State of Kansas Department for Children and Families Prevention and Protection Services

Child Welfare Case Management Provider shall take into consideration the following:

Assessment of the child is a critical first step towards selecting a family who can meet the child's ongoing needs and be the best match for the child. In addition, the child's needs must be clearly articulated to a prospective family so they can make an informed decision about adopting the child, and appropriately meet the child's needs after placement.

When assessing the child's needs, the Assessor must:

Assess the child's current level of functioning and needs:

The assessor must be aware of and document clearly, the child's present cognitive, social, emotional and physical state. For children with special needs, the Assessor must be thoroughly knowledgeable of the child's academic, mental health, medical, recreational, and relationship needs. In infant placements, the child's caregiving routine and needs must be fully explored.

Identify the child's potential future needs:

The assessor must be able to predict what the child's future needs may be. This is critical, as adoption is a life-long process, and the adoptive parents must be capable of meeting the child's needs through adolescence and beyond. The needs may be related to physical, social, emotional, or cognitive limitations, or accomplishments, which may be the result of hereditary or environmental factors.

Recognize the long term impact of abuse, neglect, and sexual victimization on the child's development.

When considering children with special needs, the Assessor must anticipate what impact abuse, neglect, sexual victimization, and separation have had on all components of the child's development.

Identify the child's cultural needs:

The Assessor must gather information about the child's culture in order to provide this information to the prospective family. Information about the child's schedule, food habits, grooming habits, dress, religion, language, music preferences, etc. will make it easier for the new family to meet the child's needs and make him feel more comfortable in the new home. For example, if the new family is aware that the child does not eat meat, the parents can avoid what could be an embarrassing situation for the child or frustrating event for the parent. However, culture can never be used as a proxy or race, color, or national origin, and used to deny or delay a child's foster care or adoptive placement.

Evaluate the child's strengths and limitations.

The worker must identify the child's resources that will be drawn on to assist with the adjustment to a new family. Likewise, the Worker must recognize the child's deficits which may create barriers to a successful adaptation in a new environment, including his or her ability to form new relationships and attachments.

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Identify the knowledge and skills that will be required to effectively parent the child through adulthood.

The worker must recognize the types of knowledge and skills that are needed to parent the specific child on both a short and long term basis given the child's history and developmental needs. The worker should evaluate and determine the lifestyle, family structure, and parental personality best suited to the child

Identify the extent of contact with birth relatives, including siblings, and the level of openness that may be desired.

The worker should determine where on the continuum of openness the most desirable placement would fall and try to select a family who is comfortable with that degree of openness and contact.

It is critical to gather as much information as possible when assessing the child. There are many sources where necessary information may be found:

Birth and Medical Information-can include the birth mother's pre-natal care record, hospital records regarding birth and post-natal care, doctors or health care professionals' notes and reports regarding health, illnesses, conditions, injuries, childhood diseases, immunizations, tests, diagnoses, treatments, and prognoses, referrals to specialists, therapies etc. related to the child. This information is used to determine the current needs, identify potential health issues in the future and develop a health history for the prospective adoptive family.

Birth Family Background and Social History- can be found in past and present agency records or forms such as Social and Medical history, correspondence from the family members, birth parents' medical, school or social service records, other agencies, and the child's lifebook. This includes the family's social history, cultural information, cultural information, genetic/medical information, profiles of the birth mother and father, birth family's lifestyle and extended family information. This information highlights the child's cultural background, the potential impact of genetics and environment on the child's development, strengths and limitations.

Placement History-this is derived by review of the child's records, progress reports from caregivers and placements, and casework dictation. The placement history should include dates and reasons for the move, the child's adjustment to new placements, and typical reactions to separation. This information reveals the reasons for placement and subsequent moves for the child. This data will assist in planning and preparing for the child's placement with his or her new family as it aids in predicting potential adjustment problems and identifies sources of support for the child during the transition.

Educational Information-report cards, IEP's, educational assessments, teacher's reports/notes are excellent sources of academic information. This information is useful in identifying the child's cognitive level and potential academic needs.

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Mental Health Status-psychological/psychiatric evaluations and assessments, counseling progress reports and therapist's notes provide critical insight into the child's mental health. This information assists the Assessor in identifying any short or long term mental health concerns, and in planning for ongoing services for the child.

Developmental and Personal Information-this can be gathered from developmental assessments, doctor/therapist's reports, caregiver notes, the child's lifebook and casework dictation. This information gives the Assessor insight into the child's personality, level of development, likes, dislikes and habits.

This is critical data when selecting a family who will mesh well with the child's personality and demeanor.

