

ADOPTION BEST PRACTICE MANUAL

**TENNESSEE DEPARTMENT OF CHILDREN'S SERVICES
APRIL 2008**

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SERVICES TO BIRTH FAMILIES

I. BIRTH/LEGAL PARENT SERVICES

What: DCS provides services to the birth/legal parent to assist the parent to regain custody of their child, locate relatives to care for their child and/or to terminate their parental rights to their child.

When: Begins immediately upon the child entering DCS custody.

Who: FSW and Permanency Specialist

A. Assessment

The Child and Family Team process is the avenue used to determine the services needed by the family and to discuss the progress or continuing needs of the family. The documentation will be located in the Permanency Plan and the Functional Assessment. The following should be addressed by the CFT:

1. Determine the birth/legal parents' motivation and interest in planning for the child and the services required for the parents and child;
2. The birth/legal parents' desire and ability to care for the child (providing physical safety and nurturing, encouraging emotional development, and bonding);
3. Support/resources available to birth/legal parents;
4. Services needed to support their decision regarding placement/parenting of their child;
5. Availability of relatives willing, able, and/or appropriate to care for the child.

II. BIRTH/LEGAL PARENT - Overview of Adoption Process

What: DCS will provide an overview of the adoption process to any parent whose child is in custody and who is considering terminating their parental rights.

When: When the birth/legal parents are considering proceeding with termination of their parental rights.

Who: Permanency Specialist and/or FSW

A. Adoption Process Overview

The following should be addressed:

1. The legal process for terminating parental rights or securing a voluntary surrender so that the child could be legally free for adoption;
2. Identify all parents (birth/legal mother, birth/legal father(s), and alleged father(s)) whose rights are to be terminated or surrendered;
3. Explain the necessity of giving full information regarding the identity of the father and the consequences of withholding this information;
4. The need to legally terminate parental rights for all legal parents and for fathers of children born out of wedlock. A diligent search must be conducted to locate these parents when their whereabouts are unknown;
 - a. Legal Parents include:
 - i. Biological/legal mother;
 - ii. Any man who was married to the mother when the child was born or when the child was conceived. Tennessee statute (TCA 36-102(26)(B)) assumes that if the child was born no more than 300 days after the divorce, then the child must have been conceived during the marriage;
 - iii. Any man who has been declared the father in any paternity or legitimization case;
 - iv. Any man who has signed an unrevoked acknowledgment of paternity. This procedure may have been done at the hospital at the time of the child's birth that resulted in a legitimization order. Although a name appears on a child's

- birth certificate as the father, an order of legitimization must have been issued;
- v. Any parent who has adopted a child.

b. Alleged/biological/putative fathers

Rights of some biological fathers must also be terminated. Even if there is a legal father, DCS must also terminate the rights of any alleged/putative/biological father who has:

- i. Filed a legitimization petition;
- ii. Put his name on the putative father registry either before the child was born or within 30 days after birth, and kept his address current;
- iii. Been identified by the mother in a sworn, written statement, or by other information which the court determines to be credible and reliable. (Confer with DCS legal counsel, if necessary);
- iv. Claimed to the mother or DCS that he is the father;
- v. Been named on the birth certificate;
- vi. Been openly living with the child and holding himself out to be the father at the time of the removal;
- vii. Entered into a permanency plan in which he acknowledges paternity of the child.

If a father wishes to register an intent to claim paternity or acknowledgement of paternity, Department of Children's Services must provide [Form CS-0439 Notice of Intent to Claim Paternity of a Child Born Out of Wedlock](#). Likewise, if a mother wishes to sign a sworn statement to identify the father, Department of Children's Services must help her do so.

Explain to an alleged father his right to sign a Waiver of Intent if he is denying paternity. (CR: Agency Surrender)

DCS must advise the father of a child born out of wedlock that he may receive notice of an adoption proceeding when any of the above conditions apply.

c. Unknown Fathers

As a matter of policy Department of Children's Services does not file termination petitions against unknown fathers. There are courts who occasionally do not want to enter adoption orders unless this has been done. In this case, confer with staff attorney.

d. Unnamed Fathers

If a mother appears to know the identity of the father, but refuses to divulge his identity, Department of Children's Services is prepared to use all legal options, including criminal prosecution, to learn the identity of the father prior to placing the child for adoption.

e. Other Guardians

If someone other than a legal or biological parent has obtained guardianship of the child through a court order, parental rights must be terminated before DCS can place the child for adoption. This is usually in those situations when a surrender was given to prospective adoptive parents, or an adoption petition was filed but no adoption was actually completed. Because the adoption was not final, the petitioners would not be considered legal parents, however they had acquired rights that courts recognize. If this situation occurs, consult with the DCS legal counsel.

5. Explain the legal process of adoption, including the court's decision to grant adoption and establish a parental relationship and DCS's responsibility to the court for reporting information about:
 - a. The child's appropriateness for adoption;
 - b. The child's birth relatives;
 - c. The suitability of the adoptive family.
6. Discuss how adoptive families are approved and the process of how adoptive placement decisions are made based upon the family's ability to meet the needs of the child.
7. Explain the process of sealing adoption records upon final order granting or dismissing the adoption and storing them permanently in the State Archives.

8. Explain that identifying/non-identifying information may be released to or contact sought by the adult adopted person, his or her birth or adopted relatives. (CR: Post-Adoption Services)
9. Discuss the birth/legal parents' involvement in the adoption process and preparation of a non-identifying letter describing their decision for adoption. Explain that a DCS Permanency Specialist reviews and approves the letter and gives it to the adoptive parents at the time of placement. DCS keeps a copy of the letter in the child's case record.
10. Explain that all contacts to request a service or share information after finalization of adoption should be made to the Post-Adoption Services, Central Office.
11. Request the birth/legal parents to contact the Adoption Services, Central Office if they learn of health or other factors that may affect the child's future development.

III. Adoption Counseling Regarding Openness In Adoption

NOTE: There is no Tennessee statute regarding openness in adoption. Both birth and adoptive parents must understand that any agreement made regarding openness are honor-bound, rather than law-enforced. Because there is no legal basis for openness, adoptive parents can choose at any time to limit, change, or stop contact with the birth family if they feel this is in the best interest of the child. Birth parents have no legal recourse in this decision.

What: DCS provides information regarding openness in adoption and can act as negotiator for birth/legal families and adoptive families in developing a plan for the desired level of openness.

When: Because all children want to know their birth parents, this should be discussed in all adoption cases.

Who: Permanency Specialist

A. Defining Openness in Adoption

Openness in adoption is a plan in which identifying or non-identifying information is openly shared between birth and adoptive parents. A continuum of openness ranges from the exchange of non-identifying information to ongoing contact between families after finalization.

The Permanency Specialist helps birth and adoptive families negotiate their plan. (WA: Purpose of Openness in Adoption and WA: Continuum in Open Adoption)

B. Explaining Openness in Adoption to Birth Family and Adoptive Family

Share the following information with birth and adoptive families:

1. Openness in adoption is child-centered. Its foremost reason is to benefit the adopted child. By this means the child is affirmed by all the people in his/her life.
2. It establishes honesty, freeing all involved from the burden of carrying secrets.
3. It shows respect for all parties involved.
4. It is a process in which both families have control in creating a plan that is right for their situation.

5. Both families have ongoing responsibility in carrying out the plan. Trust grows as a result of affirming behavior by all parties reliably demonstrated over time.
6. Openness in adoption is not co-parenting. Only the adoptive parents have full legal caretaker rights and responsibilities.
7. It helps the child understand that adoption is a fact of his/her life.
8. It helps the child understand how he/she is related to the various people in his/her life.
9. It helps the child understand the facts of the child's life and the relationships that organize it.
10. It helps the child establish his/her personal identity which requires understanding the contributions of the various parties in his/her life.

C. Assessing birth and adoptive families for openness in adoption

The decision to pursue openness in adoption is complex. Efforts to evaluate birth and adoptive parents must be based on the needs of the child. Some parents are not appropriate candidates for openness in adoption. (WA: Assessing Birth Families And Adoptive Families For Openness In Adoption)

D. Openness in adoption issues for foster/adoptive families

Most foster families have had direct contact with the birth family, and there is already a degree of openness.

Foster/adoptive families may need help from the Permanency Specialist in redefining their relationship with birth parents after adoptive placement. This redefining acknowledges the existence of information and/or contacts shared prior to adoptive placement. DCS will not negotiate openness between foster/adoptive and birth families when a birth parent is guilty of a crime of violence, neglect, or crimes against any child.

E. Child's involvement in open adoption

The Permanency Specialist needs to determine the child's ability to participate in the decision about open adoption. The following factors should be considered:

1. Age and developmental level;
2. Emotional maturity;

3. Past history with birth family;
4. Attachment/bonding with members of birth family;
5. Child's desire for continued contact with birth parents, siblings, other family members.

F. Negotiating open adoption plan with birth parents, adoptive parents and child

Using the work aid, Openness in Adoption Continuum, the Permanency Specialist will discuss the levels of openness individually with all parties involved in developing a plan for the type of any future or ongoing contact. Parties include the birth parents, adoptive parents, and the child who is age and developmentally appropriate to be involved in the plan.

When selecting families for an adoptive placement, the birth parent's desire for openness should be considered. Similar comfort levels of openness will make negotiation a more realistic endeavor between the adoptive parents and birth parents.

The Permanency Specialist will assist each member of the triad to assess realistically their abilities and comfort level as to the degree of openness desired. The Permanency Specialist is the facilitator of the plan for exchange of information and is a participant in any initial meetings between the birth parents and the adoptive parents.

Even though the Permanency Specialist will negotiate the plan for openness among the parties, it will be with the understanding that the success and obligation to adhere to the plan is strictly between the parties involved and holds no legal basis for a continuing relationship.

Work Aid: OPEN ADOPTION CONTINUUM

Categories:

1. Sharing non-identifying information
2. Non-identifying meeting
3. On-going sharing of correspondence, pictures via the agency
4. Having full identifying information
5. Having full identifying information and one meeting
6. On-going visits/contact directly between parents determined by the parties and re-negotiated, as needed, over time

Each step is sequential and must be completed before moving to next step.

Work Aid: ASSESSING BIRTH FAMILIES AND ADOPTIVE FAMILIES FOR OPENNESS IN ADOPTION

The decision to pursue openness in adoption is complex. Efforts to screen parents must be based on the needs of the child. Some parents are not appropriate candidates for open adoption, however others may be educated as to the benefits of openness in adoption.

Openness in adoption is prohibited when parental rights were terminated due to a crime of violence, neglect or crimes against any child. If the birth/legal parent has mental problems, and/or drug or alcohol addiction, the birth/legal parent may not be a candidate for some types of openness in the adoption. If the adoptive parent has a pronounced need for predictability or control, he/she may not be a candidate for open adoption.

Based on experience, there is a clear vision of the qualities needed. Qualities needed include:

1. Genuine respect for the other (birth or adoptive) family and for the child
2. Integrity and history of dependability
3. Flexibility and ability to improvise
4. Clear agreement with the roles of parenting—birth, legal and parenting parent
5. High tolerance for emotional pain
6. Inner strength or faith

If openness in adoption is attempted by someone lacking the above qualities, problems are likely.

Crucial qualities to look for in persons who are candidates for openness in adoption are:

1. Relationship skills
2. An unquenchable desire to learn
3. Humility, or being at peace with one's imperfections
4. Leadership ability
5. Compassion
6. Foresight
7. Intuitive understanding of why openness in adoption is based on a system that places the needs of the child first
8. Affirming and inclusive personality

It helps to have these complementary characteristics:

9. Humor
10. Gratitude
11. Gregariousness

12. "Chooseability" (The ability of parents to present themselves as interesting and likeable candidates for a rewarding and enduring open adoption relationship.)

Work Aid: PURPOSE OF OPENNESS IN ADOPTION from James L. Gritter's
The Spirit of Open Adoption, CWLA Press, 1997

Open adoption is an effort to correct many shortcomings of closed adoption. The closed approach to adoption has many drawbacks, mostly linked to secrecy. It limits access to information so thoroughly that everyone involved--birth parents, adoptive parents, and adoptee lack the data needed to work through the unique issues they confront. In the absence of information, fantasy abounds. The closed system is an assembly line that stifles personal initiative and fosters total dependence on the system. The FSW is all-powerful in closed adoptions. The closed system leaves many birth parents feeling like they have a loved one missing in action. Adoptees often feel a haunting sense of incompleteness. The closed system ties the hands of adoptive parents by depriving them of the information they need to meet the needs of their children effectively.

Open adoption emerged in the United States in the late 1970s as an alternative to and a remedy for the deficiencies of the closed system. It originated as an effort to correct the long standing emphasis on secrecy by giving participants the information they needed to find peace of mind. It recognized the uniqueness of each adoptive arrangement and worked to put control of the experience into the hands of those who lived it.

The existence of hundreds of adoption search and support groups around the country testifies to the fact that the closed system has generated a number of discomfoted participants. Years of mostly satisfying results have established open adoption as the most promising approach to adoption.

Hundreds of children are adopted each year by foster parents, and most of them are familiar with the birth parents. Although these families typically know a great deal about each other, the missing piece usually is the relationship between them. They have some sort of relationship but it is left in vague, undefined terms. In some of these situations, parents take things into their own hands and spend time together and work things out. Too often the connection is left unattended, flapping in the wind. It is vital that professionals who help organize these adoptions assist the parents to understand the extremely meaningful and consequential relationships they are entering.

Open adoption must address the best interests of the child who is being adopted. Its purpose is to help the child's:

1. Understanding that adoption is a fact of the child's life.
2. Understanding of how he/she is related to the various people in his life.
3. Understanding of the facts of the child's life and the relationships that organize it.
4. Growth in autonomy--developing a greater awareness of his/her adoption and moving toward a full partnership in the open adoption relationship.

5. Establishing of identity—establishing personal identity requires understanding the contributions of various parties in the child’s life; to help the adopted person determine how he/she is similar and dissimilar to birth parents and adoptive parents.
6. Assent to the plan—the adopted person has the information he/she needs to own his life experience.
7. Ability to give emotional gifts—the healthy adopted person can say, “I love you” to each set of parents.

Every adoption plan must:

1. Honor the adopted person. Every child deserves to be honored as a unique gift. The needs of the child are paramount.
2. Be based on honesty. Accurate information equips people for effective living. Honesty produces the best results when it is coupled with a spirit of kindness.
3. Be based on choices. People take responsibility for decisions when they freely choose them from real alternatives. Conversely, people tend to resent outcomes that result from coercion.
4. Honor the pain. Adoption has a tragic element that cannot be ignored.
5. Be covenantal. The quality of an adoption will depend on the integrity the participants bring to their commitments.
6. Transform. Adoption is a life-altering experience for each person involved.
7. Be adaptable. Adoptive relationships are dynamic, never stagnant.
8. Build community. Adoption is best understood as a system.
9. Each participant affects and is affected by the others in the extended adoptive clan.

IV. AGENCY SURRENDER

What: DCS must advise the birth/legal parents of the right to surrender the child for adoption and that the surrender is final ten days after execution of the document. A surrender cannot be taken prior to a child's birth or before three days after a child's birth unless the court has just cause.

When: At any time it seems appropriate during the permanency planning process.

Who: Permanency Specialist and/or qualified FSW

A. Determining Jurisdiction and Venue

A surrender completed in Tennessee may be taken by the Judge of any juvenile, circuit, or chancery court. A juvenile court referee has the same authority as a juvenile court judge for this purpose.

A parent who is incarcerated in a federal or state prison (not a county jail) may surrender before the warden. A parent who is incarcerated in a county jail might be transported by local law enforcement to the judge/court to execute a surrender.

A parent who is in another state or a foreign country can surrender to the Department using the DCS form or, in some circumstances, can follow the applicable law in that jurisdiction.

B. Venue Concerns After a Surrender

After the first surrender is executed, the court which received the surrender automatically receives exclusive jurisdiction over the child until an adoption petition is filed.

If it is anticipated that there will be continuing legal issues for a court to consider with regard to the child, give careful consideration in which court the surrender is scheduled. Take into consideration that the court which accepts the surrender will also ratify the permanency plan, conduct permanency hearings, and resolve issues regarding the remaining parent (if there is one). Unless it is anticipated that an adoption petition will be filed in the very near future, it should be arranged to have the surrender taken in juvenile court.

C. Obtaining a Surrender of Parental Rights to the Department of Children's Services

Complete the appropriate surrender form according to the form instructions.

1. [Form CS-0651 - Form For Surrender of a Child To Tennessee Department of Children's Services or a Licensed Child Placing Agency By a Parent or Guardian in Tennessee.](#)
2. [Form CS-0652 - Surrender of Child in Tennessee Directly to Adoptive Parents by a Parent or Guardian.](#)
3. [Form CS-0653 - Surrender of a Child by Parent or Guardian in Another State to the Tennessee Department of Children's Services.](#)

Complete Form [CS-0649 Medical/Social History for Child and Child's Family.](#)

Complete the surrender and distribute it as follows:

1. Original certified copy to be filed with the court;
2. Certified copy to be filed in the case record;
3. One certified copy to the surrendering parent;
4. Obtain a Guardianship Order as follows:

D. Obtain a Guardianship Order

The surrender itself terminates parental rights, but it is not sufficient to transfer guardianship. This must be completed by an order of guardianship. If a child is being surrendered to DCS in front of a judge, the judge is authorized to enter a guardianship order at the same time as the surrender.

If both parents surrender, obtain an order of guardianship; if only one parent surrenders, obtain an order of partial guardianship. (The guardianship order must be obtained within 30 days of the date of the surrender.)

In requesting area legal staff to prepare the guardianship order after the revocation period has passed, the following information is to be shared:

1. Full name(s) of parent(s) signing the surrender;
2. Full name of the child as the name appears on the birth certificate and surrender;
3. Date of birth of the child;
4. Name of the court and judge taking the surrender;
5. Date of the surrender.

E. Reporting Status

Report child's legal status to REACT. (CR: [Policy 15.5 Registering and Maintaining Status of Children with REACT](#)).

Update TNKids.

F. Obtaining a Surrender From Legal Father Who is Denying Paternity

Prepare and send a legal referral requesting a special surrender to the staff attorney. Include the following information:

1. Mother's full name including maiden name;
2. Father's full name;
3. Verification of date/place of marriage, if applicable;
4. Date/Place of child's birth;
5. Child's full name as it appears on the birth certificate and the birth certificate number;
6. How long the parents have been separated and the father's reasons for denying paternity of the child;
7. Date, place, and Judge or Chancellor before whom the mother's surrender was executed.

Complete the surrender and distribute it as follows:

1. Original certified copy to be filed with the court;
2. Certified copy to be filed in the case record;
3. One certified copy to the surrendering parent;
4. Obtain a Guardianship Order following Step D.

G. Obtaining a Surrender From an Alleged Father

Request that the alleged father of a child to be placed for adoption sign a Waiver of Interest in order to terminate his rights.

The Waiver of Interest is not valid for use by a legal father or for any man listed as the father on the child's birth certificate.

The Waiver of Interest must be executed before a notary public, but does not have to be signed before a judge.

