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701 Scope and Purpose

Adoption presents an opportunity for children who cannot safely remain in their own homes to have permanency in their lives. It is an important process that allows the Division of Family and Children, when appropriate, to pursue the best interests of a child by matching a child with an appropriate adoptive family.

The chart on the following page outlines the general adoption process as it affects three (3) distinct but interrelated groups: (1) the child needing a new family; (2) parents unable to continue rearing their child; and (3) adults who wish to parent children not born to them.

The content of this section constitutes the official policy of the Division of Family and Children (DFC). County Offices of Family and Children (COFCs) are required to adhere to these guidelines in order to implement the adoption program.

702 Legal Base

Adoption of children in Indiana is governed by:

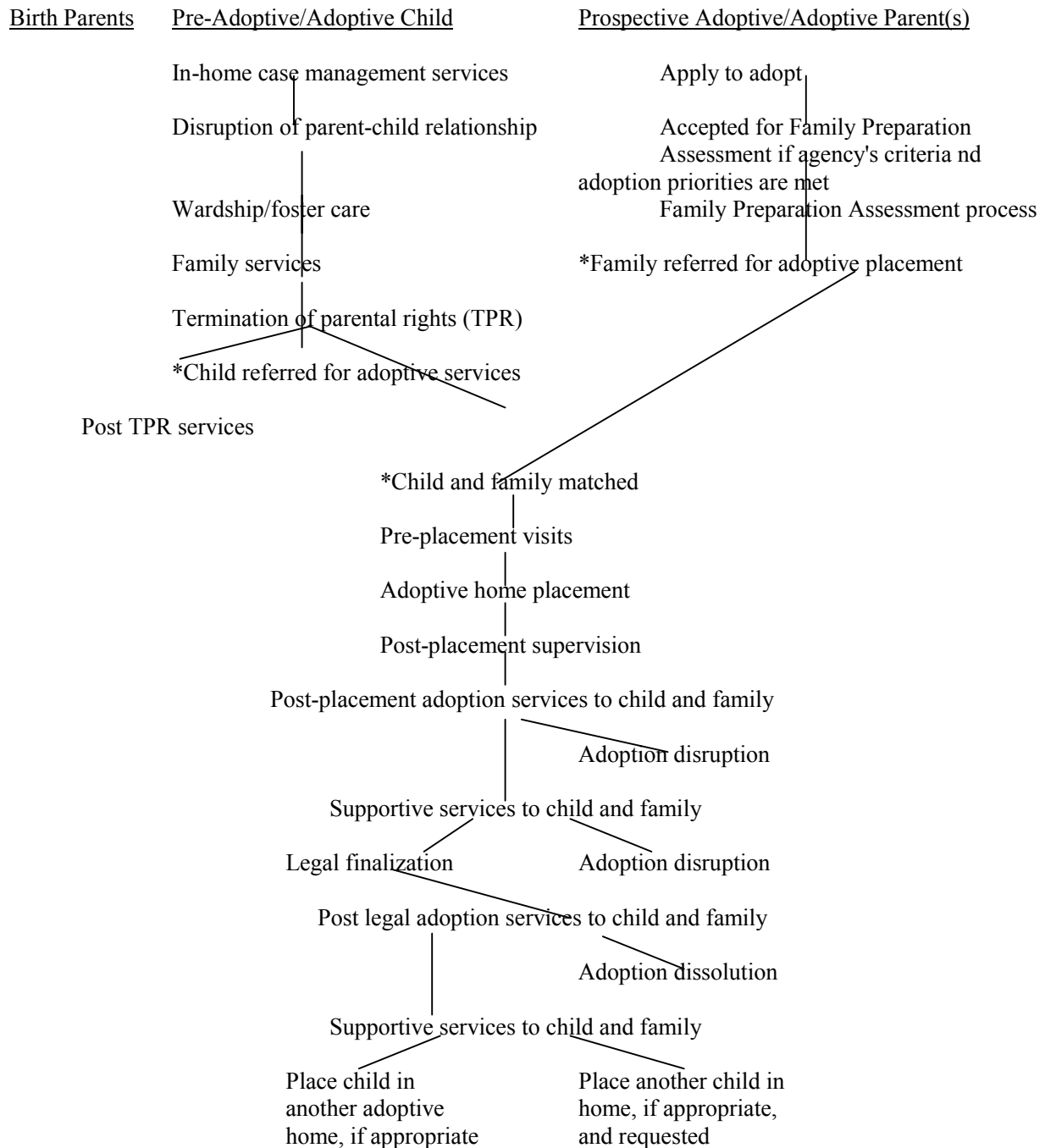
- (1) the Indiana Juvenile Code (IC 31-30 through IC 31-40);
- (2) the Indiana Adoption Code (IC 31-19);
- (3) the federal Interstate Compact on the Placement of Children (ICPC) (IC 12-17-8);
- (4) the federal Multiethnic Placement Act of 1994 (MEPA) [42 USC 622(b)(9)]; and
- (5) the federal Interethnic Adoption Provisions (IEAP) (42 USC 1996b).

The Juvenile Code (IC 31-35) addresses court termination of parental rights, both voluntary and involuntary. The Adoption Code addresses the adoption process from the filing of the petition to the requirements for adoption records and assistance. IC 31-19-27 of the Adoption Code specifically requires the State of Indiana to develop, implement and maintain a Special Needs Adoption Program. The Interstate Compact on the Placement of Children (ICPC) governs interstate and intercountry adoptive placements, the latter in conjunction with the Immigration and Naturalization Service (INS). See Section 5 of this manual for additional information concerning ICPC. The Multiethnic Placement Act of 1994 (MEPA) and the Interethnic Adoption Provisions (IEAP) define how decisions are to be made regarding the adoptive placement of children relative to race/ethnicity.

