be considered. You should wear your good clothes, as jeans and sweatpants are not appropriate clothing and should not be worn to court.

Your appearance plays a role in how you are perceived by the court.

It is important to be respectful of the judge or commissioner hearing your case as well as other parties in your case. You can disagree with what is said but use your attorney to express your objections and/or disagreements. There is a protocol to follow in each hearing however, what the protocol will be is dependent upon the type of hearing scheduled and the judge presiding over the hearing. Talk to your attorney or case manager regarding what to expect in your hearing before going to court.

It is important that you maintain contact with your attorney during your involvement with the Juvenile Court. It is important that you share what you are doing with them so they can present this information to the court. It is their job to make sure that your rights are protected in the court proceedings, but they cannot do that if they cannot locate you or do not know what you are doing.

PARENTS RIGHTS AND RESPONSIBILITIES

Even though the decision was made to place your child(ren) in out of home care, you as parent(s) still have rights and responsibilities to your child(ren):

- You have an obligation to financially support your child(ren) which may include payment of child support.
- You have the right to be consulted on all decisions involving your child, including major medical services, entrance into the military, etc. The juvenile court has the final approval for all decisions made on behalf of your child(ren). Emergency medical conditions may require action prior to contact with you but you will be notified of any medical concerns regarding your child.
- You also have the right to be represented by an attorney. If you cannot afford one, you may request that the court appoint one for you. Although most court hearings are initiated by the juvenile officer, you, too may request a hearing be held in juvenile court.
- You have a responsibility to maintain contact with your child.
- You have a right to information and records about your child.
- You also continue to have the right to determine the religious practice of your child.
- You have the right to receive proper legal notice in court actions involving your child and to attend all court proceedings; and,
- You have a right to a review of the records and information that we have on your family. Within ten (10) days of the protective custody hearing or within fourteen (14) days of the filing of the petition or motion to modify, SOS Illinois, DCFS, and the Juvenile Officer must allow for certain records to be made available to all 21 parties. Your Children's Services worker can tell you how to arrange a review of the records.
- You have the right to be informed of services available to you under the Indian Child Welfare Act (ICWA) of 1978. If you believe you are of Native American heritage and are entitled to those provisions, notify your Child Welfare Worker. Your CSW will apply any ICWA requirements when providing services.
- You have a right to referral for services based upon need.

More information on your rights is available in the Know Your Rights Brochure which should be included in your packet of information.

If you have any issue or concern with your case, there is a process to be utilized in resolving this. You should begin by discussing your concern with your case manager. If this does not resolve the issue, you can ask to speak to the case manager's supervisor. Further avenues for assistance would include the Circuit Manager, then the Regional Office, and then Central Office. Your concern should be resolved by utilizing the process outlined.

VISITATION

Visits between you and your child(ren) and other family members will be arranged on a regular schedule. It is important for both you and your child(ren) that visits take place as planned. Depending on the situation, visits may take place in your home, in the Foster Parent's home, in the SOS Illinois office, or another place agreeable to everyone. Arrangements as to time and place will be mutually agreed to by you and your child(ren's) Child Welfare Worker. The visitation plan for you and your child(ren) will be developed by the Child Family Team and updated at the CFT meetings.

Many times, visitation begins by being supervised. This means that your Child Welfare Worker or another person agreed upon by the Child and Family Team will be present during your visit with your child. This is done to assure the safety of the child and the appropriateness of the interaction between you and your child(ren). This visit can occur at your home, the SOS Illinois offices, or at another agreed upon location. However, all interaction with your child must be supervised during the visit.

This means that you cannot take your child to the restroom without the visit supervisor coming with you. It also means that your conversations must be loud enough for the visit supervisor to hear what is being said – no whispering or writing notes during the visit. Your Child Welfare Worker will explain the visit rules and requirements.

Even though your visit may be supervised, does not mean that you and your child(ren) cannot have an enjoyable time. Parents are encouraged to bring games, toys, books, etc., to visits to share with their children. This is your time to spend with your child and for the Child Welfare Worker to observe that interaction. It is through this observation that your worker will be able to recommend moving to less restrictive visitation.

Remember that visits are about you and your child(ren), not about the court hearings, team meetings or case plan. If you have questions about your case and want to talk to your Child Welfare Worker about these items, schedule to meet with them at a different time to do this. Do not bring these up during your visit with your child as it takes away from the time you have together.

CHILDREN'S RIGHTS AND RESPONSIBILITIES

Your child has rights while in foster care. These include:

- Adequate and appropriate food, clothing, and housing.
- Protection and Safety.
- Medical diagnosis and treatment.
- Education.
- Emotional Security.
- To have a permanent home.
- To be placed in the same setting as his/her sibling(s), whenever possible, if the sibling(s) is also being placed outside the home.
- To maintain contact with siblings, if not placed together.
- To have visits with their parent(s); and
- To participate in his/her case planning when appropriate to the child's age and ability; Your child also has responsibilities while in out of home care. These include:
 - To participate with the assigned worker and care provider in developing rules and guidelines and to follow them.
 - To attend school according to the provisions of the law.
 - To participate in the development of the visitation plan and to behave responsibly during visits.
 - To take part in developing a permanent plan and to commit to that plan.
 - To participate in permanency planning reviews.
 - To cooperate in keeping scheduled appointments and to follow any prescribed treatment.
 - To act in a responsible and appropriate manner while participating in school, religious, cultural and neighborhood activities; and
 - To openly discuss current problems with the worker.

I/We have received the Handbook for Parents of Children in Alternative Care. A SOSCV Child Welfare Worker has reviewed the material with me/us, and I/we understand that I/we may contact my/our Children's Services Worker with any questions regarding the content.

Parent/Guardian _____ Date: _____

Parent/Guardian _____ Date: _____

PARENT TESTIMONIAL

The Michaels Family

Mr. Anthony Michaels was a non-custodian parent of eight children. This means that he did not have primary custody of his children that came into care. The children were brought into care due to the DCFS finding that one of the minors was substance exposed and there was an environmental risk of harm. The family had experienced three previous involvements with DCFS.

Because of SOS Children's Villages Illinois' model of care, the Michaels' children were placed together in a home on the Village. Not only was Mr. Michaels provided with assistance to help develop his parenting skills, in addition the Village was able to accommodate the father with other supportive services such as preparing meals and participating in educational activities, and assistance working on parental decision making during his weekly visits. Also, Mr. Michaels received individual and supported counseling on a weekly basis. With the support of case management, Professional Foster Parent, and counseling, Mr. Michaels completed all required services in the service plan.

During this period, Mr. Michaels worked diligently with his parenting coach addressing issues that included: behavior management, age-appropriate discipline, corporal punishment alternatives, safety issues, healthy food choices, educational support and more. In addition, with assistance, Mr. Michaels was able to obtain housing and financial supportive services.

Nine months later, with the support of his significant other and the children's grandmother, Mr. Michaels' children were returned to his care.