Explain to the alleged father the importance of obtaining a Medical/Social History for Child and Child's Family. Have the alleged father complete Form Medical/Social History for Child & Child's Family. Offer to provide assistance, if needed.

File the original and a copy of the waiver document in the child's case record. It will be filed in the adoption court if the child is placed for adoption. Send a copy of the waiver to the staff attorney.

There is no procedure for revocation of a waiver. Once it is signed, it is final.

V. REVOCATION OF A SURRENDER

- What:** DCS must assist birth/legal parent(s) in revoking their surrender of parental rights to their child.
- When:** When a birth/legal/alleged parent who has signed a surrender wishes to revoke that surrender during the revocation period.
- Who:** Permanency Specialist and/or qualified FSW
-

A. Revoking a Surrender

A surrender may be revoked within ten days from the date of the surrender. Start the count on the day after the surrender. If the tenth day falls on a weekend or holiday, the parents have until the end of the first working day after the holiday or weekend. Weekends and holidays that fall in the middle of the ten day period are counted the same as working days.

A surrender that was taken before a judge in Tennessee should be revoked by signing the revocation forms in front of the same judge. If the same judge is not available, the surrender can be revoked in front of the original judge's successor or substitute. If the original judge is not available, and there is no successor or substitute available, the surrender may be revoked in front of any judge who has jurisdiction to accept surrenders.

A surrender taken before a prison warden must be revoked by signing the revocation forms in front of the same warden or his successor.

A surrender taken in another state or country should be revoked in front of the same person who took the surrender. If that is not possible, the parent may revoke in front of any judge who has domestic relations jurisdiction in that state or country.

The revocation documents are included in the packet of surrender forms.

B. Effect of Revocation

Revocation of a surrender automatically restores the parties to the legal status they had prior to the surrender.

Child already in State Custody: If the Department of Children's Services had legal custody of the child before the surrender, the Department of Children's Services will still have legal custody of the child after the surrender is revoked.

Child Who Came Into Care by Surrender: If the Department of Children's Services received custody of the child as part of the surrender process,

revocation of the surrender requires that we evaluate the safety and appropriateness of return of the child to the parent and either return the child within five days or file a petition to show cause why placement with the parent is inappropriate.

C. Responding to Revocation of a Surrender for a Child Who Came Into Care by Surrender

Evaluate the parent(s) ability to care for the child and to provide a safe home.

Consult with the Team Leader.

If the decision is made to return the child, return the child within five days. Provide the parent(s) with the following:

1. a schedule of the child's current routine;
2. sufficient clothing and food for the child;
3. description of any special care needed and dates of future medical appointments;
4. any information necessary regarding physical, emotional, behavioral, or educational needs;
5. any Department of Children's Services follow up services.

If the decision is made not to return the child, contact the staff attorney immediately to discuss filing a petition. This process is essentially the same as the emergency removal of a child in a CPS case. (CR: CPS Criteria for Emergency Removals) Filing the petition stops the return of the child to the parent(s). A probable cause hearing is held within three days and a final hearing within 30 days. At the 30-day hearing the court may award custody or guardianship to any appropriate agency or person.

D. Reporting Status

If the child is returned to the parent(s), update REACT with the Child Status Form. (CR: [Policy 15.5 Registering and Maintaining Status of Children With REACT](#)) and update TNKids.

VI. BACKGROUND INFORMATION

What: DCS must obtain full background information from the birth and legal parents of the child; and explain to them how that information is essential to the child. Because DCS is the only source for preserving adoption information, diligent efforts must be made to obtain valid information.

Full information includes:

- A. Social and medical history for maternal and paternal relatives;
- B. History of the child's development, care, training, medical treatment, religious affiliations, and school adjustment, if applicable;
- C. Reasons the birth/legal parents have chosen adoption.

When: Immediately upon identification of adoption as the permanency goal.

Who: FSW and/or Permanency Specialist

A. Child's Family Background Information

1. Infants

Secure copies of the child's birth record from the hospital.

Have the attending physician complete [Form CS-0427, Child's Medical Record](#) at the time of birth, or obtain copies of child's birth history and medical records, if available.

2. All Children

Have the birth/legal parents complete Form [CS-0440 Medical/Social History for Child and Child's Family](#) according to form instructions.

NOTE: When this form is being completed at the time of a surrender, the form must be notarized. When there is no surrender, the form must be completed but not notarized. File Form Medical/Social History for Child and Child's Family).

Review all the medical/background information, and seek clarification and/or medical consultation, if necessary.

Review all information from the social/medical history needed for the preplacement/presentation summary, including a description of each parent; what he/she is like; the parents' relationship to each other and the child and the parents' stated reasons for adoption. (CR: Preparing the Preplacement Summary and Preparing the Presentation Summary)

SERVICES TO THE CHILD

I. GUIDELINES FOR ENSURING APPROPRIATE CASE RECORD DOCUMENTATION FOR ADOPTION SERVICES

- What:** To ensure adoption services are expedited by maintaining appropriate documentation in the case file which fulfills legal, agency, and service mandates.
- When:** Once the decision is made that adoption services are in the best interest of a child.
- Who:** Permanency Specialist and Family Services Worker providing services to the child
-

A. The following must be in the case record in order to expedite permanency through adoption:

1. A certified copy of the order terminating parental rights, voluntary surrender including certified Medical/Social History and guardianship order and custody order;
2. Certified Birth Certificate;
3. Thorough birth family information including any known health/psychological issues;
4. Current narrative/social history/functional assessment;
5. Up-To-Date Medical Information including latest EPSD&T, documentation of any and all therapeutic information;
6. Original Social Security Card;
7. TN CARE provider and primary care physician;
8. Current School Information;
9. Siblings: Name, Age, Location;
10. Birth records.

B. Adoption services that need to be updated as the child's needs progress:

1. TnKids and REACT need to be updated to reflect information on child data, placement, legal status, LEA, goal changes, EPSDT, and Family Services Worker.

2. Child and Family Information: Ensure that all information concerning the child (medical history, development, family background including hereditary conditions about each relative, educational records, and placement history), physical descriptions and photographs are in the record.

Obtain all available medical and birth records on all past medical treatment from hospitals and physicals, dental records, psychological and psychiatric reports.

II. ASSESSING A CHILD FOR PERMANENCY THROUGH ADOPTION

- What:** Develop a plan of action for providing services to the child.
- When:** Once the decision is made that adoption services are in the best interest of a child.
- Who:** CFT members
-

A. Determining Appropriateness for Adoption/Permanency

Ensure all children are considered for adoption and factors such as age, sibling group membership, minority status, or mental/physical/emotional challenges are not seen as barriers. Critical issues which also must be assessed include attachment, trauma, and developmental issues. (WA: Critical Issues in Assessment, Trauma, and Developmental Issues)

B. Assessing Early Permanency

Ensure children who may be at legal risk of termination of parental rights and/or for whom reasonable efforts for reunification are not required are considered for placement with a family who can make a permanent commitment should the child become free for adoption. If a child is in a foster home, assess the willingness of the current foster family to adopt.

C. Mementos/Pictures

Collect special mementos of the child's past including pictures of and physical description of the parents, school pictures, pictures of birth relatives, school report cards, awards, photos of resource families, and family services worker.

D. Visitation

Visit the child in a familial environment to become aware of the child's personality and temperament, reactions to people, interest, special aptitudes, likes, dislikes, fears, adjustment in the foster home, and the foster parent's understanding of the child to implement the goal of adoption.

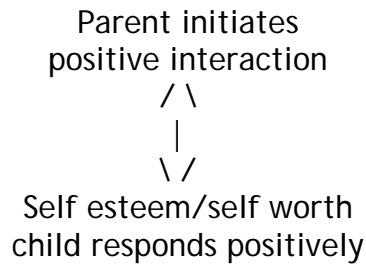
Work Aid: CRITICAL ISSUES IN ASSESSMENT: ATTACHMENT, TRAUMA, AND DEVELOPMENTAL ISSUES

Attachment

1. Attachment is defined as:
 - a. Reciprocal, enduring, emotional, and physical affiliation between a child and caregiver (James, 1994).

Or

 - b. "An affectionate bond between two individuals that endures through space and time and serves to join them emotionally." (Kennell, 1976).
2. A child with attachment issues might make one feel:
 - a. Drained
 - b. Shut out/excluded
 - c. Angry/irritated
 - d. Conned/used/fake
3. The arousal relaxation cycle illustrates the formation of attachment. Another way of understanding the development of attachments is through looking at the responsibilities of attachment figures. A child has a preferred or primary attachment figure. This attachment figure is responsible to:
 - a. Protect - everything is okay, I'll take care of you, set limits, keep you safe;
 - b. Provide - source of love, food, shelter, excitement, soothing, and play;
 - c. Guide - teach how the world works, help define identity.
4. Attachment is a relationship which is mutually gratifying or one which has reciprocity. The arousal relaxation cycle is initiated by the child. Attachment behaviors also need to be initiated by the caregiver. This is reflected in the Positive Interaction Cycle. (Copyright 1979, Vera Fahlberg, M.D.)



5. A child's capacity to form a trusting relationship with a caregiver is the basis for the child's future development. The ability to form a trusting relationship is embedded in the child's history and impacted dramatically by three factors:
 - a. Whether there is evidence of a nurturing experience free of separations/hospitalizations in the first three years of life - and the general quality of care received;
 - b. Whether there has been incidence of neglect/abuse/trauma - if so what was the duration, who abused/traumatized? All of these issues are indicators of the potential impact on the child;
 - c. When the child has experienced separation or abuse/neglect, has this been compensated for by a genuinely nurturing or renurturing experience? Example: a relationship with a caregiver which meets the child's emotional needs at the developmental level where they are functioning or where they may have gotten "stuck" as a result of past issues.

6. All children in the foster care system are at risk of having attachment difficulties. "The Children's Garden Attachment Model" (Carson and Goodfield, 1988) states that the three major areas in assessing attachment potential are:
 - a. Reciprocity - Does this child give emotionally? Can this child let anybody matter to him? Can he respond to affection?
 - b. Separation response - Is there response to possible or actual loss or separation?
 - c. Ability to explore - Is the child curious about his/her environment? Is the child free enough to take the risk inherent in learning and mastering new tasks?

7. Children are rarely totally unattached or totally securely attached. Rather their attachment develops along a continuum and represents three levels of attachment as described by Ainsworth as:
 - a. Insecure/Avoidant - the child tends to avoid the parents and feels safer in reading environmental cues and maintaining a state of self-sufficiency.
 - b. Securely Attached - the child feels safe in their relationship with parents which enables them to be responsive and to take risks.
 - c. Insecure/Anxious or Ambivalent - the child tends to be clingy while at the same time resistant to parental guidance. This is a kin to a toddlers stage of development.

Trauma (James, 1994)

In addition to attachment issues, many children in care have experienced trauma.

1. Trauma is described as a real or perceived threat to survival, which overwhelms a person's coping ability and results in a feeling of helplessness, total loss of control and instinctive arousal which may be a chronic or one-time experience.
2. The nature and impact of trauma depends on the age, experience, mobility, freedom to act, verbal ability of the child and the availability of attachment figures who may be supportive.

The loss of a primary attachment figure (or prolonged unavailability) can itself be experienced as trauma, as the figure, for a very young child represents survival.

3. When the child is also abused by that key attachment figure, the child is coping with:
 - a. The pain itself;
 - b. The confusion of experiencing the potential of both danger and safety in one person;
 - c. The ultimate fear of the total loss of that key attachment figure.

4. There are four major categories of response to trauma, all of which have implications for the child's ongoing development and behavioral characteristics.

These are:

- a. Persistent fear state: the body's instinctive physiological arousal to the experience of stress and fear can actually alter the development of the brain functioning in a young child by impacting neurotransmitters. These are three typical responses:
 - i. Fight: A very young child might cry or strike out; behaviors later in life might be regressive tantrums or aggressive behavior.
 - ii. Flight: a young child or a child who is powerless to physically leave a traumatic situation may instead disassociate, or mentally "leave" the situation.
 - iii. Freeze: When danger is inevitable the victim may seek to escape being noticed by the perpetrator by becoming "invisible" or immobile, like "playing dead" or blending into the surroundings in the animal kingdom. A child who has reacted to trauma in this manner may always respond to stressful situations by "slowing down" and becoming less and less active in the face of increasing demand. This child is often described as "oppositional-defiant".

General behavioral responses to persistent fear are: hypervigilance, irritability, anxiety, physical hyperactivity, exaggerated startle response and extreme regression.

- b. Disorder of Memory: Traumatic experiences may be "stored" differently in the memory than ordinary experiences. They may be partially or fully unavailable to the conscious memory. These memories may unexpectedly reappear in the child's later life as:
 - i. A flashback, which is a total re-experiencing of past situation, or a response to a cue or trigger, such as a smell, a place, a situation or a feeling. The child may not be able to consciously link the response to the situation without work to process the trauma.

Additionally, the child may have developed the automatic response of disassociation in response to stress.

Behaviors in children who have experienced disorders of memory may include lying, withdrawal, unexplained aggression, "spaciness".

- c. Problems regulating affect may result in a child who has chosen to remain emotionally numb as a self-protective measure in the face of trauma. This child may exhibit an all-or-nothing emotional style; the only alternative for expressing feelings may be an emotional outburst. This child has not learned to identify, verbalize, or even regulate his or her own feelings. This child might appear to be depressed, anxious, defiant, uncooperative.
- d. Avoidance of intimacy is a response of a traumatized child who has experienced closeness as being linked to experiences that are harmful and represent loss of control.

These children are very difficult to parent and avoid intimacy through behaviors such as clinginess, hyperactivity, avoidance of eye contact, disgusting habits.

- 5. Because the loss of the attachment figure may be equally as terrifying to the child as a traumatic event, children who have experienced extreme trauma at the hands of their caregivers often seek to preserve the relationship by altering their own behavior. They develop a trauma-bond with the caregiver, which has all the power of an attachment, but which is based on terror rather than trust, is geared to meet the needs of the adult rather than the child, and blocks rather than promotes the development of an autonomous self. Because the trauma-based relationship is based on intermittent reinforcement, it is very strong and resistant to change.

Developmental Issues

The child's development is likely to have been impacted by inconsistent caregiver relationships, multiple experiences of separation and loss, and trauma. When utilizing formal and informal methods of assessment, it is important to assess the child's current developmental functioning in several dimensions. Cues to a child's developmental level are found in looking at the ages in which significant separations or traumas occurred for the child. Issues which may be observed in a child in placement include the following:

- Physical: A significant factor in a child who is otherwise physically "normal" is coordination, which may affect a child's ability to compete and participate in peer activities.
- Emotional: A child's emotional development may be assessed by observing how they cope with stressful situations, their predominant modes of expressing feelings, their capacity to allow adults to comfort them, their ability to

modulate their own feelings, their tendency to verbalize and/or act out their feelings, what feelings they always or never express, circumstances or events which precede expressions of specific feelings.

- Social: Children who have experienced loss and trauma frequently have poor peer relationships. Control issues may result in children being “bossy” or having a tendency to take on either victim or victimizer roles. Poor self-esteem or attachment issues may result in “clingy” or distancing behavior.
- Educational: In addition to factors noted in formal measures of educational abilities, language issues occur frequently in children with developmental issues. Expressive and receptive language develop in relation to responses from caregivers. Delay in these areas interferes with school performance as well as expression of feelings and peer relationships.

Source Materials:

James, Beverly, 1994. Handbook of Treatment for Attachment-Trauma Problems in Children. Lexington Books, New York.

Ainsworth, M.D.S., Blehar, M.C., Waters, E., & Wall, S. (1978). Patterns of Attachment: A Psychological Study of the Strange Situation. Hillsdale, NJ: Lawrence Erlbaum.

Carson, M. and Goodfield, R. 1988. The Children’s Garden Attachment Model in Challenging the Limits of Care. Eds. Small, R.W. and Alwon, F.K.,

III. PREPARING THE PREPLACEMENT SUMMARY

- What:** Prepare the Preplacement Summary for each child being placed for adoption.
- When:** Within 60 days after the child is identified as needing adoption services.
- Who:** Permanency Specialist or Family Services Worker providing services to the child
-

A. Preplacement Summary

The preplacement summary is prepared by the Family Services Worker or Permanency Specialist serving the child. Document whether the child is “special needs” according to the criteria listed in [Policy 15.11 Adoption Assistance](#).

For children not being adopted by foster parents, follow the entire summary outline in WA: Preplacement Summary Outline.

For children being adopted by foster parents, exclude Section II from the Preplacement Summary outline.

B. Using Positive Terminology

Review the birth/legal family information and ensure circumstances are reported in the most positive but accurate manner. Describe behavior rather than using terms such as prostitute, drunk and drug addict. The diagnosis of medical or mental issues must be documented and shared as they could impact caring for the child.

C. Updates

Prepare a dated supplement to the Summary as needed but no less than every six months. Review and sign the summary prior to each preplacement conference to assure accuracy.

D. Distribution:

Submit the Preplacement Summary to the team leader for review and approval. File the original and one copy in the child’s case record.

Work Aid: PREPLACEMENT SUMMARY OUTLINE

Preplacement Summary for:

Child's Name: _____

Race: _____ Sex: _____ Birth date: _____

Prepared by: _____ (Name of Family services worker)

Date Prepared: _____

I. Referral

Identify how and when the child became known to the agency and the reason for foster care. Include the exact date of custody and the dates of any CPS investigation.

II. Description of the Child at the Present Time

A. Provide a physical description of the child and a brief description of what makes this child the unique individual he/she is.

B. Provide information on child's present routines, activities, and capabilities.

When appropriate, the following areas will be addressed:

1. Eating Routines

What are the usual times for meals? What are his/her particular likes/dislikes? Does he/she stuff, is he/she picky? Are there any eating difficulties, how are his/her table manners? Have eating habits changed in this foster home?

2. Sleeping Routines

What are the usual waking and bed times? What is the child like when he/she awakens? Is he/she hard to get up? What mood is he/she in? Does he/she play quietly/demand attention? Does the child fuss about going to bed, fall asleep easily, quickly, does he/she sleep with a special object, is there a ritual at bed time (singing, rocking, story telling)? What is his/her favorite sleeping position? What does he/she wear to bed, what type of bed does he/she sleep in, does he/she share a bedroom, is there a nightlight/music? Does he/she sleep all night, wander, sleepwalk, have nightmares, talk in his/her sleep? Does he/she take a nap and is he/she used to quiet or noise at nap time?

3. Self Help Skills

Does he/she dress himself/herself, pick out his/her own clothing? Does he/she bathe himself/herself, usual bath time, brush teeth himself/herself or does he/she need reminding? Does he/she feed himself/herself, drink from a glass, use table utensils?

4. Toilet Habits

Is the child toilet-trained, what are the words he/she uses when referring to toileting. When does he/she usually have bowel movements? Has he/she had trouble with constipation/diarrhea? If so, what is the frequency, and how is it handled?