MEPA and IEAP remove barriers to permanency for children who are in the child welfare system. The purpose of this law is to:

- (1) decrease the length of time children wait to be adopted;
- (2) facilitate the recruitment and retention of foster and adoptive parents who can meet the needs of children awaiting placement; and
- (3) eliminate discrimination on the basis of the race, color, or national origin of the child or the prospective parent.

Indiana policies based upon MEPA and IEAP appear throughout this section.



*At these junctures, the child who has special needs as defined in subsection 707.1 and the family interested in adopting a special needs child are referred to a Special Needs Adoption Program (SNAP) specialist for preparation and to a regional SNAP team for matching services.

Before a child can be adopted, legal steps must be taken to sever the existing relationship between the child and any living parent. This can be done either through obtaining the voluntary consent of the parent (s) or by petitioning for a court proceeding to terminate parental rights involuntarily. Termination of parental rights always requires court authorization.

703.1 Voluntary Termination of Parental Rights

When a parent desires to relinquish parental rights to a child, the following procedures are to be used.

703.11 Taking Consents

IC 31-19-9 of the Adoption Code defines how to obtain consents to adoption.

703.111 When Consents Are Required

IC 31-19-9-1 identifies the situations in which a written consent is required before a petition for adoption may be granted. These consents are required from the following:

- (1) Each living parent of a child who is born in wedlock.
- (2) The mother of a child born out of wedlock and the father of a child whose paternity has been established by:
 - (a) a court proceeding other than the adoption proceeding, except as provided in IC 31-14-20-2 (Failure to register on putative father registry; effect on paternal rights in adoption proceedings); or
 - (b) a paternity affidavit executed under IC 16-37-2-2.1 (Paternity affidavits);

unless the putative father gives implied consent to the adoption. See subsection 703.1323.

- (3) Each person, agency, or county office of family and children (COFC) having lawful custody of the child whose adoption is being sought.
- (4) The court having jurisdiction of the custody of the child, if the legal guardian or custodian of the person of the child is not empowered to consent to the adoption.
- (5) The child to be adopted, if more than 14 years of age.
- (6) The spouse of the child to be adopted.

A parent under the age of 18 years may consent to an adoption of the parent's child without the concurrence of the child's grandparent (s), or the guardian of the parent, unless the court determines that it is in the best interest of the child to be adopted to require such a concurrence.

A copy of State Form (SF) 12582/FPP1331 "Consent to Adoption", may be found in Appendix A of this section.

703.112 When Consents Are Not Required

IC 31-19-9-8 identifies the situations in which consents to adoption are not required. Consents are not required from any of the following:

- (1) A parent(s), if the child is adjudged to have been abandoned or deserted for six (6) months or more immediately preceding the date of the filing of the adoption petition.
- (2) A parent of a child in the custody of another person, if for a period of at least one (1) year, the parent:
 - (a) fails without justifiable cause to communicate significantly with the child when able to do so; or
 - (b) knowingly fails to provide for the care and support of the child when able to do so as required by law or judicial decree.
- (3) The parent(s) who:
 - (a) has been convicted of specific crimes;
 - (b) had parental rights terminated by court order with respect to a biological or adoptive sibling of a child who is a child in need of services; or
- (4) The biological father of a child born out of wedlock whose paternity has not been established:
 - (a) by a court proceeding other than the adoption proceeding; or
 - (b) by executing a paternity affidavit under IC 16-37-2-2.1.
- (5) The biological father of a child born out of wedlock who was conceived as a result of:
 - (a) a rape for which the father was convicted under IC 35-42-4-1;
 - (b) child molesting (IC 35-42-4-3);
 - (c) sexual misconduct with a minor (IC 35-42-4-9); or
 - (d) incest (IC 35-46-1-3).
- (6) The putative father of a child born out of wedlock if the putative father's consent to adoption is irrevocably implied. (See subsection 703.1323.)

- (7) The biological father of a child born out of wedlock if the:
 - (a) father's paternity is established after the filing of a petition for adoption in a court proceeding or by executing a paternity affidavit under IC 16-37-2-2.1; and
 - (b) father is required to, but does not register with the putative father registry established by IC 31-19-5 within the period required by IC 31-19-5-12. See subsection 703.1321.
- (8) A parent who has relinquished the parent's right to consent as provided under IC 31-19-9.
- (9) A parent after the parent-child relationship has been terminated under IC 31-35.
- (10) A parent judicially declared incompetent or mentally defective if the court dispenses with the parent's consent to adoption.
- (11) A legal guardian or lawful custodian of the person to be adopted who has failed to consent to the adoption for reasons found by the court not to be in the best interests of the child.

Notice of hearing on a petition for adoption need not be given to a person whose consent has been filed with the petition or to a person whose consent is not required by (4) through 8) above. (IC 31-19-4-11)

Where the parent-child relationship has been terminated under IC 31-35, notice of the pending adoption proceedings shall be given to the licensed child placing agency or county office of which the child is a ward. (IC 31-19-4-12)

703.12 How to Take Consents

The COFC has a responsibility to discuss with the birth parent(s) the ramifications of adoptive placement as well as other options available to them. Caution is urged in taking the consent from the mother of a newborn child too quickly. By policy, it is mandatory that consents not be taken within the first 48 hours after birth. In the event the birth mother leaves the hospital or in the event the birth mother wishes to separate herself from the newborn, a temporary consent may be taken. This is a voluntary relinquishment and is entered into ICWIS as a Service Request. Birth parents who volunteer to release their child for adoption shall be advised of their legal and constitutional rights and the consequences of their actions as follows: (IC 31-35-1-12)

- (1) Their consent is permanent. It is irrevocable and cannot be set aside unless the consent was taken under duress or a parent is incompetent.
- (2) Termination of the parent-child relationship by the court means that all rights, powers, privileges, immunities, duties and obligations, including rights to custody, control, visitation or support relative to the relationship are

permanently ended. Therefore, the consent of the parents to the child's adoption is not required.

