

Services Agreement Review- Instructions

Which Cases

Services Agreement Reviews are to be completed prior to each Permanency Planning Action Team meeting. At a minimum, reviews must be held within 60 days of custody and placement, 90 days from that date and every six months thereafter. Use the first page to capture family information, and then attach one set of pages 2 and 3 to record information for each individual child in agency custody or planning responsibility.

Note: Emancipated minors and young adults ages 18 to 21 who are participating voluntarily in a CARS agreement (form DSS-5108) have a different review process than do juveniles. See Foster Care policy manual, “Adolescent Services.”

Purpose:

To facilitate transfer of information from one service agreement review to the next so that the appropriateness of the permanency plan, placement, the parents’ progress, and the effectiveness of agency and community services are reviewed regularly.

Page 1

I. Family information

Enter the Family name, social worker’s name, and the date of this review. If this is an update, place a check in the space provided.

List each child in the family. For children in DSS custody, provide all information requested. Use the codes listed for primary and alternative permanency plan. If one or more of the children are not in DSS custody, only enter the name and date of birth, indicating the child’s current living arrangement in the space for “current placement provider.”

Review Notification

Indicate the dates and means by which the parents, placement providers and children ages 12 to 18 were notified of the planning meeting. If any of these parties were not notified about the review, justify that decision or document why notification was not possible.

II. Participants in Review and Relationship to Family

Enter the name of the persons participating in the review. Have each participant initial by their name under the date of the review to indicate their participation. State the relationship or role within the family: social worker, foster parent, GAL, father, child’s sibling.

Note: Complete a separate Page 2 and Page 3 for each child in the family for which the agency has custody and/or placement responsibility.

Page Two- Individual Child information.

Place the full name of the child in the space provided at the top of page two.

III. Summary of Recommendations from Last Review:

If this is an update, state the recommendations made at the last review that are specific to this child. If this is the initial plan, write “N/A-Initial” in the space

IV. Issues to be Discussed By Team

Self-explanatory for initial meeting

Permanency Requirements

V. Placement and Permanency Plan Review

- a. **Are the conditions which necessitated placement still present?** Describe any barriers or safety issues that prevent the permanency plan from being realized for this child and steps that are needed to assure timely permanence.
- b. **Is the current placement appropriate to meet the child’s needs?** Check “Yes” or “No” for each element listed. If the answer is “No,” explain why and what type of placement would be appropriate. Some examples of other factors influencing the placement choice may include:
 - Child’s functioning and behaviors
 - Child’s medical, educational, and developmental needs;
 - Child’s history and past experience
 - Child’s religious and cultural needs;
 - Child’s connection with the community, school, or faith community
 - Placement with the sibling is not in the child’s best interests; (state why)
 - Placement is due solely to the child’s own behavior; (specify)
 - Placement is with a non-custodial parent who is not the parent of all the siblings.

Page Three

- c. **Are the primary and alternate permanency plan goals appropriate for this child?** If not, explain why and specify what plan goal would be appropriate.

d. Timely permanence

North Carolina General Statute 7B-907(d) requires that the agency file TPR on children who have been in care at least 12 of the past 22 months or that the reason for not filing for termination is justified. Complete the section.

VI. **Services Review:** Specify services that have been implemented to assist the child and family to address barriers to permanence. Attach any supporting documents that are not attached to the Services Agreement.

- a. What agency efforts have been made to achieve this child's permanency plan?
- b. What services are being provided to the family by other community agencies in support of the permanency plan? What other services are needed?

VII. **Family Progress:** Describe family progress toward eliminating the needs defined on the Family Services Agreement, and indicate if the need is partially or completely resolved. Also describe any other progress toward improving the family's well-being.

VIII. **Team Recommendations and Comments:** If the child is to continue in custody, the team's recommendations should be summarized to carry forward to the next review date.

Document the next review date. NOTE: All participants in the review should be informed of the next meeting date prior to adjournment of the meeting. Parents, caregivers, and youth ages 12 to 18 who were not in attendance should be immediately notified in writing of the recommendations from the review and the date of the next scheduled review.

Update of DSS-5094: Indicate the date that the DSS-5094 was updated to reflect all changes. Worker's signature is required.