5. Play/Social Activities

What does the child like to do with spare time? Does he/she like to play alone or with others? Does he/she prefer outdoor or indoor activities? Does he/she have favorite games/toys or playmates? What kind of play does he/she avoid? Does he/she prefer small or large muscle play? How much television does he/she watch, shows he/she prefers. How does he/she relate with peers, and what is the quality of friendships?

6. Speech

How well does the child communicate, does he/she make himself/herself understood? Are there special body postures, speech habits? Can he/she talk about his/her feelings?

7. Personality

What does the child think of himself/herself? How does he/she handle stress, happiness, anger, failure, disappointment, physical and psychological pain, anxiety?

When is he/she happy, unhappy, grouchy? What comforts and scares him/her? How does he/she react to meeting new people? With whom has he/she been close, and who are the significant others in his/her life?

8. Functioning in the Family

How has the child adjusted in the current foster home? How does he/she respond to usual requests, routine chores and expectations? What has been the method of discipline? How does he/she respond to touching, hugging, kissing, expressions of affection? Does he/she initiate affection, does he/she like parents to initiate affection? Does he/she have a preference for men/women? Does he/she need a lot of approval? How does he/she seek approval?

9. Therapeutic Issues

Does he/she bed wet, soil, lie, steal? Act out sexually, masturbate? How does he/she control impulses? How does he/she care for personal and others' possessions?

10. Sex

What has the child been told of sex? Does he/she talk of sex? Has there been any sexual experimentation?

11. Fears

What specific thing is the child afraid of? How does he/she handle this fear? What is his/her experience in relationship to animals?

12. School/Work Experience

What schools/special classes has the child attended? What is his/her present school grade? Is he/she strong, weak, average in academic skills? How well does he/she get along with authority figures? Has he/she had any problems in school, what has been done to resolve them? How does he/she get along with other children, does he/she have friends? Will he/she probably graduate from a regular high school? Would vocational, technical, or college training be appropriate? Request pictures, report cards, mementos. Describe any work experience the child may have had.

13. Travel

Does the child enjoy travel by car, bus, train, airplane? Is he/she accustomed to going to the store, church, visiting? Are there things that frighten him/her about going out?

14. Health

Has the child had any major illnesses, what childhood diseases has he/she had? What shots and immunizations has he/she had? Is he/she taking any medicine? What medicine has he/she taken? Has he/she had any reactions to medication? Has he/she had an operation, is there a future operation indicated? How does he/she react to doctors?

III. Developmental History

A. Medical Birth History

Include all data and information from medical birth records, including information about the birth mother's course during pregnancy, medications used, type of delivery, complications, neonatal course, etc.

B. Parenting and Placement History

Identify who cared for the child from birth to present (birth parents, birth relatives, foster parent, other) indicating duration and the quality of care.

It is particularly important to identify whether the child had one parent figure or a succession of parental figures. Describe childcare methods and paternal attitudes regarding giving social stimulation by holding, talking to the child, providing toys, play equipment, exercise, and protecting the child from safety hazards. Was the child isolated, emotionally deprived by being allowed to cry for long periods, left in the crib, fed irregularly or improperly, or punished? How was the child treated when ill? Describe any illnesses, injuries, or deviations from normal. Describe the child's characteristic way of responding to people and situations.

C. Development

Identify child's growth and development from infancy to present. Such information can be obtained from previous/current caregivers, medical reports, Denver Development Scales, worker observations and includes the age of the child's firsts (smiling, cooing, held head up, turning over, first tooth, crawling, cruising, walking alone, first word, first sentence, potty training, self help skills), as well as information on motor coordination (agile,

clumsy), peer interaction, relationships, what he/she has mastered (names of colors, animals, numbers, reading, math, etc.) and at what age these skills were mastered. Indicate both the child's chronological age and developmental level.

IV. History of Trauma

Identify incidence of deprivation; abuse; sexual abuse; indicating dates by month/year; descriptions of perpetrators, names, and relationships to child, impact on the child and the opportunity the child has had in healing.

Details of incidences of abuse, where, when and how the abuse occurred are helpful in identifying possible triggers and in making placement decisions.

V. Attachment Capabilities

Assess the child's anticipated attachment potential based on an evaluation of moves, traumas, present functioning and nurturing experiences. (WA: Critical Issues in Assessment: Attachment, Trauma & Developmental Issues)

VI. Medical History

Record of immunizations, illnesses, handicapping conditions (emotional, mental, physical), expenses involved, length of needed treatment, extent of limitations of activities or interference with educational, social, or vocational functioning that may be expected. **NOTE:** If this is a foster parent adoption, include information listed in #14 of Section II.

VII. Psychological/Psychiatric/Educational Evaluation

Provide dates of all psychological and/or psychiatric evaluations and attach copies of the evaluations. Provide a brief summary indicating the child's educational functioning, diagnosis, prognosis and assessment of the need for ongoing services.

VIII. Hereditary Conditions

Identify those conditions which are known to be hereditary or may have an effect of future development. The advice of appropriate consultants is important in determining what such risks are and how to interpret them.

IX. Family Background

The description of the birth family is to provide an insight as to the family lifestyle/functioning, their strengths and understanding their weaknesses.

A. Maternal Family

Individually identify the birth mother, grandparents, aunts/uncles, great grandparents and any known relatives by: full legal name, birthdate, height, weight, race, national heritage, physical description, religion, educational level, employment history, social functioning, special abilities, and health history.

Provide the last known residence for the family members and their knowledge of the child being placed for adoption. If any family member is deceased, indicate age and reason of death, if known. Some health conditions to inquire of are: alcoholism, hypertension or high blood pressure, diabetes, convulsive disorders, heart disease, sickle cell anemia, respiratory ailments, vision/hearing problems, cancer, blood disorders, mental illness and mental retardation. If any conditions are present within the family, indicate severity and reliability of information. If a family member is identified as having mental retardation, include diagnosis. Also indicate whether this stems from genetic or cultural reasons based on the diagnosis/professional reports.

B. Paternal Family

Same as for maternal background.

C. Siblings to the Child

Individually identify all full and half siblings by full legal name, birthdate, physical description, residence (with birth family, foster care, adoptive home), health status, social functioning, and knowledge of and relationship to the child being placed for adoption. If siblings are separated through adoption, state the plan for ongoing contact. (CR: Documenting Separation of Sibling)

X. Reason for Adoptive Placement

Where possible, preserve the birth parents' stated reasons for adoption. Identify the feelings experienced by the birth parents in making the decision. In all situations explain the underlying reasons the parent role could not be assumed. Also indicate what the birth parents' preference may be toward the child if he/she desires seeing them when he/she is an adult.

Indicate if the child should continue contact with birth relatives and the plan for this contact.

XI. Birth Verification

Provide Birth Certificate number and information given on the certificate.

XII. Legal Status

Identify date, court where each parent voluntarily surrendered and/or had parental rights involuntarily terminated.

XIII. Child's Readiness for Adoption

Indicate how the child has been prepared for adoption, his/her understanding of adoption, the desires the child has for and in a family, his/her attachments to the present foster family, the foster family's interest in adopting and their ability to help the child move. Also indicate the preplacement activities seen as needed, e.g. visits in the foster home, number of preplacement visits needed.

XIV. Placement Recommendations

Identify the type of family needed for the child. If a family has already been selected or if the foster parents are adopting, so indicate. When applicable, speak to placement considerations involving siblings (placement together, separate homes, continuation of contact), and the child's eligibility for adoption assistance or deferred adoption assistance.

The Preplacement Summary is to be signed and dated by the Team Leader.

IV. PREPARING THE PRESENTATION SUMMARY

What: Prepare the Presentation Summary for the prospective adoptive family.

When: After completing the Preplacement Summary and prior to presentation of the child.

Who: Permanency Specialist and Family Services Worker

A. Identifying Information

Review the Preplacement Summary and prepare the Presentation Summary by deleting all child and birth/legal family identifying information, i.e., names, addresses, places of employment, dates and names of courts where parental rights were terminated, places of residence, and other identifying information.

B. Using Positive Terminology

Review the birth or legal family information and ensure that circumstances are reported in the most positive yet accurate manner. Describe behavior other than using terms such as prostitute, drunk or drug addict. Diagnosis of medical and mental issues must be shared as they could impact caring for the child.

C. Interpretation

Review the child's information for medical or behavioral descriptions and ask the family to obtain interpretations from medical source.

D. Approval

Request that the Team Leader review and sign the Presentation Summary for approval.

E. Distribution

File the original Presentation Summary and one copy in the case record.

F. Adoptive Family

Share a copy of the Presentation Summary with the adoptive family at the time of the oral presentation. Also include copies of non-identifying medical, psychological, and psychiatric reports. If the placement does not occur, retrieve Presentation Summary and all attached reports from the family.

V. CONSIDERING DIRECT PLACEMENT OF NEWBORNS

What: Consider a direct placement for an infant.

When: The birth/legal parent requests adoptive placement and prior to terminating parental rights.

Who: Family services worker or designated staff providing services to the birth parent.

NOTE: Consider every expected infant or newborn for a direct or early placement to help the child bond early to permanent parental figures and to minimize the emotional trauma of repeated separations.

A. Parental Decision

Ensure that all parents have:

1. Decided on direct placement;
2. Had counseling;
3. Explored all alternatives;
4. Emotional/mental capability of making a decision.

NOTE: If the father has not been a part of the decision, verify that he is not entitled to receive notice of the adoption or verify that grounds for prenatal abandonment exist. Check with legal if there are questions about this.

B. Medical Evaluation

Evaluate the following criteria to help determine if the child may have special needs:

1. Prenatal care/events;
2. Birth/legal parents' alcohol/drug usage;
3. Family history of birth defect or mental retardation and causes (genetic/environmental);
4. Any significant family social/medical history, any significant medical conditions of the newborn.

C. Legal Planning

Ensure that the following methods for obtaining legal guardianship is clearly defined:

1. Arrange for all legal parents to voluntarily surrender parental rights;
2. Arrange for the alleged father(s) to sign a waiver of interest;
3. Verify that upon the child's birth, the mother will sign an affidavit swearing to the father's lack of support;
4. Initiate the process of termination of legal or named father's rights on the basis of prenatal abandonment.

D. Review/Approval

Submit the Preplacement Summary and case record which documents all pertinent information to the Team Leader for review and approval of direct placement.

VI. PREPARING THE CHILD FOR ADOPTIVE PLACEMENT

- What:** Prepare the child for adoptive placement by ensuring that the child moving into adoption has the opportunity to understand the reason for separation from the birth family, experiences since entering foster care, has the opportunity to grieve his/her losses, to understand his/her individual talent and skills, and to understand what adoption will mean.
- When:** CFT determines adoption is in the child's best interest.
- Who:** Permanency Specialist and/or qualified FSW
-

A. Birth/Legal Family Separation

Help the child understand feelings about his/her birth/legal family and explain why child cannot be with his/her birth/legal parents and why it was necessary for him/her to enter foster care. (An older child's initial reaction to adoption is often negative). (WA: Suggested Preparation Techniques, WA: Getting Prepared for the Life Book Journey Involving the Caregiver, WA: Getting Prepared for the Lifestory Permission to Travel and CR: Family services worker Procedures Manual)

B. Blessing Message for Separation from the Birth Family

Provide the child with a blessing or disengagement message (preferably written) which will enable the child to move forward. Identify the tools and techniques needed to facilitate and deliver the disengagement message or blessing. (WA: The Separation - The Blessing Message from the Birth Family)

C. Permanency

Help the child see his/her entitlement to a permanent family and benefits that come from having an adoptive family, especially if he/she has experienced multiple foster care placements or an unsuccessful adoption.

D. Foster Parent's Role

Consider the child's foster parents as potential adoptive parents based on the child's best interests. If that is not possible, identify ways the child's foster parents may help in the adoptive placement process.

NOTE: Foster parent adoptions are often best for a child because of the existing emotional relationship and the decrease in the number of placements for the child. Therefore, the longer the child remains in the foster home, the greater priority DCS gives to maintaining the relationship. Also, consider the child's best interests in determining sibling(s) placement.

E. Foster Home Separation

Help the child understand and resolve feelings about moves from the foster home, including why the foster parents cannot adopt and/or why he/she cannot stay in the foster home.

F. Blessing Message for Separation From the Foster Family

Provide the child with a disengagement message (preferably written) to help the child move forward. (WA: The Separation: The Message from the Foster Family)

G. Adoption Process

Help the child understand adoption, what it means, how it differs from foster care, and the adoption process.

H. The Cover Story: Helping Children Explain Their Placement

Assist the children in explaining who they are, how they came to be living apart from their birth families and how they came to be with their current family. (See WA: The Cover Story)

I. Siblings

Help the child understand adoptive plans for his/her siblings.

J. Contact with Significant Others

In the placement of older children it is recognized they may have strong ties to significant others where ongoing contact after adoption may be of benefit to the children. A significant other may be birth family member and/or foster family relationships. Such ongoing contact serves the child's need for a sense of continuity with linkages to integrate their past, present, and future.

DCS is committed to evaluating the best interests for children in maintaining contact with birth relatives and significant others through adoptive placement. Determination of the best interests for children is based on the quality of the relationship and all parties reaching a mutually agreeable plan for the contact.

K. Involving the Child/Youth

Engage the child in the process of adoption planning and Life Book work based on the child's developmental level.

For children too young or otherwise unable to engage in the process, the Family Services Worker or resource parent for the child will ensure the completion of a Life Book.

Work Aid: SUGGESTED PREPARATION TECHNIQUES

The following techniques are casework tools in helping the child understand his/her past and what is being planned for the future.

The process focuses on building the child's self-esteem. When siblings are involved, identify placement plans for each of them, e.g., adoption, foster care. Determine the depth of information to provide based on the child's level of understanding.

Play Interviews

Use a play interview with the child in order to discuss topics, explain information and evaluate the child's understanding and readiness for adoption. Based on the child's level of understanding, play interviewing involves the same techniques associated with verbal counseling, such as support and confrontation. However, the Family Services Worker relates to the child through play (particularly useful in reaching children with limited verbal ability).

Play interviewing may involve drawing, playing house, acting out situations, etc. Whatever play you plan, make sure that resources such as paper, crayons, blocks, doll houses, doll families, etc., are available.

Baby Books

Initiate the development of a baby book for an infant being placed for adoption. Request that the foster family continue to keep the book to record the child's important milestones, likes and dislikes, and photographs at various ages. Emphasize that the foster family should not use the term birth/legal mother, but rather "first mother", "mother", or parent's first name. At the time of adoptive placement, review the book to delete any confidential or identifying information. Baby books are to be given to the adoptive family at the time of placement. Encourage the adoptive family to preserve and update the book.

Life Books

The child's Life Book, kept by the child and prepared with the assistance of the Family Services Worker, and the foster parents, is an excellent tool to use in preparing the child for adoptive placement.

The Life Book, containing pictures and mementos, helps to build a child's identity. The book can clarify misconceptions about the child's past, and the counselor's reviewing the Life Book with the child can assist him/her in expressing feelings about the past.

The adoptive parents' review of the Life Book with the child and Family Services Worker becomes a bridge between a child's biological past and his/her new family and helps the child accept his/her past.

Ask for the older child's cooperation in creating a Life Book to help understand his/her past and present placement and to prepare the child for adoption. Emphasize that the foster family should not use the term birth/legal mother, but rather "first mother" or "Sally".

Consider the following suggested items:

1. Pictures or description of:
 - a. Birth/legal family, including grandparents and siblings (if appropriate)
 - b. Foster family
 - c. Special activities (holidays, birthdays)
 - d. School pictures
 - e. Friends, classmates
2. Newspaper clippings
3. Preschool records
4. Kindergarten records
5. Teacher's comments
6. Accomplishments
7. Certificates
8. School records and activities
9. Report cards
10. Awards
11. Religious Mementos and Certificates
12. Family genealogy, mementos, and visits
13. Any material of significance to the child

When identifying the relative, do not use the surname; use the first names only or such terms as first mother, etc., unless the child is school age and knows his/her surname.

Use these materials and, perhaps, the child's drawings to help the child complete his/her Life Book. Write or help the child write a history of his/her life that:

1. Depicts a feeling for and description of the birth family;
2. Explains the reason for and meaning of foster care;
3. Identifies each foster care placement the child experienced and why each placement ended;
4. Indicates something about the child's likes, dislikes, and what he/she is like as a person.

Review the book with the child and adoptive parents during visitation. At the time of placement, the child takes his/her Life Book. Later, sharing the book with the family

and updating it will help the child achieve acceptance and bonding with the adoptive parents.

Work Aid: GETTING PREPARED FOR THE LIFE BOOK JOURNEY INVOLVING THE CAREGIVER

1. Acknowledge the significance of the caregiver in the child's life as a source of nurture, support and information.
2. Describe the Life Book process to the caregiver, in person or by letter.
3. Review what the child does when upset (behaviorally, emotionally) and what helps the child gain control or feel comforted.
4. Engage the caregiver in describing how the goal of adoption is appropriate for the child.
5. Have the caregiver describe the type family with whom the child may best be able to integrate.
6. Request the caregiver to share mementos, photos, description of child's strengths/challenges.
7. Help the caregiver cope with feelings of potential loss if they are not adopting the child.
8. Prior to or after each session with child, discuss the support child may need from the caregiver.
9. Include caregiver in chosen sessions when the plan is adoption by the caregiver.
10. Provide the caregiver with a calendar which shows appointments with the child.
11. Establish a routine with the child where a self report of each session is shared with the caregiver in a way which respects the child's right of confidentiality.

Work Aid: GETTING PREPARED FOR THE LIFE BOOK JOURNEY PERMISSION TO TRAVEL

Dear (Foster Parent):

I am excited about the opportunity to prepare Doug for adoption and create a Life Book. As we discussed, Doug and I will meet together every Wednesday when he gets out of school at about 3:00 p.m. for the next few months.

Doug and I will talk about information and feelings around why he needed to come into foster care and what being in foster care has meant to him; what makes Doug so unique; and what he may want in an adoptive family. This process may bring out feelings of happiness, sadness, anger or confusion. I will be helping Doug with these feelings and you will have an important role as well. You know how Doug expresses his feelings and what is helpful for him. I anticipate talking with you regularly. Please call anytime.

Also, you are important as you have cared for Doug for 3 years. You have a lot of information about his development, what he enjoys, and what he has accomplished. Of course, any mementos or pictures that you can provide for his book are appreciated.

I will also be available to help you anticipate your feelings as Doug moves into adoption. He has become a significant part of your family.

Enclosed is a calendar which shows our appointments. Please let me know if there are conflicts with any of these dates.