- (3) The parents have a right to:
 - (a) care, custody and control of their child as long as the parents fulfill parental obligations;
 - (b) a judicial determination of any alleged failure to fulfill their parental obligations in a delinquency or child in need of services (CHINS) proceeding;
 - (c) assistance in fulfilling their parental obligations after a court determination that they are not fulfilling them.
- (4) Proceedings to terminate the parent-child relationship involuntarily can be initiated only after:
 - (a) the child has been adjudicated a delinquent or a child in need of services (CHINS) and removed from the parents; or
 - (b) a parent has been convicted and imprisoned for murder, causing suicide, voluntary or involuntary manslaughter, rape, criminal deviate conduct, child molesting, child exploitation, sexual misconduct with a minor or incest perpetrated upon a victim who was less than 16 at the time of the offense and is the biological, adoptive or stepchild of the perpetrator, and the child has been removed from the custody of the parents under a dispositional decree for a period of six (6) months by order of the court.
- (5) Representation by an attorney, provided by the state if necessary, must be provided throughout involuntary termination proceedings.
- (6) Notice of the hearing at which the court will decide if their consent was voluntary must be provided. The parents may appear and allege that it was not.

Parents also shall be advised of:

- (1) the requirement that consents be notarized or signed in front of the judge of the court of original jurisdiction; and
- (2) their option to sign a written non-release form which is to be filed with the State Registrar as evidence of the birth parents' lack of consent to the release of identifying information under IC 31-19-25-3. See subsection 720.51 for additional information concerning non-release forms.

703.13 Special Circumstances Regarding Voluntary Termination of Parental Rights

The following is an enumeration of some specific types of situations that may arise in the course of voluntary termination of parental rights proceedings. Each requires specific procedures to resolve the issues.

703.131 Unknown or Absent Parent

See subsection 703.224 regarding methods of locating absent parents. If one parent has made a valid consent and

- (1) the other parent cannot be located, after a good faith effort has been made to do so; and
- (2) the other parent has been served with a notice of the proceedings in the most effective means possible, (personal service or publication, as applicable); and
- (3) an investigation as to the whereabouts of the absent parent has been completed by the court through a family case manager (FCM) or probation officer,

then the court may enter a default judgment on the record against the unavailable parent and terminate the rights of both parents.

In the case of the unknown or unidentified parent, a "John Doe" publication is appropriate. The birth mother who refuses to identify the birth father is to sign an affidavit to that effect. Legal staff of the county office of family and children (COFC) is responsible for providing personal service publication and securing the required affidavits.

703.132 Refusal or Failure of Putative Father to Give Consent

IC 31-19-4 identifies the procedure to be followed if the putative father of a child born out of wedlock has failed or refused to consent to the adoption of the child or has not had the parent-child relationship terminated under IC 31-35.

NOTE: A "putative father" is defined in IC 31-9-2-100 as a male of any age who is alleged to be or claims that he may be a child's father but who:

- (1) is not presumed to be the father under IC 31-14-7-1(1) or IC 31-14-7-1(2); and
- (2) has not established paternity of the child :
 - (a) in a court proceeding; or
 - (b) by executing a paternity affidavit under IC 16-37-2-2.1.

A person is presumed to be the father if he:

- (1) is or was married to the child's mother either by a legal ceremony or one solemnized in apparent compliance with the law but which is void or voidable, and the child was born within 300 days after the marriage is terminated;
- (2) executed a paternity affidavit; or

- (3) underwent blood tests indicating 99% probability that he is the child's father.

703.1321 Notices to the Named/Unnamed Putative Father

The putative father shall be given notice of the adoption proceedings in one of two formats that are outlined in IC 31-19-4-4 (Notice to unnamed father) and IC 31-19-4-5 (Notice to named father). These formats are substantially the same except for the use of the term "unnamed putative father" and the actual name of the putative father.

These notices contain:

- (1) the term "unnamed putative father" or the actual name of putative father and birth mother's name;
- (2) date of birth of child;
- (3) date petition was filed;
- (4) name and address of court in which the petition to adopt was filed;
- (5) procedure for the putative father to follow if he wishes to contest the adoption of the child or establish paternity;
- (6) time constraints for filing the motion to contest the adoption or to establish paternity; and
- (7) consequences if the putative father does not file the motion to contest the adoption or establish paternity within the time constraints (within 30 days after the date of service of the notice) or fails to establish paternity within a reasonable period of time as determined by the paternity court.

Per IC 31-19-5-18, a putative father who fails to register with the putative father registry within 30 days after the child's birth or the date that the petition for the child's adoption was filed, whichever occurs later, waives notice of an adoption proceeding. The putative father's waiver under this section constitutes an irrevocably implied consent to the child's adoption.

703.1322 Service of Notice to the Named /Unnamed Father

The following steps must be taken to serve notice to the named or unnamed father:

- (1) Service of notice to the named or unnamed father must be made according to Rule 4.1 (Summons: Service on individual) or Rule 4.13 (Summons:

Service by Publication) of the Indiana Rules of Trial Procedure. Refer to DFC attorney for assistance. (IC 31-19-4-7)

- (2) The notice that must be sent to the putative father may be waived in writing by the putative father before or after the birth of the child. (IC 31-19-4-8)
- (3) The father of the child or person alleged to be the father who is served with notice under subsection 703.1322 may file an objection to the adoption in accordance with IC 31-19-10. See subsection 703.133.