Frequently, when workers are asked to review the children who are legally free for adoption, they lack tools to help organize the information which would facilitate the selection and matching process. One such tool is the Prediction Path, PPS 5330. This was developed by Kay Donley (1990) and adapted for use in Kansas. The Prediction Path is a three-part process. Part One is the <u>Placement Trail</u> where a child's history in substitute care is recorded an analyzed. The second part is the <u>Strengths/Needs Sheet</u> which lists the child's strengths and limitations. Lastly, the <u>Prediction Narrative</u> is compiled using data from the first two sections as well as the child's case history.

The Prediction Path serves many purposes:

- Assists the worker in organizing information
- Recreates the child's path in substitute care, highlighting adjustment behaviors
- Identifies potential behaviors, attitudes or problems that may manifest in the future, based on the child's history of abuse, neglect, separation, or sexual victimization
- Develops a multi-faceted behavioral management/child rearing contingency plan for the adoptive parents
- Highlights the child's strengths and limitations.

The completion of the Prediction Path requires that the worker do his or her homework by reviewing the child's pre-placement history, birth parent social history, genetics, substitute care path, mental health evaluations, school reports, as well as input from the caregivers.

Placement Trail

The Placement Trail lists in reverse chronological order all of the child's placements, including dates, reasons for move, caregiver information, and comments regarding the child's adjustment.

The Placement Trail is of particular importance when assessing children with special needs and is critical when developing the Prediction Narrative. The Placement Trail organizes important information and may reveal patterns of adjustment behavior or commonalities with multiple moves.

Strengths/Needs of the Child

The Strengths/Needs section is developed using the contents of the child's case file such as social history, school reports, mental health evaluations, caregiver information and the worker's own impressions. The Assessor lists the child's assets (strengths, abilities, skills, talents, positive characteristics) on the left side of the page. The Assessor then itemizes the child's challenges the right

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side of the form. The Assessor must attempt to balance the strengths and needs of the child. Frequently, Assessors may overlook obvious strengths and abilities and dwell on the child's shortcomings.

In infant placements, this information will be based on the birth parent's social/medical/academic history, parental genetic/hereditary characteristics which may be passed on to the child, and limited information gathered about the child.

The Strengths/Needs section enables the Assessor and subsequently, the prospective family to gain a holistic view of the child's current level of functioning. The family will be able to meet his or her needs by utilizing the child's strengths. This is likely to assist the child by giving him or her greater confidence and self-control and help the child to manage his or her limitations and problems internally.

Prediction Narrative

The Prediction Narrative is the synthesis of information derived from the Placement Trail, Strengths/Needs section and the child's case file. The worker completes the Prediction Narrative prior to the Best Interest Staffing to select potential adoptive parents for the child.

The Prediction Narrative identifies anticipated behavior, problems or parenting challenges of the child on both a short- and long-term basis. While these are only predictions, it does present and highlight an array of issues the adoptive family may be faced with over the course of the child's development.

The Prediction Narrative has three basic elements:

- Behaviors to be expected
- When the behavior is likely to occur
- Strategies/methods for handling the behaviors

The Assessor must recognize the long-term impact of abuse, neglect, sexual victimization, and separation and document any anticipated behavioral manifestations in the prediction Narrative along with suggested parenting techniques. In addition, the assessor must consider the impact of the adoption experience on the child, such as the child's level of understanding, acceptance and integration of adoption into the child's identity.

This format provides foster or adoptive parents with a roadmap to the child's behavioral manifestations. The new parents are prepared with: 1) the expectancy of the problem and 2) multiple avenues to manage the challenge. This empowers the parents and minimizes the crisis reaction. The worker would list as many behaviors as possible.

In summary, the Prediction Path provides a concrete tool to assist the worker in highlighting the child's critical issues while developing a profile of the family who can best meet the child's needs. This tool will also be used by the Assessor when presenting the child to the prospective adoptive family, as well as during placement and post-placement meetings and home visits.

Additional information that should be assessed is listed below:

the relationship of the child to the prospective adoptive parent(s);

- b. -age of child;
- c. cognitive ability of child to understand changes;
- d. the degree to which the child has accepted the fact they will not be returning to their parent(s), recognizing they may need time and support to cope with the facts and consequences of their parents acts and decisions;

- e. the child's expressed interest and willingness to accept the adoption.
- f. the child's preferences regarding adoptive placement.
- g. early trauma and other adversity.
- h. the child's adjustment/readiness and timeliness of the adoption.
- i. Review the child's social history and assessment, including trauma history, to determine the child's developmental level, personality and understanding of adoption.
- j. Assess the child's claiming behaviors and the family's entitlement to parent the child.
- k. Clarify the child's understanding and expectations around adoption.
- 1. Assess the child's needs and what the parents will need to provide for him or her.
- m. Make appropriate referrals to healthcare, including a qualified mental health professional, to process the adoption with the child and family.
- n. Maintain meaningful relative connections with the child.
- o. Children of different maturity levels will require unique adjustment periods. Staff should assess the child's progress periodically. An appropriate adjustment period should be no less than six weeks. Some children may require six months or longer.