Sincerely,

Susie Social Worker
Family Services Worker

Work Aid: THE SEPARATION: THE BLESSING MESSAGE FROM THE BIRTH FAMILY

1. A major step in dealing with children's separation from the birth family is to ensure that they feel that they have permission to develop a relationship with a caregiver in a parental role free of conflict with the loyalty they may feel toward the biological parents. This is accomplished through the disengagement message or blessing.
2. The three elements of a disengagement message are:
 - a. Acknowledgment of caring/being valued as an individual;
 - b. Lifting of responsibility for separation;
 - c. Permission to child to form new attachments, to give and to receive love, to be happy.
3. It is the responsibility of the Family Services Worker to obtain a disengagement message either directly or indirectly from the biological parents and all significant attachment figures.
4. The family services worker has several tasks in obtaining a disengagement message whether direct or indirect from the child's former caregivers, including the biological family - mother, father, siblings, other relatives. These tasks are:
 - a. Deciding from whom a message is necessary;
 - b. Deciding whether the message can be direct or will need to be indirect;
 - c. Preparing the caregiver and getting the message;
 - d. Delivering the message.
5. The first task is to determine the people to whom the child has a significant attachment or bond of loyalty. This always includes the biological mother no matter what the quality of the attachment or bond of loyalty. Through Life Book work children will indicate who else has particular significance for them. It is important to include anyone for whom the child feels responsibility such as siblings, elderly/ailing grandparents.
6. The second task is to determine whether a message can be direct or will need to be indirect. Direct messages are the most powerful and include letters, audio tape messages, video messages, final visits. They may also include statements the individual made directly to the child.
7. Direct messages do not usually involve contact between the child and significant others. Messages involving contact with the child are most likely to be manageable at the point of termination of parental rights or surrender and when the parent has been visiting regularly and is in agreement with the

adoption plan. Final visits may provide the opportunity for the parent to express their wish for the child to move on and be happy and well cared for in a new family. This often occurs when the birth parent has become acquainted with the foster parent who is planning to adopt. Usually contact is not reestablished between the parent and child when they have not been visiting for a period of time, as this would be confusing for the child. Contact may be appropriate with other birth relatives who are non-threatening and are supportive of the adoption. Direct messages are generally delivered through the Family Services Worker in the form of a tape or letter from the important individual.

8. Indirect messages are based on interpretation of parental or other caregiver actions or statements. These may be found in the case record or gleaned from information in the record, statements from other family members, and by helping the child to discuss what he\she thinks the caregiver may have wanted for the child in the future. Indirect messages are necessary when the caregiver cannot be located, is unwilling, or incapable of working with the Family Services Worker to prepare a positive message. When this message is understood by the child, it should be documented in the child's Life Book.
9. The third task the Family Services Worker has is to prepare the caregiver and request the disengagement message or blessing. To facilitate the message the family services worker establishes supportive and respectful contact with the person. Usually these individuals are responsive to a Family Services Worker who can acknowledge their feelings of caring for the child and is concerned enough to find them and provide them the opportunity to tell the child that they truly care for them. The caregiver will need help to frame and construct a positive message. One approach is for the Family Services Worker to take notes of the conversation with the caregiver and to state back to the caregiver all the positive statements made, suggesting this may be what they want to write in a letter. In some circumstances, the Family Services Worker may need to write the letter and confirm that it is accurate and ask if they want to sign it. A video or audio tape is appropriate when the caregiver is capable of giving a statement which contains the elements of a good disengagement message.
10. The fourth task the Family Services Worker has is to deliver the message to the child. Receiving a disengagement message given by the birth parent or primary attachment figure is likely to be a powerful emotional experience for the child. The child needs support and encouragement to express feelings. Frequently the message will be reviewed several times and each time the child will be able to incorporate a deeper sense of entitlement to a family through adoption and permission to move into the future with hope. The message has a twofold effect, removing the fantasy of reunification with the birth family/foster family and providing a path for future connectedness

with a family intended to be permanent. It is the goodbye which enables the hello.

11. Receiving an indirect message is not as powerful for the child as these messages are framed by the Family Services Worker for the child. It is important to state directly that, "your mom/significant other showed caring for you in these ways." The Family Services Workers careful explanation for the reason for the separation should focus on removing responsibility from the child. Sometimes another person who directly observed what led to the separation can reinforce the indirect message from the caregiver, for example, "your mom tried and just couldn't get off drugs". Then the discussion of these examples of caring move into "what do you think your mom/significant other wanted for you in the future?"
12. Parents who have abandoned the child know, on some level, they cannot plan for a child. Also, they may know that the system will plan for the child. Sometimes a parent knows that it is too hard to say goodbye but trusts the Department to plan for the child the way she/he may have liked to themselves.
13. It is critical, regardless of how this message is obtained, to formulate a clear statement that encompasses the three key elements. (See item two of this Work Aid).

Work Aid: SAMPLE BLESSING MESSAGE FROM BIRTH PARENT

Tina,

I am writing you this letter so you can read it and remember that I love you. I will always have a special place in my heart for you, because you were my first child.

I hope you can try to understand what a hard decision it was to surrender my rights to you and your brothers and sisters. I know I could not give you kids what you needed. That is why I left you with family and other people so many times. Remember, that time we lived in a car because we didn't have anywhere else to go? I felt bad leaving you kids with other people, but wanted you to have food in your bellies, and a roof over your heads. I tried to be a good parent, like taking you to get your shots before you started school, but we moved around so much though you hardly even went to school. I needed someone to help me.

When the Family Services Worker saw that I couldn't keep a job or find a place to live she asked me to think about surrendering my rights so you could have a permanent home. I had mixed feelings about it because I wanted to be your mother and raise you, but then I would think about barely being able to take care of myself, much less you kids.

I remember our visits at the office and seeing you look so pretty and healthy. It seemed like your foster family cared for you and could give you a lot of things I couldn't. I decided to say yes to the surrender, but then felt guilty and wanted to try again. But after six months, nothing had changed. I still didn't have a steady job or a place for you to live. I realized then that adoption was the best plan for you. I knew you didn't like being a foster child and thought you deserved a family of your own. I know I will always think of you, especially on your birthday, and wonder if you still look like me. I want you to be happy and I am sorry that you and your brothers couldn't be adopted all together.

With all my love,

Your 1st Mommy—Bonnie

Work Aid: THE SEPARATION: THE BLESSING MESSAGE FROM THE FOSTER FAMILY

1. A disengagement message, preferably written, should be obtained from the current foster family if they are not planning to adopt and from any past foster families to whom the child maintains a particular attachment or bond of loyalty. When foster parents are dealing with their own feelings around the child moving from their home it may be difficult to explain why this is occurring. The Family Services Worker can assist in this process by listening to their feelings and then helping them formulate a message expressing their hopes for the child.
2. Reasons for foster parents' decision not to adopt a child cover a wide spectrum. Some of the reasons frequently given are provided with a reframed explanation.

STATEMENT

REFRAME

We're too old

We are at point in our lives where we want to retire and do some things that would be harder to do if we were parents to any child.

The child lies and steals

You need a family who can help you learn how to feel safe enough to tell the truth and secure enough to know you can ask for things. We have tried to do this but haven't been able to. We want very much for you to have what you need.

The child can stay as long as he needs to but we don't want to adopt

It is our job to be foster parents, and we enjoy being your foster parents very much. We know that you need a permanent family of your very own. We will take care of you until you are adopted.

The child doesn't fit in with some or all family members

You know that not all families work well together. We have had times when it is hard for us to all get along. This is not necessarily anybody's fault. We want you to have a family where it is easier for you to get along.

The disengagement message would also include statements about what the family likes about the child and acknowledgment of feelings.

3. As a child processes the foster family's disengagement message the Family Services Worker can encourage the child to describe foster care placements that felt successful. This lays the groundwork for discussions about adoptive placement.

Work Aid: SAMPLE BLESSING LETTER FROM FOSTER PARENTS

Dear Joe,

I want so much to be able to give your love to a new family the way we have all given our love to you.

The DCS workers told us to raise you as if you were ours and that is what we have tried to do. We have loved you and corrected you and provided for you as if you were our birth child. That is why letting you go is so difficult.

You have given so much to our family. You have shown us how there is no limit to the number of people you can love with all your heart.

You are such a bright child and have such pretty eyes and smile. Please always share that smile with everyone you meet and look into people's eyes with those pretty eyes of yours. Always be proud and hold your head high. God made you for a purpose.

It is important that you learn to mind and do what your new parents want you to do. God gave us parents to take care of us until we are old enough to take care of ourselves. Please understand that it is a parent's job to help a child understand the consequences of his own actions.

I want nothing more than for you to grow up to have a heart full of love for yourself first because unless you learn to love yourself you can't love other people. You can't give away something you don't have.

I hope you bring your new family as much happiness as you have ours. My heart will always have a special place for you, Joe.

I love you so much,
Mama Jane and Daddy Bruce

Work Aid: THE COVER STORY: HELPING CHILDREN EXPLAIN THEIR PLACEMENT
(Donley, Kathryn S, MSW, Trainer/Consultant, National Resource Center
for Special Needs Adoption, August, 1978)

When children must live apart from their family of origin, whether in foster care or adoption, they need to master the telling of who they are and how they came to be living apart from their families. Placement workers, beset by the complexities of locating willing substitute families, grappling with the logistics of moving child and belongings intact to a new family, faced with a veritable blizzard of paperwork to approve and finance the plan, may overlook this problem. Before the dust has barely settled, the child will be called on to explain his person, his presence, and his history to a long list of inquirers. New neighbors, teachers, playmates, and acquaintances will ask questions about him and his status. Sometimes the questions will be casually asked; sometimes he will be grilled like a suspect. The child left to fend for himself in these circumstances is usually forced to say too much or too little. Sometimes he "embroiders" the truth and gains a reputation as a liar. Sometimes he volunteers lurid detail and becomes an instant, exotic attraction.

An experienced placement worker knows this in advance and equips the child with a cover story. (Please note: a cover story, not a cover-up story! In the business world, the cover letter is a generally-phrased, all-purpose letter used to summarize more elaborate information provided elsewhere.) In placement, the child can easily learn that his cover story, his short version of who he is, is an appropriate response when people ask him leading questions like: ". . . just where did you come from? . . . how come you don't live with your folks? . . . but who are you?" Without help in preparing the answers, the child founders. With help, he can respond confidently, truthfully, and yet avoid trapping himself into betraying private matters.

The easiest way to prepare a cover story with a child is to imagine the potential questions, review what is appropriate information to share, and role play questions and answers. This technique works with children of all ages, as long as they have basic language skills and can learn appropriate social responses. Preschoolers, teenagers, retarded children, even disturbed children, can all benefit from such help, as can the families caring for them. To provide the new family with background or current functioning information on a child to be placed and then leave the questions of appropriate handling of that information entirely to their good judgment is foolish. Excitement, surprise, or sheer foolhardiness can lead families into sharing intimate information about a child with people who have no business knowing these things. Placement families must always be warned about that impulsive phone call to a best friend or close family member. The simple trigger of a question like "Well? Tell me what the worker told you about him!" can result in confidence shared which can never be retracted. The child is stripped and betrayed even before placement.

It becomes the job of the placement worker to help the child and his new family anticipate the difficulties and organize a three-step defense:

1. Imagine the potential questions. Actually make a list of the various possibilities and the persons who may ask the questions. This helps the child and family see the relevance of an abbreviated version of the story. In the excitement and the fantasy surrounding the placement scenario, the everyday facts of living and forming new relationships may not loom large until it is too late and the child or family may be caught unaware and without defenses.
 - a. Imagine introducing the child to your neighbor;
 - b. Envision the first day of school and the questions asked by classmates and teachers;
 - c. Picture the first family gathering and the remarks made by new grandparents, cousins, uncles, etc.;
 - d. Consider the first day in the new neighborhood, playing with children who are understandably curious about the new child.

2. Review the appropriate information to be shared. Children often have trouble understanding the right to privacy. They need help to understand that not all people are entitled to detailed answers to all questions. They need help from adults to distinguish between what is known and what is shared. This is a good opportunity to help children learn how to be truthful but appropriate in giving answers to personal questions. It also protects them from disclosing information which might later be embarrassing to them or used against them in destructive or hostile ways.

Simple declaratory sentences are best: “. . .my name is Tony Johnson. . .I used to live in Cleveland. . .I’m gonna live here because my folks have problems. . .I hafta live here until things get better at home. . .I’m being adopted. . .I got adopted because I couldn’t live with my other family any more. . .”

Three basic responses are those most often needed:

- a. The child’s name (be consistent; use the birth name when the child is in foster care and the adoptive name once adoptive placement agreements are signed);
- b. The child’s origin (offer the basics only; most people who ask where the child comes from are satisfied with the name of a state or town, more detail is not necessary; children can be taught to deflect more probing by responding with a question of their own: “. . . and where are you from?);
- c. The whereabouts or general circumstances of the child’s biological family (the implication is usually clear, the questioner wants to know why the child is not with them; children can answer briefly and truthfully without providing details; if the questioner is persistent, the child should be comfortable in ending the conversation: “. . .

that's family business. . .I have to go now. . .my family would have to answer that . . .".

3. Role play questions and answers. Be sure the child knows the three most common concerns (as above) and can comfortably respond to questions about them. The family should be able to respond in accord with the child. A placement worker has a good opportunity to show the child and family they can cope with a new situation with confidence. Everyone feels more competent. They can share an essential social task in anticipating, analyzing, and solving a real-life problem. By acting out the possible questions and answers together, they come to grips with a current problem and learn more about each other. They develop a sense of unity. They "put a little more money in the bank account," meaning they accumulate some shared feelings to draw on later when difficulties arise between them. They may even see this as one good way to solve other problems.

Every child entering a new living situation needs this preparation. When it is a simple matter of a family moving to a new home, the answers to direct questions come easily. When the child moves because of family distress, the answers become more troublesome. Most children are not prepared to deal with the natural curiosity of other children and adults they will meet. It becomes the responsibility of the placement worker to help the child and his new family respond to the situation and the methods used can promote stronger ties between child and family and point the way toward resolving yet other problems.

Work Aid: CONTINUING CONTACT WITH SIGNIFICANT OTHERS FOLLOWING ADOPTIVE PLACEMENT

1. Identify the significant relationship maintained by the child prior to adoptive placement. Relationships to be considered may include birth parents, relatives, foster parents.
2. Assess the quality of the relationship based on: emotional attachment, stated preference for ongoing contact, quality of present contact, type contact now present, impact on the child of present contact, history of relationship/contact, the ability of the parties to work together on behalf of the child in adoption.
3. Based on the assessment determine: if ongoing contact will be in the child's best interest, what the stated desire is of the child and significant others for ongoing contact. Help all parties to understand the recommendation concerning the appropriateness of ongoing contact.
4. Assess with the child and with significant others the understanding of adoption, hopes for the future and obtain the disengagement message or blessing to move into adoption.
5. When ongoing contact is indicated prepare all parties to define roles, working relationships, and the type of contact determined to best serve the child.
6. The need for ongoing contact is an influential component in selection of an adoptive resource and when possible an adoptive resource will be pursued which can support the need for ongoing contact when this is appropriate for the child to be placed.
7. Prior to placement discuss with the adoptive parents recommendations concerning ongoing contact and determine the preference for contact and understanding of the impact this may have on the family.
8. Obtain the consent of all parties for ongoing contact, specifying the type of contact, frequency, and methods of arranging contact.
9. During the placement and post placement process assist in establishing working relationships, roles, usage of names, clarifying purpose/intent, negotiating problem-solving, extending support, and assessing results of contact.
10. Continue to monitor the impact of contact and if such contact should become contraindicated and a request made to cease contact, assist all parties in understanding why contact may be modified or ceased.

11. Assist the adoptive family in gaining empowerment to negotiate contact prior to finalization of the adoption.
12. Share with all parties services which may be available after finalization of the adoption.

VII. DOCUMENTING THE SEPARATION OF SIBLINGS

What: Documenting if the separation of siblings best serves the children in making permanency placements.

When: Separation of siblings is being considered.

Who: Family Services Worker/Permanency Specialist

A. Decision

NOTE: DCS places priority on placing siblings together. If considering the separation of siblings, carefully document in the children's case records the decision and the reasons for that recommendation. This decision needs to take place in the context of a Child and Family Team meeting. It is not a decision that should be considered lightly.

Reasons may include:

1. The dynamics of the relationship between the siblings is detrimental to one or all of them;
2. An evaluation which documents the quality of the bonding of the siblings;
3. Special needs of one or more of the children that would preclude any one family from meeting all the children's needs;
4. Long-term relationships with foster parents;
5. Older siblings who cannot accept adoption.

B. Sibling Contact

Document in the children's records a plan that would allow the children to remain in touch with each other through personal visits, correspondence, and telephone contact.

If continuing contact is not planned, explain the reasons in the record. This should occur in only unique cases.

C. Approval

Prepare a memo to the Regional Administrator/designee requesting permission to separate siblings for the purpose of adoption. The memo should include the reasons the separation is needed, the plan for sibling contact, and attempts

made to keep the siblings together. Once approval is secured, document this in each siblings record.

VIII. PLACING NATIVE AMERICAN INDIAN CHILDREN FOR ADOPTION

What: Place Native American Indian children for adoption.

When: Child has Native American Indian heritage.

Who: Family Services Worker providing services to the child

A. Determine Native American Indian Heritage

When the parent and/or child declare Native American Indian heritage, information about the parent(s)/child's heritage should be obtained, including:

1. Tribe membership;
2. Name of the tribe;
3. Registration or band number of the tribe.

B. Native American Indian Heritage Established

Placement planning will be directed by the tribe in which the child has membership.

C. Determine Tribe Affiliation - Tribe Is Known

Send the tribe a certified letter which includes the following information:

1. Identifying information, i.e., parent's names and birth dates, grandparent's names, child's name and birth date; reasons to believe the child is of Indian heritage;
2. Reason for foster care placement/adoptive planning;
3. Current court action/legal status of the child.

The tribe has ten days after receipt of your letter to notify the Department of their desire to be involved.

Tribe is Unknown

Prepare a letter which includes the following information:

1. Identifying information, i.e, parent's names and birth dates, grandparent's names, child's name and birth date;
2. Reason to believe the child is of Indian heritage;
3. Request the child's status as an Indian.

Send the letter, certified mail to:

U.S. Department of Interior
Bureau of Indian Affairs
Social Services
Eastern Area Office
1951 Constitution Avenue, N.W.
MS-711 BRYHIL
Washington, DC 20245

The Bureau has 30 days after receipt of your certified letter to notify the Department of the child's status as an Indian.

If notice is received that the child falls under the Indian Child Welfare Act, follow the steps listed under Tribe Is Known to determine their interest in and ability in planning for the child.

NOTE: Most requested addresses:

Cherokee Tribe East
P.O. Box 455
Cherokee, North Carolina 28719

Cherokee Nation of Oklahoma
Attn: Registration Department
P.O. Box 948
Tahlequah, Oklahoma 37765

Mississippi Band of Choctaw Indians
Route 76, Box 21
Philadelphia, Mississippi 39350

IX. REQUESTING A PERMANENT HOME

WHAT: Request referrals of approved resource parent(s) for consideration as a placement resource for children who are legally free.

WHEN: A permanent home is being sought for a child in DCS guardianship.

WHO: Permanency Specialist

A. REACT Child Entry Form:

When no home is immediately available or identified within the region, submit a [REACT Child Entry form](#), to seek match referrals of resource homes on a statewide basis.

B. Potential Family Matches

Within 5 days the REACT Program Specialist will screen for potential families. The families will be matched based on the following:

1. What the family has indicated as acceptable in terms of the child's age, sex and number of children if sibling group;
2. What the family has indicated as acceptable in a child's background and handicaps;
3. The identified needs of the child for placement and the family's ability to meet those needs.