703.1323 Implied Consent of Putative Father

In accordance with IC 31-19-9-12, a putative father's consent to adoption is irrevocably implied without further court action if he:

- (1) fails to file a motion to contest the adoption within thirty (30) days after service (IC 31-19-10) and fails to file a paternity action under IC 31-14;
- (2) files a motion to contest the adoption in accordance with IC 31-19-10 and fails to appear at the hearing set to contest the adoption;
- (3) having filed a paternity action under IC 31-14, fails to establish paternity in the action within the prescribed time period (IC 31-14-21-9 through IC 31-14-21-11); or
- (4) is required but fails to register with the putative father registry established by IC 31-19-5 within the period under IC 31-19-5-12. See subsection 703.1321 for time frame.

A putative father whose consent to adoption is implied under IC 31-19-9-12 or IC 31-19-5-18 is not entitled to challenge:

- (1) the adoption; or
- (2) the validity of his implied consent to the adoption.

A putative father whose consent to adoption of a child is implied under IC 31-19-9 12 or IC 31-19-5-18 is not entitled to establish paternity under IC 31-14.

703.133 The Contesting of an Adoption

IC 31-19-10 prescribes procedures for contesting an adoption as follows:

- (1) A person contesting an adoption must file a motion to contest the adoption with the court within 30 days after service of notice of the pending adoption.
- (2) Whenever a motion to contest an adoption is filed, the court shall, before entering a decree under IC 31-19-11, set the matter for a hearing to contest the adoption.
- (3) After hearing evidence at the hearing, the court shall:
 - (a) dismiss the adoption petition if the court:
 - (i) finds that the person who filed the motion to contest the adoption has established that it is in the best interests of the child that the motion be granted;
 - (ii) finds that a required consent has not been obtained in writing or has been implied under IC 31-19-9 (see subsection 703.1323);
 - (iii) permits a necessary consent to be withdrawn; or
 - (b) deny the motion to contest the adoption.
- (4) The court may:
 - (a) send all notices of the filing of a motion to contest an adoption; and
 - (b) conduct *bifurcated hearings under IC 31-19-10.

NOTE: A putative father is barred from establishing paternity under IC 31-14 if his motion to contest the adoption has been denied under IC 31-19-10.

703.14 How to Petition for Voluntary Termination of Parental Rights

IC 31-35-1 specifies the requirements for petitioning for a voluntary termination of parental rights. The petition may be filed either in probate or juvenile court by the COFC or a licensed child placing agency (LCPA) and must allege that:

- (1) the parents are the biological or adoptive parents;
- (2) the parents, including the alleged or adjudicated father, knowingly and voluntarily consent to the termination;
- (3) termination is in the child's best interests; and
- (4) the petitioner has a satisfactory plan for the care and treatment of the child.

A copy of State Form 12587/FPP 1331A, "Voluntary Relinquishment of Parental Rights", may be found in Appendix B of this section.

The court of jurisdiction has responsibility to notify the parents of the hearing to terminate their rights. The court may direct the COFC legal staff to assume this responsibility. Such notification should be by personal service as specified by IC 31-32-9. In actions to terminate parental rights, if the parent cannot be notified by personal service, service must be by *publication. Publication can be done only by order of the court.

The parents must consent to termination of parental rights in open court unless the court, finds that the parents:

- (1) gave consent in writing before a person authorized by law to take acknowledgments (COFC family case managers (FCMs) can take consents. However, the signing of the consents must be witnessed by a notary public.);
- (2) were notified of their rights and the consequences of their action as specified by IC-31-35-1-12; and
- (3) failed to appear.

However, according to IC 31-35-1-7, before entering an order of termination, the court must inquire about the reason for the parents' absence. The court may require an investigation by a probation officer to determine if there is any evidence of fraud or duress and to establish that the parents were competent to give their consent. The person responsible for conducting such investigation must enter it on the record under oath.

* See Glossary for definition of term.

Before a consent may be given in court, the court must advise the parents of their rights and the consequences of their actions relative to termination of parental rights. Parents under 18 years of age may give their consent without the approval of the court or their guardian if they are competent except for their age. Incompetent parents may consent only with the approval of the court or their guardian.

In all cases involving a voluntary relinquishment of parental rights, the COFC is to petition the court for a voluntary termination as quickly as possible as is appropriate and in the best interests of the child. By doing so, the child may be placed for adoption without fear of disruption due to the withdrawal of the relinquishment and consent by the parent(s).

703.2 Involuntary Termination of Parental Rights

The following procedures are used to terminate a parent's rights to a child in need of services (CHINS) or a delinquent child.

703.21 When to Petition

IC 31-35-2-4 contains specifics as to what a petition to involuntarily terminate parental rights on a child in need of services (CHINS) or a delinquent child must include. They are that:

- (1) one of the following exists:
 - (a) The child has been removed from the parent for at least six (6) consecutive months under a dispositional decree.

- (b) The court has made a finding under IC 31-34-21-5.6 that reasonable efforts for family preservation or reunification are not necessary.
 - (c) After July 1, 1999, the child has been removed from the parent and has been under the supervision of a county office (COFC) for at least 15 of the most recent 22 months.
- (2) there is reasonable probability that:
 - (a) the conditions that resulted in the removal will not be remedied; or
 - (b) the continuation of the parent-child relationship poses a threat to the well-being of the child;
 - (3) termination is in the child's best interests; and
 - (4) there is a satisfactory plan for the care and treatment of the child.

The petition must indicate whether at least one (1) of the following factors listed in IC 31-35-2-4.5(d) applies that would require the court to dismiss the petition to terminate the parent-child relationship. The petition must also specify each factor that would apply as the basis for the dismissal of the petition. Such factors include:

- (1) The current case plan has documented a compelling reason why terminating the parent-child relationship is not in the best interests of the child. An example would be that a parent, stepparent, grandparent sibling, aunt, or uncle or a relative is caring for the child as a guardian.
- (2) IC 31-34-21-5.6 regarding exceptions to the requirement to make reasonable efforts to preserve and reunify families does not apply to the child.
- (3) Reasonable efforts to reunify a child with the child's family are required; and the COFC has not provided family services to the child, parent, or family of the child in accordance with a currently effective case plan, a permanency plan or dispositional decree which calls for permitting and facilitating safe return of the child to the child's home; and either
 - (a) the period for completion of the program of family services has not expired; or
 - (b) the services that the COFC has not provided are substantial and material in relation to implementation of a plan to permit a safe return of the child to the child's home.

703.22 How to Petition for Involuntary Termination of Parental Rights

According to IC 31-35-2-4, a petition to terminate parental rights regarding a child in need of services or a delinquent child may be signed and filed in juvenile or probate court by:

- (1) the attorney for the county office;

- (2) the prosecutor;
- (3) the child's court appointed special advocate (CASA); or
- (4) the child's guardian ad litem (GAL).

The petition must allege that the circumstances outlined in 703.21 above exist. Whenever a hearing on the petition for involuntary termination of parental rights is requested, the court is required to commence the hearing not more than 90 days after such a petition is filed. The person filing the petition may request the court to set the petition for a hearing. Upon the filing of the petition to terminate parental rights, the COFC attorney or the prosecutor shall represent the interests of the State in all subsequent proceedings on the petition.

703.221 Right to Notice and the Opportunity to be Heard

IC 31-35-2-6.5 requires that at least 10 days before a hearing on a petition or motion to terminate the parent-child relationship or a hearing or motion to dismiss the petition to terminate the parent-child relationship, the party who filed the petition or motion will notify the following persons of the hearing:

- (1) The child's parent, guardian, or custodian.
- (2) The child's foster parent, by certified mail or face-to-face contact with the family case manager (FCM).
- (3) A prospective adoptive parent named in a petition for adoption of the child if:
 - (a) each consent to adoption of the child that is required has been executed in the form and manner prescribed and filed with the COFC;
 - (b) the court having jurisdiction in the adoption case has determined that consent to adoption is not required from parent, guardian, or custodian; or
 - (c) a petition to terminate the parent-child relationship between the child and any parent who has not executed a written consent to adoption under IC 31-19-9-2, has been filed under IC 31-35 and is pending.
- (4) any person who:
 - (a) the COFC knows is currently providing care for the child; and
 - (b) is not required to be licensed under IC 12-17.2 or IC 12-17.4 to provide care for the child.

- (5) any other suitable relative or person who the COFC knows has had a significant or caregiving relationship to the child.
- (6) any emergency medical services provider who has taken custody of an abandoned infant under IC 31-34-2.5.
- (7) any other party to the child in need of services proceeding.

The court is required to allow the persons listed above the opportunity to be heard and make recommendations to the court at the hearing. This includes the right to submit a written statement to the court that may be made a part of the court record if served upon all parties to the CHINS proceeding. However, this privilege does not permit the prospective adoptive parent, emergency medical services provider, and the foster parent party status at the hearing. See Appendix C for a sample copy of SF48998/ FPP0003 Notice of Hearing to Terminate the Parent-Child Relationship.

703.222 Conviction of Parent as Grounds for Termination of Parental Rights

IC 31-34-21-5.6 states that at any phase of a child in need of services (CHINS) proceeding, a court may make a determination that reasonable efforts to preserve or reunify a family are not required if:

- (1) a parent, guardian or custodian of a CHINS has been convicted of:
 - (a) causing suicide (IC 35-42-1-2);
 - (b) involuntary manslaughter (IC 35-42-1-4);
 - (c) rape (IC 35-42-4-1);
 - (d) criminal deviate conduct (IC 35-42-4-2);
 - (e) child molesting (IC 35-42-4-3);
 - (f) child exploitation (IC 35-42-4-4);
 - (g) sexual misconduct with a minor (IC 35-42-4-9); or
 - (h) incest (IC 35-46-1-3)

against a victim who is:

- (a) a child who was under 16 at the time of the offense and is either the biological, adoptive or stepchild of the alleged perpetrator; or
- (b) a parent of the child; or

a comparable offense as described in (a) in any other state, territory, or country by a court of competent jurisdiction.

(2) a parent, guardian, or custodian of a child in need of services:

(a) has been convicted of:

- (i) the murder (IC 35-42-1-1) or voluntary manslaughter (IC 35-42-1-3) of a victim who is a child who is the biological, adoptive or stepchild of the alleged perpetrator (age is not a factor) or a parent of the child; or
- (ii) a comparable offense described in (2)(a)(i) in any other state, territory, or county; or

(b) has been convicted of:

- (i) aiding, inducing, or causing another person;
- (ii) attempting; or
- (iii) conspiring with another person; to commit an offense described in (2)(a).

a parent, guardian, or custodian of a CHINS has been convicted of:

- (a) battery [IC 35-42-2-1(a)(4)] as a Class B felony;
- (b) battery [IC 35-42-2-1 (a)(3)] as a Class C felony;
- (c) aggravated battery (IC 35-42-2-1.5) as a Class C felony; or
- (d) criminal recklessness [(IC 35-42-2-2(c)] as a Class C felony;
- (e) neglect of a dependent (IC 35-46-1-4) as a Class B felony; or
- (f) a comparable offense described in clauses (a) through (e) in another state, territory, or country;

against a child described in (1)(h)(i).