C. Response from Search for Matches

Identified matches sent to Permanency Specialist within 5 days for review and consideration.

If no home is available, the Permanency Specialist will be notified within 5 days.

D. Contacting Potential Families

Within 10 days of a referral of a family, the Permanency Specialist will contact the potential resource families or family to determine if they are interested in this particular child and if they would like to be considered as a possible family for this child. If the potential family is interested in moving forward, the PS will notify the REACT Specialist and request that the record be submitted for the family to be considered as a placement resource for the child. If the

potential family is within Tennessee, the PS can contact the Placement Services Division responsible for this family to request the home study. Within 3 days of the family's decision not to be considered as a placement resource for the child, the PS will notify the REACT Specialist of this decision.

D. Identifying the Permanent Family

After potential families have been identified, the PS will convene the CFT to identify the permanent family. (Protocol: CFT for Identifying an Adoptive Family)

ADOPTIVE PLACEMENT SERVICES

I. IDENTIFYING an ADOPTIVE PLACEMENT

What: Adoption Permanency Guidelines for Identifying an Adoptive Placement.

When:

1. When TPR/Surrender of Parental Rights is being pursued and a child does not have an identified adoptive/permanent placement.
2. When a child comes into custody under the Safe Haven law.
 1. When a child comes into custody and is considered legal risk.
 2. For a child in full guardianship, within 30 days of notice from foster family that the child is not in an identified adoptive/permanent placement anymore. The team will convene monthly until an adoptive/permanent placement is found.

Who:

1. The FSW must contact the Permanency Specialist Team.
2. The Permanency Specialist will organize an Adoption Permanency CFTM.

A. Team Participants and Responsibilities:

1. Team Chairperson

The Team Chairperson will be the Permanency Specialist and will have the following responsibilities:

- a. Assist FSW in completion of pre-placement summary to ensure child's needs/strengths are fully documented.
- b. Assist team in identifying and/or clarifying adoption specific issues that may affect permanency such as loss and grief, sibling placement, bonding, etc...
- c. Facilitate the Adoption Permanency CFTM to ensure the group maintains focus on the child/youth's strengths and needs and remains objective about the information presented regarding the potential adoptive families.
- d. Secure location and notify team members of the meeting time and location.
- e. Ensure each team member obtains pertinent but non-identifying information regarding potential families.
- f. Articulating the role of each team member and ensuring each member is adequately represented in the discussion.

- g. Moving the team through the decision-making framework and guiding the group to consensus.
- h. Ensuring federal guidelines are taken into consideration such as ICWA, MEPA, IEPA, ASFA, and legal risk placement.

2. Child/Youth (by proxy)

Children/Youth shall have a voice regarding their desires for a permanent family; however, they shall not be made responsible for making adult decisions. Children/youth in need of a permanent placement shall be represented by proxy through any or all of the following methods that may be applicable to their case:

- a. The child/youth FSW
- b. The child/youth permanency specialist
- c. Applicable sections of the child/children's life book
- d. The Guardian Ad Litem
- e. CASA
- f. Child's Resource Parent

3. Family Service Worker

The child/youth's FSW will have the following responsibilities:

- a. Ensure each team member has a copy of the child's pre-placement summary completely describing the child's full life history (full disclosure) to include current strength/needs.
- b. Brings the child's life book and/or current pictures of the child.
- c. If the child/youth is served by a private contract agency, then the private agency staff and the DCS Family Service Worker will share responsibility for the aforementioned tasks.

4. Placement Support Worker

The Placement Support Worker will ensure the Team Chairperson receives a copy of the home study and other pertinent information on all potential families and be prepared to provide feedback.

5. Child/Youth's Resource Parent (If Applicable)

The Resource Parent will describe daily strengths/needs of the child as related to parenting to include school and/or therapeutic issues and assist the team in identifying issues which may affect permanency.

6. Health Unit Representative

The Health Unit Representative will assist team in identifying and/or clarifying clinical and/or medical issues that may affect permanency and assist the team in identifying what services will be needed to support permanency.

7. Others

It may be necessary to include other participants based on the needs and best interest of the child/youth. It would be appropriate to have input from supportive members of the child/youth's Child and Family Team. The following is a listing of other potential Adoption Permanency Team Members:

- a. Experienced Resource Parent that has adopted
- b. Resource Parent Advocate
- c. CPS case worker when looking for a home for a child just entering custody that meets legal risk criteria per policy

A child/youth that will be in need of a Adoption Permanency Team meeting should have had all other options for permanence thoroughly explored and exhausted including all family, prior attachments, and community options.

The final decisions regarding placement of siblings for the purpose of adoption must be made during the Permanency Review Team Meeting.

II. PREPARATION GUIDE FOR THE ADOPTION PERMANENCY CFTM

What: Adoption Permanency CFTM for selected adoptive family and child.

When: Prior to Adoption Permanency CFTM

Who: Permanency Specialist and Family Services Worker

Reference: (CR: Preparing the Pre-placement Summary Outline.)

NOTE: This procedure does not apply if the resource family is adopting the child. (CR: Selecting the Foster Home as the Appropriate Home.)

A. Review prior attempts to secure familiar placement to ensure there is no way to reach permanency through adoption with a family familiar to the child. Request homestudies via REACT and within 15 working days of receipt of the referred resource home studies an Adoption Permanency CFTM will be convened. The FSW and the Permanency Specialist must review at least the following information prior to a referral to the Adoption Permanency Team:

1. The barriers to an adoptive placement with the current resource family;
2. The results of past attempts to place the child/youth in a familiar family;
3. Whether the conditions that prevented or disrupted the child/youth's placement with the familiar family are still present;
4. Complete/review archaeological case file dig;
5. Review outcomes of Individual Recruitment Plan;
6. The current availability of potential adoptive resources identified through recruitment, REACT, or other adoption exchange searches.

Some children who need an adoptive placement resource identified may be placed at legal risk. The DCS legal department must be consulted as to the child/youth's current legal status.

B. All Adoption Permanency Team members will be notified of the meeting ten days in advance, if by letter, or seven days in advance, if by phone.

C. Preparation for Adoption Permanency CFTM

Within five working days of the Adoption Permanency CFTM, the FSW/Permanency Specialist will provide each team member with the presentation summary and copies of each family's homestudy to be reviewed. Request a review of the information on the child and the FSW's evaluation of the appropriateness of the placement.

D. Prior to the Adoption Permanency CFTM, all participants must:

1. Review all pre-placement information;
2. Review family information, support systems;
3. Clarify any concerns;
4. Plan with the adoptive family's FSW the timing of the oral presentation, physical presentation, visitation, and placement.

All parties must agree to the placement before proceeding.

A plan for the oral presentation of the child to the family and tentative pre-placement schedule is to be discussed during the pre-placement conference.

When a direct placement or a legal risk placement is to occur, the receiving region must contact the adoptive family to arrange for the oral presentation and determine the family's intention for accepting the child. (CR: Services to the Child.)

E. Child

Evaluate at all times the child's emotional readiness for each step in the placement process.

Obtain the following:

1. Medical - obtain a current medical examination based on EPSDT guidelines. (CR: Assessment Manual for guidelines.) Obtain all psychological/psychiatric records.
2. Adoption Assistance - evaluate the child's eligibility for adoption assistance or deferred adoption assistance. (CR: Adoption Assistance Procedures).
3. Education - obtain school records.

NOTE: Delete identifying information (birth family surname, addresses, places of employment, or any information that would lead to the birth family's identity) from all education and medical records.

III. CONDUCTING THE ADOPTION PERMANENCY CFTM

What: Conduct the Adoption Permanency CFTM.

When: Prior to presentation.

Who: Adoption Permanency Team Members

A. Discussion

The primary goal of the Adoption Permanency Team is to identify the family whose strengths best match the child's needs. Therefore, the child/youth's pre-placement summary must be complete and available for review by the team. (See Preparation Guide for the Adoption Permanency CFTM for further details.)

The Permanency Specialist will ensure that in the Adoption Permanency CFTM all team members attending discuss and share information concerning the following issues:

1. Barriers;
2. Child's strengths;
3. Child's understanding and readiness for adoption;
4. Possible child behavior that tests the family's commitment;
5. Adoptive parent's ability to cope with child's specific behaviors. Share how foster parent dealt with child's specific behaviors;
6. Resources to meet the child's special needs;
 - a. The purpose, frequency, and depth of post-placement support;
 - b. Appropriateness of eligibility for adoption assistance or deferred adoption assistance and availability of SSA, SSI, VA, or other benefits (CR: [DCS Policy 15.11 Adoption Assistance](#));
 - c. Medical/psychological/psychiatric/educational consultations;
 - d. Foster parent involvement in the adoptive placement process, including oral presentation, physical presentation, visitation and placement;
 - e. Sibling relationships, significant others and plans for ongoing

contact (CR: Services to the Child and Services to the Birth Parent);

- f. Tentative date for oral presentation;
- g. Type of placement (i.e.: legal risk, direct, free home).

B. Decision-Making

1. The FSW will present the child to the Adoption Permanency Team by thoroughly discussing the child's strengths/needs and give detailed reasons why the child does not have a current permanent placement.
2. The Team Chairperson will present each family in a non-identifying manner through the facilitation process and document each family's strengths/needs as they relate to the child's strengths/needs as discussed by the team.
3. The Placement Support Worker will ensure the family's perspective is presented by articulating how the family would meet the child's specific needs.
4. Other team members will provide any other thoughts/insights to the discussion regarding the child and/or the family.
5. The team will come to a consensus in determining, at most, the three families that would best meet the child's needs. These families should be organized "A" through "C" with Family A being identified as the family having the most strengths to meet the child's needs. This family should be contacted to set up an oral presentation.
6. The Adoption Permanency Team Chairperson will document results of the meeting in TNKids and on the CFTM staffing summary.

C. Reconvening the Team

The Adoption Permanency Team will reconvene only if the previously identified families determine they cannot meet the child's needs.

IV. MAKING AN ORAL PRESENTATION

What: Make an oral presentation providing:

Non-identifying information about the child, child's background, birth relatives, and legal status;

The child's health history and any special needs;

The availability of adoption assistance or deferred adoption assistance to meet the child's special needs, as appropriate.

When: As Determined at the Pre-placement Conference.

Who: Permanency Specialist or Designated Staff and, when appropriate, foster care contract provider. Consideration should be given to inviting the foster parent or child's therapist, if appropriate.

A. Presentation and Information Gathering

The FSW, Permanency Specialist and a Team Leader will present the child to the family, ensuring full disclosure, to include all information which may affect permanency currently and in the future such as medical, therapeutic and other documentation. The family will review the child's life book and all documentation regarding the child. The family will also receive homework assignments along with the presentation packet.

Explain that presentation is a two part process; 1) Presentation on the first day; and 2) Family's decision and further discussion on the second day. Part 2 can be scheduled when the family is ready to make a decision. This usually occurs twenty-four hours to seven days prior to the physical presentation.

1. Setting the Stage

Make the adoptive family aware of the process regarding the presentation and that they can make the decision to proceed with the placement or decline to accept the child and that their decision will be discussed on the second day of the oral presentation.

2. Birth Family

Provide the adoptive family with non-identifying information about the child and his/her birth/legal family. Tell the resource if the child knows of his/her birth/legal family, their names, whereabouts, and that

the child may share that information. However, DCS does not identify the birth/legal family's surnames, address, or any identifying information.

A copy of the presentation summary is given to the adoptive family. (CR: Preparing the Presentation Summary)

3. Ethnic Background

Share all non-identifying ethnic background information (CR: Placing Native American Indian Children for Adoption). Share any feelings that a child may have about ethnicity and prior placements.

4. Medical Information

Share non-identifying copies of all medical, psychological, and genetic information as well as the child's immunization records.

5. Child History

It is vital that the child be presented in a positive, yet accurate and realistic way. If the child was abused or neglected, share information and interpret how the child's past has affected or may affect his/her future development. Present information regarding the number of moves and types of placements this child has had.

6. Educational Information

Share copies of non-identifying educational information, such as report cards, IEP's, etc.

7. Reason for Adoption

Explain the reason for adoptive placement as a positive step in the child's best interest instead of as rejection by previous caregivers or birth parents.

8. Family Decision Making

The family will be given no less than 24 hours to consider all that they have been told about the child and review all documentation received. They may also wish to contact other critical members of the child's team who may not have been available for the meeting. When the family is ready they will contact the FSW to give them their decision.

9. Consultations

Arrange consultations with medical doctors, teachers, psychologists, and psychiatrists who are familiar with the child as needed to help the adoptive family understand the child's needs and determine their ability to parent the child. Attend the consultations. Remind the consultant to refer to the child by his/her first name and not to release surnames or the birth/legal family's identity.

B. Family Decision Making

Explain to the family that when they return for the next meeting, they need to be prepared to 1) discuss any remaining questions; 2) inform the agency of their decision whether to proceed with the placement, realizing they are making a lifetime commitment; and 3) identify three rewards and three challenges in parenting this child.

1. Assessment

The FSW and the family need to discuss the consultations.

If the family has any concerns about appropriately parenting the child, delay the physical presentation.

Help the family see that declining a placement does not jeopardize the possibility of future placements. Be supportive of the family's decision.

2. Documentation

In the child's and adoptive family's case record document the child's presentation to the adoptive family and their reaction.

If the adoptive parents decide not to proceed with placement, include those reasons in the child and the adoptive parent case records.

Make the documentation non-identifying.

Re-assess with the family the type child they feel they can parent.

Request return of shared documentation.

3. Preparing for Physical Presentation

When the prospective adoptive parent(s) decide to proceed:

- a. Once the family has notified the FSW of their decision to proceed with the adoption placement the family, FSW, and any pertinent team members will convene to develop a transition plan which includes current placement, strengths/weaknesses, educational issues, visitation, etc.
- b. Ask the adoptive family to provide photograph albums or videos of themselves, other family members, their home and pets;
- c. Ask the adoptive family to write a letter to the child, introducing themselves;
- d. Discuss and coordinate visitation between the child and adoptive family. Explain that the number and duration of visits may change based on the needs of the child; (CR: Services to the Child)
- e. Ask the family to bring a small tangible gift for the child to be given at their first meeting with the child.
- f. Once the child is ready to permanently be placed in the adoption home the protocol for making an adoptive placement should be followed.

4. Direct Placement

If the adoption is to be a direct placement of a newborn from the hospital, present to the family all non-identifying background information.

When the child is born, receive information about the child (physical description, birth date, sex, birth medical history, health status) from the child's FSW and update the pre-placement and presentation summaries accordingly.

In presenting the child to the family, follow the steps above.

V. PREPARING RESOURCE PARENTS FOR PHYSICAL PRESENTATION

What: Prepare foster parent for child's presentation to the prospective adoptive family.

When: After oral presentation and the prospective family has decided to make a commitment to adopt.

Who: Permanency Specialist, FSW or Designated Staff

A. Permanency Placement CFMT

Inform foster parents of the CFT process and give non-identifying information about the adoptive family to the foster family.

B. Foster Parent's Role

Discuss with the foster parents their role in the adoption transition. The discussion with the foster family should focus on the following:

1. Partnership: Include foster parents in child's preparation for presentation whenever possible;
2. Permission: Discuss with the foster parents the importance of granting permission, both verbally and through the blessing letter, for the child to move (CR: Preparing the Child for Adoptive Placement);
3. Preparation: Assist the child in preparing for the move through discussion, video tapes, and picture albums about the adoptive family. As visitation progresses assist the child with packing of all the child's belongings;
4. Visitation: When possible have first visit with the adoptive family in the foster home. Discuss the progression of visits based on child's individual needs;
5. Feedback: Stress importance of foster parents' role in providing feedback to the FSW regarding the child's feelings and behaviors during placement process;
6. Ceremony: Invite the foster parents' participation in planning and attending the adoption ceremony.

C. **Support**

FSW will provide ongoing services to the foster parent to assist with grief/loss issues.

VI. CONDUCTING PHYSICAL PRESENTATION

What: Conduct the physical presentation of the child with the adoptive parents

When: The child is prepared and the adoptive parents are committed to/ready for the placement and we have:

1. Helped the parents evaluate their ability to parent the child;
2. Provided the child information about the family;
3. Counseled with the child about the family and his/her acceptance of the family.

Who: FSW, Permanency Specialist or Designated Staff

NOTE: Determine the schedule of the meetings by the child's age, readiness to move, and needs; the adoptive parents' readiness for placement.
(CR: Preparing the Child for Adoptive Placement)

Plan the presentation during a time in which the adoptive parents, who have made a commitment to accepting the child for placement, are not preoccupied with other activities. The family needs to adjust to such changes and be focused on the adoption before involving a child or themselves in caring for a child.

A. Site

Choose a comfortable, private site familiar to the child if possible (foster home, parks, zoos, or area county office). Notify the foster family, the adoptive parents, and their FSWs of the meeting time and place. It is recommended that the first visit occur in the foster home if at all possible.

A. Activities

Plan an interaction between the child and family that will help them know one another. The family will share their gift with the child at this visit.

B. Documentation

Document in the adoptive parents and child's case record non-identifying information about the child's and the adoptive parents reactions during the meeting.

C. Re-Evaluation

If the adoptive parents decide not to pursue placement, their FSW must meet with the adoptive family to re-evaluate the prospective adoptive home. (This meeting should occur no sooner than 30 days and no longer than 45 days from the date of the adoptive parents' decision). The re-evaluation should focus on:

1. A comparison of the type child presented with the type child the family stated they wanted to adopt. Process the family's reason for not proceeding with placement;
2. The family's continued acceptance of adoption;
3. Agency recommendation for placement.

Update TNKids and REACT to reflect the family's status.

VII. CONDUCTING PRE-PLACEMENT VISITATION

What: Conduct the pre-placement visitation

When: As needed by the child (based on age, developmental level, and acceptance of the placement)

Who: FSW, Permanency Specialist or Designated Staff

Why: Pre-placement visitation is arranged for the child to help him/her become acquainted with the prospective adoptive family and deal with separation from the foster/birth/legal family. The purpose of the pre-placement activities is to assist the family and child in the beginning process of family integration.

NOTE: Either the child's or adoptive parents' FSW must be present at the first visit between the child and the family and act as a facilitator in establishing relationships.

A. Frequency

Determine the frequency of visits based on the child's age, as follows:

1. 6 months old and younger - one visit, usually the physical presentation, of at least two hours;
2. 6 - 11 months - at least two visits;
3. 12 - 35 months - at least three visits, at least one in the foster home and one overnight visit;
4. 3 - 17 years - a minimum of four visits (preferably, in the foster home, at least one overnight visit, and a weekend visit);
5. Visitation needs to be set to meet the child's needs. The visits should be progressive and the frequency and duration should increase. Consult the Team Leader for any exceptions to these visitation schedules. (CR: Preparing the Child for Adoptive Placement)

B. Adoption Assistance

Discuss with the adoptive family procedures for reimbursement for travel regarding visitation if the child is eligible to receive adoption assistance. (CR: Adoption Assistance Procedures) If placement is not made, this is not a reimbursable expense.