(4) the parental rights of a parent with respect to a biological or adoptive sibling of a CHINS have been involuntarily terminated by a court under:

- (a) IC 31-35-2 (involuntary termination involving a CHINS or a delinquent child);
- (b) IC 31-35-3 (involuntary termination involving an individual convicted of a criminal offense); or

- (c) any comparable law described in clause (a) or (b) in any other state, territory, or country.
- (5) the child is an *abandoned infant, provided that the court:
 - (a) has appointed a guardian ad litem (GAL) or court appointed special advocate (CASA) for the child; and
 - (c) after receiving a written report and recommendation from the GAL or CASA and after a hearing, finds that reasonable

*See Glossary for definition of term.

efforts to locate the child's parents or reunify the child's family would not be in the best interests of the child.

When a court makes a ruling that reasonable efforts to reunify or preserve a child's family are not required under IC 31-34-21-5.6, the COFC shall do the following:

- (1) Complete a permanency plan for the child that complies with the requirements of IC 31-34-21-7.5.
- (2) Seek court approval of the permanency plan.

For more information about reports, orders, and hearings that are not required, refer to Section 3 of this manual.

703.223 Evidence and Documentation

According to IC 31-34-12-2, in all court proceedings to terminate parental rights, the state represented by the COFC or the child placing agency shall present clear and convincing evidence of the allegations when seeking to terminate parental rights. This standard of proof places a greater burden on COFC family case management and legal staff in preparing for termination cases. Building a legally sound record of fact must begin at intake in all cases of suspected child abuse or neglect. Major emphasis must be placed on preplacement prevention and reunification services in accordance with the case plan goals. Refer to Section 3. However, to ensure a permanent home for all children in care, the COFC must carefully document the case with factual information in the event judicial intervention and action become necessary. Accurate case recording completed at the time of the actual occurrence will document family functioning or the lack of it.

703.224 Locating the Parents

Records of the dates and results of all attempts to contact parents, as well as copies of all letters sent, must be a part of the case record. The following procedures are to be used in locating legal parents as well as putative or alleged fathers:

- (1) Look in the telephone directory.

- (2) Call telephone information in all cities where the parent is known to have lived.
- (3) Send both certified and non-certified letters to all last known addresses, including any addresses listed on the children's birth certificates.
- (4) Contact the COFC counterpart in the city where the parent is last known to have lived.
- (5) Contact any known friends or relatives of the parent.
- (6) Contact any known employers of the parent, both past and present.
- (7) Contact hospitals, courts, probation departments, or social service agencies where the parent has been known previously.

703.3 Effective Date of Termination Order and Subsequent Periodic Case Reviews

A court order terminating parental rights, whether voluntary or involuntary, is effective from the date of that order. The process to appeal any legal action to reverse or set aside any court order must be initiated no later than 60 days from the date of that court order. Regarding a termination order, this 60 days is often erroneously referred to as a "waiting period" before the termination is effective. This 60 days, however, is the time limit during which the court or any of the involved parties may file a notice for appeal of the order, or motion to correct errors regarding the order, which is usually the first legal step taken when the order is to be appealed. Unless the court stays the order, this does not change the effective date of the court order terminating parental rights and is not a "waiting period".

A child who is not already placed in a pre-adoptive home, may be placed in an adoptive home prior to the end of the 60 day period if:

- (1) the COFC believes the termination will not be appealed; or
- (2) the adoptive parent(s) is fully advised of the risk of an appeal and is accepting of the child under such circumstances.

The adoptive parent(s) is to agree in writing to the legal risk placement. See Appendix F Legal Risk Acknowledgement Agreement for a sample format. See subsection 706.24 for additional information on legal risk placements.

NOTE: In accordance with IC 31-35-6-1, if the juvenile court refers the matter to the court having probate jurisdiction for adoption proceedings, the juvenile court is required to review the child's case once every six (6) months until the adoption petition is filed.

703.4 Reestablishing Parental Rights

If parental rights have been terminated by the court and the child is to be returned to the care and custody of the parent whose rights have been terminated, that parent must legally adopt the child in order to reestablish parental rights. Under Indiana law, there is no procedure to

set aside or revoke a court termination unless the termination was obtained illegally and the termination decision was overturned through the appropriate court appeal procedure.

If a parent has signed a voluntary relinquishment but the court has not terminated parental rights, the voluntary relinquishment may be withdrawn by the parent. This presumes that this action is in the best interests of the child and that the child has not yet been placed in an adoptive home. See subsection 703.14 for additional information.

704 Custody of the Pre-adoptive Child

Termination of parental rights must be followed immediately by further legal action to ensure that the child is not left unprotected in legal limbo. The following subsections address this issue.

704.1 Taking Wardship

Wardship of any child to be placed by a county office (COFC) for adoption must be established since parental ties will be terminated. Wardship is necessary:

- (1) to provide legal status for the child with COFC authority to act in loco parentis pending final adoption;
- (2) to provide the COFC with the court authority for planning in terms of the child's needs, including giving consent for medical care and surgery; and
- (3) to allow the court to fix responsibility for the child's support and authorize the COFC to expend funds on the child's behalf.

Please refer to Section 3 for information regarding CHINS procedures.

NOTE: Case planning must take place in these cases. Please refer to manual subsection 306.6 for case planning specifics.

704.2 Using Foster Care Pending an Adoptive Placement

It is often necessary to use a temporary foster family home placement for a child who is ultimately to be placed in an adoptive home that is not yet available. When utilizing foster family home care in such a situation, care is to be taken, in so far as possible, to match the child as closely as possible with the foster family as if the child were going to be adopted by the foster family. In so doing, the child is better matched to the foster family if a decision to adopt is made. See subsection 706.2.

Refer to Section 3 regarding the role of the foster family in adoption.