C. **Re-Evaluation**

When an adoptive family decides not to proceed with placement, the adoptive family FSW should meet with the adoptive family and complete a re-evaluation. This should occur no sooner than 30 days and no later than 45 days from the date of the adoptive family's decision. The re-evaluation should focus on:

1. A comparison of the type child presented with the type child the family stated they wanted to adopt. Process the family's reason for not proceeding with placement;
2. The family's continued interest in adoption;
3. Agency recommendation for placement.

Update TNKids and REACT to reflect the family's status.

D. **Supporting the Child**

When a potential placement with a family does not occur, the child will need support in understanding what has happened. Circumstances around the decision not to proceed are explained in non-blaming terms. Example: You need a family that can help you..., or we all thought this family could help you but they aren't able to...

The child's feelings about the placement experience should be incorporated in the child's Life Book through words and/or drawings.

VIII. PROTOCOL FOR MAKING ADOPTIVE PLACEMENTS

What: Protocol for Making Adoptive Placements.

When: Full guardianship has been obtained or the placement is Legal Risk.

Who: Permanency Specialist or designated staff

A. Initial Adoption Discussion

When the permanency goal changes to a dual goal or sole goal of Adoption, DCS/Provider will begin to discuss adoption with the current resource family. Family Service Worker/Permanency Specialist (FSW/PS)/Provider will begin to gather required documentation needed for the potential adoption. The FSW/PS will document in TNKids under the "Identified Pre-Adoptive Home" icon if the current resource family is willing to adopt the child.

B. Preparing to Make the Adoptive Placement

1. Once a child has been in care for nine months and no later than immediately following TPR, the FSW/PS or Provider gathers the remaining information needed to write the Pre-Placement and Presentation Summaries.
2. By the 12th month (or sooner if TPR has already occurred or placement is considered legal risk) of custody of a child with a dual or sole goal of adoption and the current resource family is not willing to adopt and no adoptive placement has been identified, the FSW/PS or Provider serving the child will convene a Child and Family Team Meeting (CFTM) to write the Individualized Recruitment Plan and begin the process of Individualized Recruitment. Recruitment may be limited until TPR occurs but it may include reviewing child's history to identify other family members or other significant connections in the child's life.
3. The PS meets with the prospective adoptive family to present the Presentation Summary, to determine the child's eligibility for adoption assistance and to negotiate the rate if applicable. Then the PS submits the rate for approval to the specified regional Adoption Assistance Designee. (The Presentation Summary is not required in circumstances where the Resource Parents are adopting. The PS still must meet with the family to determine the child's eligibility for adoption assistance and to negotiate the rate if applicable). The PS/FSW prepares the Intent to Adopt/Adoption Assistance Application form and has family sign to demonstrate their intent to adopt child at the rate approved during the negotiation discussion. This is a formal agreement but it is not a legal

document. The child's birth name must be used on this form; however, the family and child can choose to begin "calling" the child by the proposed adoptive name. No legal documents, school records or insurance forms can be placed in the adoptive name until finalization. The family, child and workers should continue to "celebrate" the adoptive placement of the child.

4. The "Adoptive" family is expected to accept parental responsibility of the child and schedule medical appointments, etc. but must keep DCS/Provider updated on the child's medical and behavioral issues.
5. PS helps the family secure an attorney and obtain an attorney fee letter and subsequent approval.
6. Attorney files petition to adopt and secures a court date.
7. The PS completes the Adoption Assistance Agreement with the family at any point prior to the court date for finalization (can be completed during the time of the Intent to Adopt/Adoption Assistance Application or at a later date). The child's adoptive name is entered on the Adoption Assistance Agreement. The family and the PS sign the Adoption Assistance Agreement upon completion but the effective date cannot be prior to the date of finalization of the adoption. The resource home board payment will continue until finalization.
8. If the current resource family is adopting the child, the adoption should be completed within 90 days of the TPR (provided the court did not issue any additional requests for information and the child has been in the home required time period). Providers will be paid their regular continuum per diem rate until finalization or up to the 91st day after TPR and are expected to continue to make the foster parent payments until finalization. If the court has caused the delay in the finalization, an extension of the per diem rate can be requested by the Provider. An extension for any other "good cause" can be requested from the RA/Adoption Designee if it is one that is beyond the control of the Provider's actions. A CFTM must be held prior to discharging a child from the continuum to discuss the case, options and barriers to finalization. The Provider must be present at the CFTM and will be able to discuss the discharge or possible extension and will know the effective date of both possibilities.
9. If the adoptive placement is a new placement, the adoption should be completed within 60 days after the end of the 6-month placement period (provided the court did not issue any additional requests for information). Providers will be paid their regular continuum per diem rate until finalization or up to the 61st day after the 6-month placement

period ends and foster care payments will be made by the provider until finalization. If the court has caused the delay in the finalization, an extension of the per diem rate can be requested by the Provider. An extension for any other "good cause" can be requested from the RA/Adoption Designee if it is one that is beyond the control of the Provider's actions. A CFTM must be held prior to discharging a child from the continuum to discuss the case, options and barriers to finalization. The Provider must be present at the CFTM and will be able to discuss the discharge or possible extension and will know the effective date of both possibilities.

10. Prior to the Adoption court hearing (if not already completed), the PS/FSW/Provider meets with the adoptive family and signs the Adoption Assistance Agreement. The AA Agreement will have only the adoptive name on the contract, but the social security number will remain the same.
11. The PS gets the certified order of Adoption Finalization at court and takes the signed AA Agreement to the office to set up the Adoption Assistance Case in the child's adoptive name. PS/FSW will notify required personnel to stop Resource Home Board Payments and begin Adoption Assistance payments.
12. Adoptive family can request a new social security number following finalization from the social security administration. If a new number is given, the family must provide the new SS# to the Permanency Specialist as soon as it is received. If a new SS# is not given, the child's birth SS# will continue to be used with as many safeguards as possible.

Important Points to Remember:

- Resource Home Board Payments continue until finalization.
- Adoption Assistance payments do not start until finalization.
- Birth name remains the legal name until finalization.
- Social Security number does not change throughout the adoption process.
- NO psuedo social security numbers should ever be used.
- Social Security number can only change if the adoptive family requests and is granted a new number following finalization.
- The timeline for adoption begins when the Intent to Adopt is signed and the Child and Family Team agrees with the adoptive placement.
- Foster-to-Adopt should be completed 90 days from TPR.
- New Placement Adoptions should be completed 60 days after the end of the 6-month placement period.

Out-of-state adoptive placements must be approved through the ICPC office and will be considered Resource homes until finalization.

IX. MAKING THE PLACEMENT

What: Prior to signing the adoptive contract, the DCS Permanency Specialist will make sure that all legal action to free the child for adoption has been accomplished or will be accomplished without impediments. Make the adoptive placement between the adoptive parents and the child.

When: After pre-placement visitation and when the adoptive family, child, and DCS agree that placement is appropriate.

Who: Permanency Specialist or FSW

A. Life Book

Ensure that the Life Book goes with child. (CR: Preparing the Child for Adoptive Placement)

B. Placement Agreement

Intent to Adopt between DCS and prospective adoptive parents is signed when the child is legally free.

Before signing the Adoptive Placement ensure that foster care payments are stopped.

A Child Placement Contract to Provide Temporary Foster Care is signed when a legal risk placement is being done.

NOTE: When guardianship is obtained, ensure that you and the adoptive parents sign the Intent to Adopt form.

C. Adoption Assistance

When appropriate, have adoptive parents sign Adoption Assistance Agreement (CR: [Policy 15.11 Adoption Assistance](#)).

D. School

Share with the child's school principal (where the child is to be enrolled) any information required by the education department regarding the child. Request that all school personnel keep information about the child's original identity confidential. The adoptive parents sign report cards and attend parent's meetings/conferences prior to finalization of the adoption.

E. **Service Information System**

Update TNKids, CHIPFINS, and REACT (CR: [Policy 15.05 Registering and Maintaining Status of Children with REACT](#))

X. TRANSFERRING/MERGING RECORDS

What: Transfer/merge child's case record.

When: After adoptive placement agreements are signed.

Who: Permanency Specialist

A. Transfer

Transfer the child's case record within seven calendar days to the area office that is supervising the adoptive placement.

If placing a child with another Tennessee-licensed child-placing agency, maintain the child's original case record in the area office until finalization. After finalization send the child's original record to the Tennessee-licensed child placing agency for sealing purposes.

If placing a child out-of-state, maintain the child's original case record in the area office until finalization. After finalization, the child's record should be sealed and sent to the Post Adoption Services in Central Office.

B. Merge

Merge the child's record and the adoptive family's record after free home/Intent to Adopt forms are signed and keep them as one record when the adoptive family is a DCS family and the child is a DCS child.

C. Documentation

Effective with the date the free home/adoptive contract is signed, all dictation will be in the child's adoptive name.

When the child is in a legal risk placement, documentation will remain in the child's birth name until Intent to Adopt forms are signed.

NOTE: When a free home placement is made, and when termination of parental rights are pending, transfer a copy of the child's record to the area office supervising the placement within seven calendar days.

Work Aid: ADOPTION POST PLACEMENT "SHARING SHEET"

CHILD'S NAME: _____ DATE: _____

FAMILY NAME: _____ TYPE CONTACT: _____

General Adjustment of Each Family Member: (give examples)

Feelings of Family Members:

Discipline Used: (give examples)

School Adjustment: (give examples)

Medical/Health Issues: (give specific dates/places if medical treatment obtained and diagnosis/prognosis)

Areas of Success:

Areas That Need Attention:

Areas of Focus for Next Month:

Adoption FSW

XI. REMOVING CHILD FROM THE PERMANENT PLACEMENT (DISRUPTIONS/DISSOLUTIONS)

What: Remove the child from the adoptive home.

When: At the time of a disruption, prior to finalization of the adoption;
at the time of a dissolution, after finalization of the adoption.

Who: Permanency Specialist/FSW

A. Disruptions

1. Considerations

Carefully consider all facts before removing a child from the adoptive home. Because of the potential emotional damage to the child, remove the child only in case of the adoptive parents seriously incapacitating illness or death, or neglect, cruelty, or rejection of the child. Also, carefully consider a request for disruption from the parent or child. Remove the child suddenly only if the child's safety requires it.

Any removal should be done with Team Leader and Team Coordinator approval. A CFT is to be convened before any child is moved. Placement stabilization services must be discussed and utilized unless there is a threat of harm to the child.

In situations of Child Protective Services related emergency removals, Child Protective Services policies and procedures are to be followed.

If a petition to adopt has been filed, area legal staff must be advised.

2. Planning - CFTM needs to guide this planning process

If the child is to be removed, explain to all individuals involved that DCS has responsibility for planning for the child. The child may be placed into another adoptive home, foster home, or a residential placement, depending on the child's needs. Provide support services to the child. (WA: Talking With Children About Disruptions)

3. Financial Responsibility

Ensure that the county that was last financially responsible for the child resumes that responsibility. Advise that services may continue by the area office serving the child when it best meets the needs of the child.

4. Service Information System

Report disruptions and their reasons on TNKids and update REACT (CR: [Policy 15.5 Registering and Maintaining Status of Children with REACT](#))

5. Re-Evaluation

Continue services to the adoptive family following the disruption of an adoptive placement. Try to determine the reasons for the unsuccessful placement. With the family, determine the appropriateness of a future adoptive placement and the type child appropriate for the family.

Update TNKids and REACT to reflect the child's and family's status.

B. Dissolutions

1. Child Protective Services

Follow the steps outlined above for procedures regarding disruptions. If placement cannot continue because of harm or threat of harm to the child, removal is based on CPS criteria. (CR: Child Protective Services)

2. Financial Responsibility

After dissolution, financial responsibility remains in the county of venue where the dissolution occurred.

Work Aid: TALKING WITH CHILDREN ABOUT DISRUPTIONS

- Things between you and your mom are not working out.
- It is not your fault that it isn't working out. It is really not anyone's fault. I don't know exactly why it did not work out. We all tried our best. We all made some mistakes we wish we wouldn't have made.
- What we all need to do is talk with each other so we can figure out why it didn't work. Maybe we can learn from each other so that the next time we have a better chance of making it work.
- You can help a lot by talking with me about the things you liked and didn't like. I will try to help you and your mom and dad understand how each of you feels about the things that happened.
- You must be feeling very sad and very angry. That's okay. I feel some of those feelings, too. So do your mom and dad. It's really hard when something you want very much doesn't work out.
- It doesn't always work the first time. That doesn't mean that anyone is bad. It usually means that we didn't have the right combination of parents and children.
- Lots of times it works out the second time. We will just keep trying until it does. It can work.
- Whatever happens, I'll make sure that you have someone to take care of you. You won't be alone. It's my job to find the mom and dad who will be best for you.
- Even though you feel really scared and sad now, I think things will be okay after you get settled in your new family.

A Look at Disrupted Adoptions, Spaulding for Children, Michigan Department of Social Services.

SERVICES TO RESOURCE PARENTS

Because resource parents need preparation, encouragement, and support, DCS carefully assesses all applicants for parenting, encourages them to assess their parenting abilities, and helps them to identify the characteristics of a child they feel they can most successfully adopt. DCS has also established a contract with Harmony Adoptions to provide the specialized adoption training that is believed to be vital to the preparation process for adoption.

Adoption Preparation Training

By Harmony Adoptions

Brief Statement of Need: Based upon ASAP's three (3) year history with the provision of post-adopt services statewide, ASAP suggests that families may be better prepared for the impact of adoption through a two-pronged approach: Specialized Adoption Training and Individualized, Child-specific Counseling Services.

Outcomes: greater family stability, greater capacity for family to meet unique needs of child, improved foresight and ability to adapt to changing needs of child over time, greater satisfaction in adoption journey, greater capacity to do more (mentor/foster/adopt), and greater likelihood to access support services proactively when needs merit. The improvement in the quality of life for adoptive families ultimately translates to a lower re-entry rate for custodial services and an increase in public influence/affect that adoption is a viable option for families to consider and is a positive, supportive life experience, i.e. natural impact on recruitment & retention of Resource Families.

Method of Delivery: The Specialized Adoption Training (SAT) would be delivered in four (4), three (3) hour lessons by two (2) facilitators - one master's level clinician and one skilled trainer. The Individualized, Child-specific Counseling Service (ICCS) would be delivered in four (4) in-home sessions through an ASAP Family Counselor whose service follows and compliments the training experience.

The training philosophy would be in accordance with the "3 Philosophical Tenets of Training" (attached). The training philosophy is a critical component of successful integration of training and all deliveries of SAT should ascribe to the tenets.

Eligibility:

- Eligible for SAT: Any Resource Family who is considering signing "Intent to Adopt"
- Eligible for SAT & ICCS: Resource Families who have signed an Intent to Adopt for identified child

Specialized Adoption Training (SAT) Outline

Session 1 - Claiming & Belonging

- Hour 1: explores the developmental passage of permanency and the transition from claiming to belonging; it will also help untangle the complexity of attachment. This session is intended to help the parent look at the "Attachment Cycle" with a different point of view. Traditionally, caregivers have been taught that people fall into two categories: the attached and the unattached. Here, we will utilize several teaching metaphors to better understand that attachment is a continuum, and we are all on it. Looking at the attachment cycle differently equips the participant to better understand the myriad of coping mechanisms exhibited by children with a history of abuse or neglect. We will also take the first steps toward addressing the caregiver's question: "So, what do I do now?"
- Hour 2: have you ever wondered why the "permanency" outcome established through a legal proceeding may not always correlate to a child's sense of permanency? Borrowing from the work of Holly van Gulden and Claude Riedel, we will delve into the origins of "permanency" and "constancy" and how they are key developmental building blocks of self development.
- Hour 3: transitional objects - what are they? Why are they significant to a child's story of loss, transitions, and attachment? Video demonstrations will enhance an understanding of the universal human need for transition objects and open the door to better understand a child's behavior through these objects. This module also affords the opportunity to explore some of the trans-cultural/trans-racial needs of the child.

Session 2 - Know Thyself, part 1

- Hour 1: emphasizes the importance of Socrates' charge to "know thyself." We will explore the unique hooks and triggers that we all have, which, when left unknown, lead us straight to the propagation of more problems, and further from the solutions we crave. Attention will also be given to the acknowledgement and normalization of "fears" that all families have when responding to the call to adopt.
- Hour 2: participants will take the Myers-Briggs Personality Inventory
- Hour 3: participants will take a closer, non-invasive look at how their personality type may impact their efforts to care, communicate, and engage with others.

Session 3 - Know Thyself, part 2

- Hour 1: through the PREP curriculum (Prevention Relationship Enhancement Program) we will introduce the importance of relationship enhancement and how the use of basic skills can promote conflict resolution so that problems don't beget other problems. Though this curriculum is designed to strengthen

couples, single parent homes will also benefit from the main concepts of strengthening relationships.

- Hour 2: introduce PREP's "the Floor" - a speaker/listener technique for helping people talk without fighting and promote deeper understanding between two people
- Hour 3: we'll explore the importance of fun & friendship on the overall health and well-being of the family unit

Session 4 - Pulling It All Together

- Hour 1: a general overview of the themes addressed with helpful, anecdotal lessons (the do's and don'ts of adoption/myth-busters/etc.)
- Hour 2: Panel - will provide a forum to bring the preceding themes and lessons together while transitioning the family to individualized care & support through the ASAP network. An adoptive family, an adoptive child, a DCS adoption liaison, a Regional Health Unit member, and an ASAP representative shall comprise the members of the Adoption Preparation Panel - the panel will afford participants to hear from the experts and allow for an exchange of themes covered previously in Session 1 thru 3. Other pertinent topics for review and discussion not previously discussed would be relevant adoption policy matters, e.g. adoption assistance, annual renegotiation of rates, contingency plan development, unique needs of trans-cultural/trans-racial adoption, etc.
- Hour 3: conclusion of Adoption Preparation Panel with a ceremonial event that shall conclude the training. The ceremony should reflect the profundity of their commitment, the joy that awaits them, and the support that shall assist them along their journey. Family, friends, and child (if appropriate) should take part as it represents the base development of the family's Relief Team.

Individualized, Child-specific Counseling Service (ICCS) Outline

Through four (4) in-home counseling sessions, the ASAP Family Counselor will explore the unique myriad of needs presented by the adopted child and how those needs may express themselves through developmental milestones. The family will also begin formalizing the development of their Relief Team and will be oriented to the full array of ASAP services, e.g. lending library, adoptive family handbook, support groups, ASAP e-newsletters, Cycles of Healing Conference, etc.

During this unique period of ASAP's care, the family and ASAP Counselor will be able to integrate many of the concepts discussed during training and explore them further under a less public, more intimate, safe forum (this is not an exhaustive list):

- Contingency Plan & Relief Team Development
- Lifebooks and transitional items/issues
- Child specific challenges presented by history and development

- Crisis Plan development
- Behavior modification
- Taking care of the caretaker
- Commitment for a lifetime
- Fears & worries
- Normalization of experiences & feelings
- On-going learning opportunities
- Community resources

Measurement & Satisfaction:

Satisfaction Surveys will be collected upon completion of the SAT and ICCS. A family will receive follow up monitoring at 3, 6, and 12 months to assess overall stability and success during the first year; thereafter, annual follow up & monitoring will occur until the child/adult reaches 18 years of age.

ASAP On-line will add a feature that allows us to track SAT & ICCS participants across the state and will provide the alerts for on-going follow up and subsequent data collection.

The SAT curriculum will be reviewed on an annual basis for maintaining its contemporary relevance to the unique themes of adoptive families. This review will consist of a SAT Curriculum Advisory Committee that will include ASAP personnel, DCS personnel (adoption/legal/health unit), and an SAT & ICCS graduate. The intent is to keep SAT meaningful and relevant to the participants on an on-going basis, thus insuring the outcomes remain positive.

Adoption Material

Each family considering adoption or has adopted can receive the "Being an Adoptive Family" manual in hard copy. It is also attached.

FINALIZING THE ADOPTION

I. GRANTING PERMISSION TO FILE THE ADOPTION PETITION

What: Grant permission to file the Adoption Petition.

When: DCS and the adoptive parents agree on the time for filing the adoption petition.

Who: Adoption Services FSW or Designated Staff and Team Leader

NOTE: DCS must consent to the adoption and prepare children 14 and older to consent to their adoption.

A. Permission

When the Permanency Specialist and FSW determine it is appropriate and all requirements have been met, permission may be given to the adoptive parents for filing the adoption petition. Make the decision with the adoptive parents and the child if he/she is old enough.

B. Putative Father Registry

Ensure that the Putative Father Registry is cleared 3 days prior to the filing of the petition. (CR: [Policy 15.4 Clearing the Putative Father Registry](#))

C. Legal Information

Share the following restricted information in writing with the petitioner's attorney:

1. The date DCS placed the child in the physical custody of the petitioners;
2. Child's birth date and birthplace;
3. Adoptive parents' name for the child;
4. Any property owned by the child.

II. RESPONDING TO THE RECEIPT OF AN ADOPTION PETITION/ORDER OF REFERENCE

What: Respond to the receipt of an Adoption Petition/Order Of Reference.

When: Within 60 days from receipt of the Adoption Petition and/or Order of Reference.

Who: Permanency Specialist or Designated Staff

A. Acknowledge Receipt of Adoption Petition

Complete Form CS-0443, Acknowledgement of Receipt of Adoption Petition.

B. Confidential Court Report and Supplemental Court Reports

Prepare [Confidential Court Report, Form CS-0816](#), for reporting to the Circuit or Chancery Courts on petitions filed for the adoption of children in DCS guardianship or in the guardianship of a licensed child-placing agency and placed in an adoptive home approved by DCS.

Prepare [Consent to Adopt, CS-0815](#).

Prepare Supplemental Confidential Court Report form to report any additional information you receive after submitting the preliminary court report and prior to finalization.

NOTE: The child must have been in the home of the petitioners at least six months before entering the final order of adoption. See TCA 36-1-119.

C. Court Clerk

Submit the original court report and Consent To The Adoption form in sealed envelope to the Court Clerk. (WA: Envelope Instructions)

The following information is placed on the outside of the envelope:

1. Child's adoptive name;
2. Date of birth;
3. Petitioner's name;
4. Petition number;

5. Attorney's name.

Fold the cover letter around the outside of the envelope and place in a larger envelope and submit to the Court Clerk. Send a copy of the cover letter to the attorney. (WA: Cover Letter).

D. Duplicate

Keep a duplicate of the report and all correspondence in the case record.

E. Attendance

Attend the hearing(s) only as an observer; do not participate unless directed by the judge or legal counsel representing DCS.

NOTE: After the court hearing and the granting of the adoption petition, consider the case record sealed; do not share any further information.

Work Aid: Envelope Instructions

The following information should go on the outside of the envelope.

Court: Chancery / Circuit

Petitioner(s): Adoptive Parents

Docket #:

Date of Hearing (if known):

Judge: Name of Judge finalizing the adoption, if known.

Work Aid: COVER LETTER

Court Clerk Name, Title

Address

City, State Zip

Re: Petition of (Adoptive Parents to Adopt [use name of child as it appears on the
Petition to Adopt]

Docket Number:

Dear _____:

The Department is submitting its confidential report to the court on the above-styled adoption matter. This report is complete and will be used by the judge at the hearing.

Sincerely,

Name

FSW

III. PROVIDING FOR THE ISSUANCE OF A NEW BIRTH CERTIFICATE BY ADOPTION

What: DCS must report information to the court to request a new birth certificate by adoption.

When: At the filing of the court report.

Who: Permanency Specialist or qualified FSW

A. Certificate of Birth by Adoption

Complete [Form Department of Health Certificate of Adoption, Form PH-1248](#). Complete Part I and have the adoptive parents sign. In order to protect confidentiality of the child's birth information, Part II should be completed after the adoptive parents have signed Part I.

Submit the form with Form Letter for Transmitting the Certificate of Adoption, Form CS-0408 with the final report to the court. The court's clerk will complete Part III and Part IV and submit with the form in a sealed envelope and the adoptive parents' check to the Office of Vital Records, Department of Health.

B. Report of Foreign Birth

Complete Application for a Report of a Foreign Birth of an Adopted Child, Form CS-0407. Submit the form with Form Letter for Application for a Report of a Foreign Birth of an Adopted Child, Form CS-0409 with the final report to the court. The court's clerk will submit the form in a sealed envelope and the adoptive parents' check to the Office of Vital Records, Department of Health.

C. Distribution

File the original Department of Health Certificate by Adoption form and form letter in a sealed envelope. Send it to the court clerk. Keep a copy in the file.

NOTE: DCS is not responsible for receiving or collecting the adoptive parents' money for the fee for the new birth certificate in the child's adoptive name. They and their attorney must handle this.

IV. FORWARDING BIRTH/LEGAL PARENT LETTERS

What: Forward birth/legal parent and relatives' correspondence to the Post Adoption Services in Central Office.

When: Upon receipt of any correspondence from birth/legal parents or relatives.

Who: Permanency Specialist or FSW

A. Birth/Legal Parent/Relative Letters

Any correspondence received prior to the finalization of an adoption should be maintained in the sealed adoptive record.

After finalization, any correspondence received should be forwarded to the Post Adoption Services, Central Office.

B. Interoffice Correspondence

Use Interoffice Correspondence to send letters to the Post Adoption Services. Specify the child's adoptive name, adoptive parents' names, and DPW/DHS/DCS code number if available.

V. REPORTING FINALIZATION OF THE ADOPTION

What: Report finalization of the adoption.

When: At the time the record is submitted for sealing.

Who: Permanency Specialist or FSW

A. Information System

Update TNKids and REACT on both the child and family to reflect closure of the case at the point the final decree is entered. (CR: [Policy 15.05 Registering and Maintaining Status of Children with REACT](#))

VI. PREPARING THE RECORD FOR PERMANENT FILING

What: Prepare the closed adoptive record for permanent filing with Adoption Services, Central Office

When: Within 30 days of the finalization of the adoption

Who: Permanency Specialist/Designated Staff/Team Leader

NOTE: Organize and submit the closed adoption record for permanent filing when:

- DCS child placed with DCS family;
- DCS child placed with out-of-state agency;
- Interstate placement when adoption is finalized in Tennessee;
- DCS has conducted a home study in an independent adoption.

A. DCS Child Placed With DCS Family/DCS Has Conducted Independent Home Study

Organize - After finalization of the adoption and upon receipt of the final order of adoption, organize the closed record for mailing according to the instructions on [Closed Adoption Record Face Sheet, Form CS-0677](#).

Review - Submit the closed record to the Team Leader/designated staff for review. Staple or secure each section of the record. Label each section according to the Closed Adoption Record Face Sheet.

Submit - Submit the organized record to Adoption Services, Central Office for permanent filing.

NOTE: The area office will keep any forms not identified on the [Closed Adoption Record Face Sheet, Form CS-0677](#), but that have been prepared during the period of service in a given case record until the copy of [Mailing and Acknowledgment Case Records, Record Material and Forms, Form CS-0422](#), has been acknowledged by Adoption Services, Central Office. The Team Leader/designated staff will then destroy (or request the destruction of) all forms related to the particular case, including the folder, by burning or shredding them. Keep a copy of the adoptive home study through approval for three years.

B. DCS Child Placed with Out-of-State Agency

Organize - After finalization of the adoption and upon receipt of the final order of adoption, organize the closed record for mailing according to the instructions on Closed Adoption Record Face Sheet form.

Review - Submit the closed record to the Team Leader/designated staff for review. Staple or secure each section of the record. Label each section according to the Closed Adoption Record Face Sheet.

Submit - Submit the organized record to Adoption Services, Central Office for permanent filing.

NOTE: The area office will keep any forms not identified on Form, Mailing and Acknowledgment Case Records, Record Material and Forms, but that have been prepared during the period of service in a given case until the copy of Form, Mailing and Acknowledgment Case Records, Record Material and Forms has been acknowledged by Adoption Services, Central Office. The Team Leader/designated staff will then destroy (or request the destruction of) all forms related to the particular case, including the folder, by shredding them.

C. Interstate Placement When Adoption is Finalized in Tennessee

Organize - After finalization of the adoption and upon receipt of the final order of adoption, organize the closed record for mailing according to the instructions on Closed Adoption Record Face Sheet form.

D. DCS Child Placed with Other Licensed Child-Placing Agency (LCPA) When the LCPA Has Provided Placement/Post Placement Services

Upon receipt of notice that the final order of adoption has been entered, submit the closed adoption record to the private/public child-placing agency for permanent filing. It is their responsibility to organize and submit the closed adoption record for permanent filing. Acknowledgment of receipt of the records from the agency should be maintained.

VII. NOTIFYING THE COURT OF CLOSING AN ADOPTION RECORD

What: Notify the court of closing an adoption record.

When: A petition is pending beyond two years time limit.

Who: Permanency Specialist or Designated Staff

Note: The adoption law requires that adoption proceedings be completed or dismissed within two years of filing the petition unless one of the following conditions exists:

- The petitioner can show good cause why the final order should not be entered.
- An appeal is taken from an order of the court, in which case the court must enter a final order granting or dismissing the adoption within one year from the final judgment of the appeal.

A. Court Record

Review the court record to determine whether or not the court has requested a final order. If the court has not requested a final order, continue with the following procedures.

B. Closed Adoption Record Form Letter

Prepare DCS Closed Adoption Record Form Letter, Form CS-0452, to report to the judge.

Report that the DCS office will close and forward the adoption record to Adoption Services, Central Office for sealing unless DCS receives further orders from the court within 30 days.

C. Forwarding

If a court order has not been received by the end of 30 days, organize the case record and send it to Adoption Services, Central Office. (CR: Sealing the Adoption Record)

NOTE: DCS has no statutory responsibility for initiating action to complete or dismiss an adoption proceeding when the petition exceeds the two years. The petitioner's attorney and the court must initiate this action. Some

courts grant the adoption even though the petition has been pending longer than two years.

VIII. MAINTAINING ADOPTION CONTROL

What: Enter information pertaining to an adoption petition in the adoption controls listing.

When: Within 15 days of receipt of the adoption petition.

Who: Permanency Specialist or Designated Staff

A. Documentation

Complete information regarding the adoption petition for the adoption controls listing, which is maintained in the region and/or area offices. Include the dates of the following activities:

1. The child was placed in the home;
2. The prospective adoptive parents filed the petition;
3. The area office received the adoption petition;
4. The area office received the order of reference;
5. Confidential court report submitted;
6. Supplemental report submitted (if needed);
7. The court issued the final decree;
8. DCS forwarded the closed record and adoption case card through the Team Leader/designated staff to Adoption Services, Central Office.

B. Updating/Posting

Update information for the adoption controls listing regularly. Note activities performed.

IX. PROVIDING FINALIZATION SERVICES TO THE PROSPECTIVE ADOPTIVE PARENT

What: Provide services in the county where the prospective adoptive parents live.

When: The petitioners/prospective adoptive parents do not live in the county where the petition is filed.

Who: Permanency Specialist or qualified FSW

NOTE: Adoptive parents may file their adoption petition:

- where the petitioners reside;
- where the child resides;
- where the child resided when the child entered foster care (county of venue);
- in which is located any licensed child placing agency or institution operated under the laws of this state having custody or guardianship of the child or to which the child has been surrendered.

A. Adoption Control

Set up the case record and adoption control system, as appropriate.

B. Birth Verification

If birth verification has not been previously obtained, submit [Form CS-0456 - In-State Certification/Verification of Birth or Death](#) or [Form CS-0528 - Out-of-State Certification/Verification of Birth, Death, Marriage, or Divorce](#) to obtain this verification.

NOTE: Out-of-State verifications of birth, death, marriage or divorce must be submitted through DCS Fiscal Services with a copy of the court order awarding custody to DCS.

C. Responsibility

The area office that provides services to the child will be responsible for completing all confidential court reports, Consent to Adopt, and submitting certified copy of guardianship order and supplemental documents to the court.

D. Receipt of Adoption Petition in County Other Than County of Adoptive Parent's Residence

The Team Leader will acknowledge receipt of the petition to the court. The petition and order of reference will be forwarded to the adoption service staff in the area office providing services to the child.

E. Birth Certificate

(CR: Providing For the Issuance of a New Birth Certificate By Adoption)

F. Court Reports

(CR: Responding to the Receipt of an Adoption Petition/Order of Reference)

G. Final Decrees

The Team Leader receiving the final decree sends it to the area office providing services to the child to send to Adoption Services, Central Office at the time of submitting the record for permanent sealing.

H. Service Information System

Update TNKids and REACT. (CR: Policy 15.05 Registering and Maintaining Status of Children with REACT)

I. Sealing

Organize the case record for permanent filing. (CR: Preparing the Record for Permanent Filing)

X. PROVIDING FINALIZATION SERVICES WHEN PETITIONERS IN TENNESSEE MOVE TO ANOTHER STATE

What: Provide services when petitioners in Tennessee move to another state.

When: After a petition to adopt has been filed and the family moves to another state.

Who: Permanency Specialist or Qualified FSW

A. Adoption Case Control

Set up adoption control system. (CR: Maintaining Adoption Control)

B. Birth Verification

If birth verification has not been previously obtained, submit [Form CS-0456 - In-State Certification/Verification of Birth or Death](#) or [Form CS-0528 - Out-of-State Certification/Verification of Birth, Death, Marriage, or Divorce](#) to obtain this verification.

NOTE: Out of State verifications of birth, death, marriage or divorce must be submitted through DCS Fiscal Services with a copy of the court order awarding custody to DCS.

C. Referral

Immediately initiate a referral to the agency in the other state through the Team Leader/designated staff. (CR: Interstate Compact on Placement of Children)

Send four copies of [Form PH-1248, Department of Health Certificate of Adoption](#) to the receiving state via Interstate Compact.

D. Final Court Report/Consent to Adopt

Prepare two copies of the final court report.

Obtain the Team Leader's/designated staff's approval of the report.

Send the original of the Court Report and Consent to Adoption to the court clerk. (CR: Responding to the Receipt of an Adoption Petition/Order of Reference)

Maintain one copy of each in the case record.

Notify petitioner's attorney that the report has been submitted.
NOTE: If this is a DCS child, DCS will need to consent to the adoption by completing Consent to Adoption.

E. Court Hearings

Attend the court hearings as an observer only.

Do not participate in the hearing unless directed to do so by the judge, except when legal counsel represents DCS.

F. Continuing Service

Inform the agency in the other state of the court's action via ICPC 100B Interstate Compact Placement Request-Interstate Compact Report on Child's Placement Status. Suggest a plan for continued supervisory service if needed.

G. Form Department of Health Certificate of Adoption 1248

(CR: Providing for the Issuance of a New Birth Certificate by Adoption)

H. Service Information System

Update TNKids and REACT. (CR: [Policy 15.5 Registering and Maintaining Status of Children with REACT](#))

I. Closure of ICPC

The Team Leader/designated staff sends to the ICPC four copies of the following:

1. final court report;
2. final decree;
3. consent to adopt;
4. adoption assistance or deferred adoption assistance forms, if applicable.

J. Case Sealing

Organize the case record for permanent filing (CR: Preparing the Record for Permanent Filing).

XI. PROVIDING FINALIZATION SERVICES WHEN PETITIONERS IN ANOTHER STATE FILE PETITION IN TENNESSEE

What: Provide services when petitioners in another state file an adoption petition in Tennessee.

When: As necessary.

Who: Permanency Specialist or qualified FSW

A. Adoption Control

Set up adoption control system. (CR: Maintaining Adoption Control)

B. Acknowledge Receipt of Petition

Complete Acknowledgement of Receipt of Adoption Petition, Form CS-0443, a copy of the petition, and three copies of a letter outlining full information regarding the circumstances of filing the petition in Tennessee to the Team Leader. The Team Leader will then send two copies of the letter and the petition to the area legal staff.

C. Dismissal

When the court orders a dismissal of the petition, organize and forward the case record through the Team Leader to the Adoption Services Director, Central Office.

NOTE: If the court does not dismiss the petition, (CR: Providing Services When Petitioners in Tennessee Move to Another State).

POST ADOPTION SERVICES FOR ACCESS TO INFORMATION

I. PROVIDING NON-IDENTIFYING INFORMATION

What: Provide non-identifying information to an eligible person eighteen (18) years of age or older.

When: Upon receipt of an eligible person's written request for information and receipt of fee or fee waiver (as determined by Central Office staff).

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgment

Acknowledge receipt of the request. Check to see that the request:

1. Is written and signed by the eligible person;
2. Includes the adopted person's full legal name or birth name and date of birth;
3. Lists the full names of adoptive parent(s) or birth parent(s);
4. Identifies the specific information being requested.

Eligible persons, eighteen years of age or older, include the following:

1. An adopted person;
2. Adoptive parents or guardian of an adopted person under eighteen (18) years of age;
3. The adopted person's birth/legal/adoptive parent or step-parent;
4. The adopted person's birth and adoptive siblings;
5. The adopted person's lineal descendants;
6. The adopted person's birth and legal grandparent of any degree;
7. The adopted person's birth and legal aunts and uncles of any degree;
8. The adopted person's birth and legal first cousin;
9. The legal representative of any person listed above.

B. Sealed Record

Verify that a sealed record of the adoption is on file.

C. Receipt of Fee/Fee Waiver

Upon receipt of fee/fee waiver:

1. Advise requesting person procedure for submitting fee;
2. Fee waiver determinations will be made upon the request of the person requesting service;
3. Fee waivers based on a request include the requesting person's family unit being currently eligible for: Food Stamps, Temporary Assistance for Needy Families (TANF), Medicaid (TennCare) or Supplemental Security Income (SSI);
4. A sworn declaration, coupled with appropriate written documentation/verification of income and resources may be completed and the fee waived if the requesting person's family unit's income does not exceed the current Federal Poverty Guidelines and non-exempt resources do not exceed \$1,000.00.