705 Prior Written Approval for Placement

The prior written approval of a family for placement by a COFC or a duly licensed child placing agency approved for such purpose by Central Office is required by law before a child may be placed in a proposed adoptive home. This prior approval is not required in the case of:

- (1) a child to be adopted by a stepparent or a blood relative;

- (2) a child received by the petitioner for adoption from an agency outside Indiana with the written consent of the Division of Family and Children (DFC); or
- (3) a placement where the court, after holding a hearing held upon proper notice, has waived this requirement.

State Form (SF) 45095/DFC Form 1337, Notification of Approval of Child Placement and SF 45094/DFC 1338, Notification of Disapproval of Child Placement are available to provide this prior written approval or disapproval. One copy is to be sent to the court with the court summary, and one copy is to be retained in the family preparation assessment record. See Appendices D and E to this section for copies.

Prior written approval procedure, as defined in IC 31-19-7, does not apply to interstate/foreign adoption situations. Such adoptions are governed by Interstate Compact on the Placement of Children (ICPC) law and rules that require a home to be prepared/assessed with subsequent COFC approval before the child is placed. See Section 5, Interstate Compact on the Placement of Children in this manual.

706 Types of Adoptive Placements

The following is an enumeration of the types of adoptive placements with which the COFC becomes involved:

706.1 Relative and Stepparent Adoptions

The adoption of a child who is not the ward of a COFC or a licensed child placing agency by a blood relative or a stepparent may be referred to the COFC or a licensed child placing agency with the filing of the adoption petition. Refer to subsection 712.4 for information regarding family preparation assessment.

706.2 Foster Parent Adoptions

Foster parenting is the provision of a substitute family for a planned period of time for a child who has to be separated from legal/birth parents. In some cases, the plan for the foster child is reunification with the legal/birth parents. In other cases, the foster child is in transition preparing for a permanent family.

Foster parenting involves two simultaneous roles, parenting and substitute parenting. The parenting tasks require general child care, which any birth parent would provide. The substitute parenting tasks require a commitment to permanency planning and involve working in partnership with the agency, court, legal/birth parents and adoptive parents. Once foster parents adopt, they no longer have two simultaneous roles.

706.21 Changes In Dynamics When Foster Parent(s) Adopts

When foster parents adopt a child(ren) placed with them on a foster care basis and for whom they have provided a substitute family for a planned period of time, new dynamics develop. Most importantly, there is a shift in roles and role expectations relative to the foster/adoptive family. That shift is felt primarily by the foster parents but definitely affects the child. With life experiences and foster care training and knowledge in hand, foster/adoptive parents perceive clear distinctions between foster care and adoption.

Adoption means that foster parents:

- (1) are making a commitment to provide permanency for the child; and
- (2) no longer share decision making responsibility and liability with the agency or court.

They are solely responsible, legally and financially, for the total parenting, care, growth and development of the child. This includes seeing that the long-term developmental, therapeutic, social, medical, educational and emotional needs of the child are met. Part of this responsibility may be to continue relationships that are significant to the foster child by staying in the same geographic location.

706.22 Guidelines for Foster Parent Adoption

Requests by foster parents to adopt are appropriate under the following conditions:

- (1) Efforts to reunite with either parent have not been successful.
- (2) Placement with relatives is not a possibility.
- (3) A child has lived in the home for six (6) continuous months or longer.
- (4) The primary permanency option is adoption
- (5) There is significant emotional attachment between the child and the foster parents. Verification of attachments and the degree of same must be provided by a licensed professional who can provide objective data.

An assessment of the child's willingness to be adopted by the foster parents is to be conducted to the extent that the child is able to express agreement verbally or behaviorally.

NOTE: The primary client is the child, and the child's essential connections to significant others shall be considered and protected throughout the decision-making process.

Foster parents may be considered eligible to adopt a child who has been living with them as a foster child when:

- (1) the parents have voluntarily consented to adoption of the child;
- (2) the court has terminated parental rights to the child, either with or without the parents' voluntary consent;
- (3) the determination has been made that adoptive placement is "in the best interests of the child";
- (4) the foster parents considering adoption are able and willing to consider adopting the child's siblings who may be living with other families at the time of termination;
- (5) aspects of post-adoptive visitation privileges (IC 31-19-16) have been discussed if cooperative adoption in the form of such visitation is considered

appropriate, and if a working plan with the child's parents and adoptive parents as it relates to the adoption has been identified;

- (6) the foster parents are able and willing to consider siblings keeping in contact (telephone, writing, and/or visitation) who may be emancipated, adopted or living with other families at the time of the adoption;
- (7) the adoptee has lived in a stable environment for a satisfactory period of time, and all parties agree to maintain continuity; and
- (8) the foster parents meet all other requirements established by the DFC for adoption services.

Refer to subsection 712.4 for information regarding the family preparation assessment.

706.23 Exploring Adoption Subsidy and Assistance for Foster/Adoptive Parents Who Adopt

The family case manager is to explore the possibility of the child being eligible for some form of adoption subsidy. Families interested in county adoption subsidy (CAS) or the Title IVE Adoption Assistance Program (AAP) are encouraged to contact their family case manager for assistance. Information regarding these programs is located in subsection 722 of this section and Section 8 (Adoption Assistance Program) of this manual.

706.24 Legal Risk Placements

In some instances, it is in the best interests of a child to place the child in a pre-adoptive situation pending the appeal of the termination of parental rights (TPR) determination. In order to accept such a placement, a prospective adoptive family must enter into a Legal Risk Acknowledgment Agreement. See Appendix F.

There are two (2) types of legal risk adoptive placement. They occur when:

- (1) TPR has not been ordered on both parents; or
- (2) TPR has been ordered, but one parent or both parents are appealing the outcome.

In order to minimize the potential number of placements that the child(ren) might experience, a prospective adoptive family may enter into a legal risk, foster/adoption placement. The child is in fact placed in their home on a foster care basis, once the family becomes a licensed foster family home.