D. Response

After opening the record, prepare and send to the eligible person a written report of the following available non-identifying information:

1. Adoptive person's date and time of birth, weight and other physical characteristics at birth;
2. Age of birth relatives at time of adopted person's birth;
3. Nationality, ethnic background, race and religious preference of adopted person's birth and legal relatives;
4. Educational level, general occupation, talents or hobbies of adopted person's birth and legal relatives;
5. General physical description of adopted person's birth and legal relatives;
6. The above information regarding birth and legal siblings of the adopted person;

7. Any available health history of the adopted person, and adopted person's legal and birth relatives.

NOTE: The Adoption Law does not authorize release of any information contained in the Adoptive Home Study.

II. RELEASING NON-IDENTIFYING INFORMATION FOR MINOR ADOPTED PERSON WHO COMES INTO AGENCY GUARDIANSHIP/CUSTODY

What: Release non-identifying information for a minor adopted person to a FSW.

When: Upon receipt of a written request from a FSW at the agency that holds guardianship/custody of the minor.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgment

Acknowledge receipt of the written request for non-identifying information from a FSW at the agency that holds guardianship/custody of a minor adoptee. Check to see that the request:

1. Is written and signed by the FSW;
2. Includes the adopted person's full name and date of birth;
3. Lists the full names of both adoptive parent(s);
4. Identifies the specific information being requested;
5. Includes the legal document/surrender verifying the child is in the custody/guardianship of the agency.

B. Sealed Record

Verify that a sealed record of the adoption is on file.

C. Response

After opening the record, prepare and send the FSW a written report of the following available non-identifying information.

Information which may be released from the record may include:

1. Adoptive person's date and time of birth, weight and other physical characteristics at birth;
2. Age of birth relatives at time of adopted person's birth;
3. Nationality, ethnic background, race and religious preference of adopted person's birth and legal relatives;

4. Educational level, general occupation, talents or hobbies of adopted person's birth and legal relatives;
5. General physical description of adopted person's birth and legal relatives;
6. The above information regarding birth and legal siblings of the adopted person;
7. Any available health history of the adopted person, and adopted person's legal and birth relatives.

NOTE: The Adoption Law does not authorize release of any information contained in the Adoptive Home Study.

III. TRANSMITTING MEDICAL INFORMATION REQUESTED AFTER FINALIZATION OF THE ADOPTION

What: Provide updated medical information.

When: Upon receipt of a written request from an eligible person and their appropriate licensed health care professional or licensed health care facility for updated medical information.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgement

Acknowledge receipt of the written request for up-dated medical information to the appropriate parties. Check to determine that the request:

1. Is written and signed by the eligible person and appropriate licensed health care professional or licensed health care facility;
2. Includes the adopted person's full legal name or birth name and date of birth;
3. Lists the full names of adoptive parent(s) and/or birth parent(s);
4. Identifies the specific information being requested and who information should come from;
5. Includes an explanation of the health care status of the person being treated and the reason the information is needed.

B. Sealed Record

After receiving the request for updated medical information (and all available medical reports), verify that a sealed record of the adoption exists.

C. Contact Persons

The Department shall, at no charge, contact the persons who have access to or who have or may have knowledge of such information and shall request that the persons provide such information to the Department for transmittal to the treating professionals or health care facility of the requesting party. Information released does not include any identifying information.

D. Release Of Information

Such information shall be provided to the Department by means of a specific release for a stated purpose and the release shall be time-limited.

E. Eligible Persons

Eligible persons, eighteen (18) years of age or older, who may request updated medical information are:

1. Adopted person;
2. Adoptive parents of an adopted person under eighteen (18) years of age;
3. Any birth or legal relative of an adopted person;
4. The legal representative of any person listed above.

NOTE: Updated medical information will not be sought for or from an alleged parent or relative.

IV. RELEASING MEDICAL INFORMATION RECEIVED AFTER FINALIZATION OF THE ADOPTION

What: Release non-identifying medical information to an eligible person.

When: Upon receipt of written information from a licensed health care professional or from a licensed health care facility which explains the health care status of persons who may be affected and why the transmission of such information to other persons is necessary.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Sealed Record

After receiving the medical information (and all available medical reports), verify that a sealed record of the adoption exists.

B. Conduct Search

Conduct a diligent search for the person or persons who may be affected and, if located, notify them, their parents, if applicable, or their legal representatives, if applicable, of the availability of and the nature of this information.

C. Release Information

Those persons may request in writing that the information be provided to them. Information released does not contain any identifying information.

D. Maintaining Information

Copies of all such updated information shall be maintained in the post-adoption record for future use.

E. Eligible Persons

Eligible persons, eighteen years of age or older, who may provide updated medical information are:

1. Adopted person;
2. Adoptive parents of an adopted person under eighteen (18) years of age;
3. Any birth or legal relative of an adopted person;
4. The legal representative of any person listed above.

NOTE: The alleged parent/relative is not an eligible person for transmittal of updated medical information.

V. PROVIDING ACCESS TO RECORDS FOR AN ELIGIBLE PERSON FOR ADOPTIONS PRIOR TO MARCH 16, 1951 AND ALL TENNESSEE CHILDREN'S HOME SOCIETY RECORDS

What: Provide access to records for an eligible person.

When: Upon a receipt of a written request from an eligible person and receipt of fee or fee waiver for service to be determined by Post Adoption staff.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgement Of Request from Adopted Person

Acknowledge receipt of the request. Check to see that request is written and signed by the adopted person and includes;

1. Full adoptive name, including adoptive mother's maiden name;
2. Birthdate;
3. Full names of adoptive parent(s) including mother's maiden name.

B. Acknowledgement Of Request From Adoptive Relatives

Acknowledge receipt of the request. Check to see that the request is written and signed by the requesting person and includes:

1. Adopted person's full adoptive name;
2. Adopted person's birthdate;
3. Full names of adoptive parent(s), including mother's maiden name;
4. Full name and date of birth of requesting person;
5. Relationship to the adopted person.

C. Acknowledgement Of Request From Birth Relatives

Acknowledge receipt of the request. Check to see that the request is written and signed by the requesting person and includes:

1. Adopted person's full birth name;
2. Adopted person's birthdate and place of birth (county, city, state);
3. Full name of birth parent(s), including mother's maiden name if known and married names(s) if known;

4. Full name and date of birth of requesting person;
5. Relationship to the adopted person.

NOTE: All requests must be dated and contain an address and a telephone number.

D. Receipt of Fee/Fee Waiver

Upon receipt of fee/fee waiver:

1. Advise requesting person procedure for submitting fee;
2. Fee waiver determinations will be made upon the request of the person requesting service;
3. Fee waivers based on a request include the requesting person's family unit being currently eligible for: Food Stamps, Temporary Assistance for Needy Families (TANF), Medicaid (TennCare) or Supplemental Security Income (SSI);
4. A sworn declaration, coupled with appropriate written documentation/verification of income and resources may be completed and the fee waived if the requesting person's family unit's income does not exceed the current Federal Poverty Guidelines and non-exempt resources do not exceed \$1,000.00.

E. Determine Eligibility

Determine that the requesting person is an eligible person based on information in the sealed agency record and information provided by the requesting person:

1. An adopted person twenty-one (21) years of age or older;
2. The adopted person's birth/adoptive/step or legal parent twenty-one (21) years of age or older;
3. The adopted person's birth or adoptive siblings twenty-one (21) years of age or older;
4. The adopted person's lineal descendants or lineal ancestors twenty-one (21) years of age or older;
5. The legal representative of any person listed above.

Determine that the record meets one of the following guidelines:

1. Any adoption attempted, finalized, or dismissed prior to March 16, 1951;
2. Any evidence demonstrating that a person was surrendered for adoption prior to March 16, 1951;
3. Any records maintained at any time by the Tennessee Children's Home Society;
4. Any agency records which were established on an individual directly from the Tennessee Children's Home Society.

NOTE: When no record is on file, DCS will search for records of the adoption when provided sufficient information to identify the court and/or agency and upon payment of fee or fee waiver.

F. Access Records

Advise requesting person in writing of eligibility to access records.

Eligible person may review agency and post adoption records by appointment.

Copy of agency and post adoption records provided at eligible person's request.

Provide written authorization of eligibility to access other sources of information.

NOTE: The adoption law does not authorize release of any information contained in the adoptive home study or any information that is crisis pregnancy counseling.

VI. PROVIDING ACCESS TO RECORDS FOR AN ELIGIBLE PERSON FOR ADOPTIONS FINALIZED ON OR AFTER MARCH 16, 1951

What: Provide access to records for an eligible person.

When: Upon a receipt of a written service request from an eligible person and receipt of fee or fee waiver which is determined by Post Adoption Staff.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgement Of Request From Adopted Person

Acknowledge receipt of the request. Check to see that request is written and signed by the adopted person and includes:

1. Full adoptive name and if married, married name;
2. Birthdate;
3. Full names of adoptive parent(s), including mother's maiden name.

B. Acknowledgement Of Request From Adoptive Relatives

Acknowledge receipt of the request. Check to see that the request is written and signed by the requesting person and includes:

1. Adopted person's full adoptive name;
2. Adopted person's birthdate;
3. Full names of adoptive parent(s), including mother's maiden name;
4. Full name and date of birth of requesting person;
5. Relationship to the adopted person.

C. Acknowledgement Of Request From Birth Relatives

Acknowledge receipt of the request. Check to see that the request is written and signed by the requesting person and includes:

1. Adopted person's full birth name;
2. Adopted person's birthdate and place of birth (county, city, state);
3. Full name of birth parents, including mother's maiden name if known and married names;

4. Full name and date of birth of requesting person;
5. Relationship to the adopted person.

NOTE: All requests must be dated and contain the address and telephone number.

D. Receipt of Fee/Fee Waiver

Upon receipt of fee/fee waiver:

1. Advise requesting person procedure for submitting fee;
2. Fee waiver determinations will be made upon the request of the person requesting service;
3. Fee waivers based on a request include the requesting person's family unit being currently eligible for: Food Stamps, Temporary Assistance for Needy Families (TANF), Medicaid (TennCare) or Supplemental Security Income (SSI);
4. A sworn declaration, coupled with appropriate written documentation/verification of income and resources may be completed and the fee waived if the requesting person's family unit's income does not exceed the current Federal Poverty Guidelines and non-exempt resources do not exceed \$1,000.00.

E. Determine Eligibility

Determine that the requesting person is an eligible person based on information in the sealed agency record and information provided by the requesting person.

1. An adopted person twenty-one (21) years of age or older;
2. The adopted person's birth/adoptive/step or legal parent is twenty-one (21) years of age or older;
3. The adopted person's lineal descendants or lineal ancestors twenty-one (21) years of age or older;
4. The legal representatives of any person listed above.

Determine that the record meets one of the following guidelines:

1. An adoption or attempted adoption where the adoption petition was filed on or after March 16, 1951;

2. An adoption which was finalized or dismissed on or after March 16, 1951;
3. Surrender/termination of parental rights was on or after March 16, 1951.

NOTE: When no record is on file, DCS will search for records of the adoption when provided sufficient information to identify the court and/or agency and upon payment of fee or fee waiver.

Determine the following criteria:

1. The adopted person must consent for all other persons to access the record;
2. The birth mother must consent to the release of the records when the adopted person's birth was the result of rape or incest;
3. A person whose parental rights were involuntarily terminated for cause, or their relatives, cannot access the record;
4. A person guilty of a crime of violence or neglect against the adopted person cannot access the record.

F. Access Records

1. Advice requesting person in writing of eligibility to access records and include the sworn statement;
2. All persons must sign a sworn statement agreeing he or she shall not contact or attempt to contact in any manner, by themselves or in concert with any other persons or entities, any of the persons eligible to file a contact veto;
3. Eligible person may review agency and post adoption records by appointment.
4. Copy of agency or post adoption records provided at eligible person's request;
5. Provide written authorization of eligibility to access other sources of information provided eligible person.

NOTE: The adoption law does not authorize release of any information contained in the adoptive home study or any information that is crisis pregnancy counseling.

VII. PROVIDING SERVICES PURSUANT TO A REQUEST FOR CONTACT

What: Search for an eligible individual with whom contact is requested by an individual eligible to have access to adoption records.

When: Upon receipt of the sworn statement listing the class of individuals with whom contact is desired and receipt of fee or fee waiver for service to be determined by Post Adoption Staff.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Acknowledgement

Acknowledge receipt of the request. Review to determine if request for contact is with persons eligible to file with the Contact Veto Registry:

1. Birth and adoptive parents;
2. Birth and adoptive siblings;
3. Lineal ancestor of the adopted person;
4. Lineal descendant of the adopted person;
5. Spouse of the adopted person;
6. The legal representative of any persons listed above.

NOTE: The adopted person is not required to file with the Contact Veto Registry.

B. Review Contact Veto Registry

Search Registry to determine if the person with whom contact is desired has filed.

If the person has filed on the Registry:

1. Notify the person of desired contact;
2. Give the person the opportunity to vary or withdraw registration;
3. Notice of permission or denial for contact is sent to the person requesting contact.

If the person has not filed with the Registry:

1. Conduct a diligent search for the person;
2. Give the person the opportunity to file with the Registry;
3. Notice of permission or denial for contact is sent to the person requesting contact.

C. Failure to Locate

If the person with whom contact is sought cannot be located after a diligent search, the requesting person will be sent notification by DCS and will be under no further restrictions against contact with that person, unless the person has registered an automatic veto on the Contact Veto Registry. Reference VII-2.

VIII. PROVIDING SERVICES PURSUANT TO A REQUEST TO REGISTER WITH THE CONTACT VETO REGISTRY

What: Register a person's willingness or unwillingness for contact with eligible persons who seek contact with them.

When: Upon receipt of a completed Contact Veto Registry Form and receipt of fee or fee waiver to be determined by Centralized Permanency Services Staff.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Request for Service

Requests for Contact Veto Registry may be made by telephone, in writing or in person to the Post Adoption Services, Centralized Permanency Services.

Forms will be made available to requesting persons.

Proof of identity must be provided.

A fee must accompany the completed form for fee waiver.

B. Registration

Acknowledge receipt of the request.

Review the form to ensure that the form has been completed accurately and contains all required information and original signature.

Enter information on the system.

Send a copy of the form to requesting person with acknowledgment of services completed.

IX. PROVIDING SERVICES PURSUANT TO A REQUEST TO REGISTER WITH THE ADVANCED NOTICE REGISTRY

What: Register a person's desire to receive advance notification prior to the release of adoption records.

When: Upon receipt of a completed advanced notice registration form and receipt of fee or fee waiver (to be determined by Central Office staff).

Who: Centralized Permanency Services Post Adoption Program Staff

A. Eligibility

The following people are eligible to file with the Advance Notice Registry:

1. The adopted person 21 years of age or older;
2. The adopted person's birth/adoptive/step or legal parent 21 years of age or older;
3. The adopted person's birth or adoptive siblings 21 years of age or older;
4. The adopted person's lineal ancestors 21 years of age or older;
5. The adopted person's lineal descendants 21 years of age or older;
6. The legal representatives of any of these persons.

B. Request for Service

Requests for Advanced Notice Registry may be made by telephone, in writing or in person to Post Adoption Services, Central Office.

Forms will be made available to requesting persons.

Proof of identity must be provided.

A fee must accompany the completed form.

C. Registration

Acknowledge receipt of the request.

Review the form to ensure that the form has been completed accurately and contains all required information and original signature.

Enter information on the system.

Send a copy of the form to requesting person with acknowledgment of services completed.

D. Notification

The person filing with the Advance Notice Registry will only be notified of the impending release of records when such records contain identifying information about the filing person and the filing person meets all of the eligibility requirements.

Notification of the impending release of records will be sent by certified mail, (return receipt requested) at the address of the most recent form filed with the Registry.

Release of records will be delayed 15 days from the date of mailing the notice of impending release of records.

NOTE: Persons ineligible to access adoption records and receive Advance Notification include:

1. A parent or pre-adoptive guardian whose rights were involuntarily terminated for cause;
2. A sibling, lineal ancestor, spouse or legal representative of the person whose rights were involuntarily terminated for cause;
3. A person guilty of a crime of violence or neglect against the adopted person.

Registration must be on a form supplied by the Department, and contain an original signature. Forms may be requested by contacting:

*Tennessee Department of Children's Services
Post-Adoption Unit
436 6th Avenue North
8th Floor Cordell Hull Building
Nashville, TN 37243
Telephone: 615-532-5637*

X. RELEASING INFORMATION UPON COURT ORDER

What: Release designated identifying information.

When: Upon receipt of a court order.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Sealed Record

Open the sealed record to verify the adoption and the appropriate court.

B. Requested Information

Provide, in writing, the information as ordered by the court to the designated person.

XI. FORWARDING REQUESTS TO THE CENTRAL OFFICE

- What:** Forward written requests received in a Regional Office to the Post Adoption Services.
- When:** Upon receipt of a request for service.
- Who:** Regional Office Staff/Centralized Permanency Services Post Adoption Program Staff
-

A. Adult Adopted Person Referral

Include in the initial referral to the Post Adoption Services the following information:

1. Adopted person's current name, adoptive name, and date of birth;
2. Full name(s) of adoptive parent(s);
3. Specific information being requested and/or provided;
4. Address of the individual to whom the Post Adoption program staff is to write to acknowledge the request.

B. Birth Family Referral

Include in the referral to the Post Adoption Services the following information:

1. Adopted person's birth name, date, and place of birth;
2. Birth parents' full names, including the mother's maiden name and any other married names and marital status at adopted person's birth;
3. Birth relationship of the individual making the request to the adopted person;
4. Identify specific information being requested and/or provided by the relative;
5. Address of the individual to whom the Post Adoption program staff is to write to acknowledge the request.

C. Legal Family Referral

Include in the initial referral to the Post Adoption Services the following information:

1. Adopted person's full adoptive name and date of birth;

2. Relationship of the individual making the request to the adopted person;
3. Full names of adoptive parent(s);
4. Identify specific information being requested and/or provided;
5. Address of the individual to whom the Post Adoption program staff is to write to acknowledge the request.

XII. POST ADOPTION INQUIRY FILES MAINTENANCE

What: DCS maintains a file of all written contacts or inquiries received from and/or in behalf of an adopted person.

When: After sealing an adoption record and upon receipt of a written request for service or inquiry.

Who: Centralized Permanency Services Post Adoption Program Staff

A. Case File

A post adoption case file will be established and maintained in Central Office at any point a written inquiry or request for service is received.

XIII. RELEASING INFORMATION FOR THE TRANSFER OF SOCIAL SECURITY BENEFITS, VETERANS BENEFITS, OR OTHER BENEFITS FROM BIRTH PARENTS

What: Provide to a DCS Regional office the information necessary for the transfer of a minor adopted person's benefits to the adoptive parent(s) or to an adult adopted person.

When: After receiving a written request for the information from the Regional office.

Who: Centralized Permanency Post Adoption Program Staff

A. Retrieve Sealed Record

Review record to identify relationship of adopted person and wage earner, veteran or beneficiary. Obtain necessary information from record.

B. Response

Submit in writing to the area office the information regarding the wage earner, veteran or beneficiary (name and social security number or VA claim number, etc.).