See subsection 706.24 regarding legal risk adoptive placements and Section 8, Legal Risk Adoption Placement for additional information on this subject.

706.3 Interagency Adoptive Placements

The following is an enumeration of the types of placements that involve another agency.

706.31 Intercounty Adoptive Placements

Before a child is placed in an adoptive home in another county, the COFCs and/or licensed child placing agencies involved must develop a plan regarding social service responsibilities during and after placement of the child. The plan shall include agreements on the responsibility for the family preparation assessment and supervision of the home and the report to the court. If geography permits, the COFC holding wardship of the child may assume responsibility for the study and the supervision of the home with the permission of the COFC in the county in which the family resides. SF23142/FPP1446 Interagency Agreement in Adoption Placement shall be used in any intercounty adoptive placement. See Appendix G.

706.32 Interstate Adoptive Placements

Refer to Section 5 for interstate adoption placement procedures.

706.33 Intercountry Adoptive Placements

Refer to Section 5 for interstate adoption placement procedures for intercountry adoptions. Indiana families can adopt foreign-born children either:

- (1) in the foreign country of the child's residence; or
- (2) in Indiana.

It is no longer necessary for both parents to be in the foreign country of their adoptive child if the parent in the foreign country carries a proxy for the non-attending parent.

NOTE: Either adoption can be completed with or without the involvement of a U.S.-based, international child placing agency.

706.331 In-Country Foreign Adoptions

Refer to Section 5 for interstate adoption placement procedures for in-country foreign adoptions.

706.332 Adoption of Foreign-Born Children in Indiana

Refer to Section 5 for interstate adoption placement procedures for adoption of foreign born children in Indiana.

706.4 Independent Non-Agency Adoptive Placements

Indiana adoption law requires prior written approval of a placement by an Indiana agency in non-relative, in-state adoptions. However, the law permits adoptive placement without agency approval, except in interstate/intercountry adoptions, if the court has waived the prior written approval of an agency, public or private. Such a waiver is granted at the discretion of the court; and may be granted only after the court has held a hearing on a petition for said waiver and after proper notice has been given to the parties involved, not including the COFC office.

The COFC has the discretion to determine if it will give prior written approval for an independent, non-agency adoptive placement. A COFC may refer the family to a private Indiana agency for services or require that the family undergo their family preparation

assessment by the COFC office before approval can be granted for the placement of the child in the home for the purpose of adoption.

The COFC will be notified of the proposed adoption upon receipt of the adoption petition. As with all adoption petitions received, the COFC is required to respond to the court within 60 days. This response is in the form of a court summary, which is to include discussion of those issues listed in subsection 706.1 regarding relative and stepparent adoptions.

707 Indiana Special Needs Adoption Program (SNAP)

IC 31-19-27 requires the DFC to manage a program designed to find suitable adoptive homes for hard to place children with special needs when the reunification with the biological family is not possible or appropriate. The mission of Indiana's Special Needs Adoption Program is to facilitate permanency for children through timely adoptive placement that supports and best meets the needs of the child and family over time.

The law authorizes the DFC to:

- (1) administer the program itself, delegate a part of the program to the COFCs and contract with another person/agency for implementation;
- (2) network and cooperate with adoption efforts with other states and the administrative unit of the Department of Health and Human Services;
- (3) exchange information with the federal Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Adoption Exchange (NAE) information system;
- (4) conduct an education and training program on adoption and prepare, publish and disseminate to all interested parties, public and private agencies and organizations, and governmental bodies information, education, and training materials regarding the adoption assistance programs and the children who are available for adoption;
- (5) provide technical assistance, directly or by grant or contract, to implement adoption activities and facilitate adoptive placements; and
- (6) encourage involvement of corporations and small businesses in supporting adoption as a positive family-strengthening option, including the establishment of adoption benefit programs for employees who adopt children with special needs.

707.1 Definition of a Special Needs Child for Purposes of SNAP

Special needs children include:

- (1) a child two (2) years of age or older who is a member of a commonly recognized minority group;
- (2) any child six (6) years of age or older; or
- (3) a child who is a member of a sibling group of two (2) or more children and who must be placed together with the sibling group in the same home. (NOTE: At least one (1) child in a sibling group must be six (6) years old. In a commonly recognized minority group of siblings, at least one (1) child must be two (2) years old.);
- (4) a child with a medical condition or physical challenge, as determined by a physician licensed to practice medicine in Indiana or another state or territory; or

- (5) a child with a mental, emotional, developmental or educational challenge as determined by a psychiatrist or a clinical psychologist licensed to practice in Indiana or another state or territory.

A definition for the special needs child for purposes of determining eligibility for financial assistance under the federal IVE-Adoption Assistance Program (AAP) is found in Section 8 of the Child Welfare Manual. A definition of special needs for the county adoption subsidy (CAS) is found in subsection 722.

707.11 Primary Responsibilities of Regional SNAP Specialist

The regional SNAP specialist has the following responsibilities:

- (1) Serve as a liaison for SNAP between the county offices of family and children (COFCs) within their assigned region, Central Office, and the Indiana Adoption Initiative as well as other public and private partnerships. This is to be accomplished through effective and clear verbal and written communication.
- (2) Organize and coordinate the regional adoption team as required by state adoption policy and team guidelines.
- (3) Assist and consult with the COFC family case managers and supervisory staff in the coordination of services needed for children and families before and after the adoptive placement. This is to reduce the risk of adoption disruption.
- (4) Maintain a knowledge base of all federal and state laws, regulations, programs, policies and procedures relative to the Special Needs Adoption Program (SNAP) and the ability to interpret and communicate them to COFCs and licensed child placing agencies (LCPAs).
- (5) Train COFCs and other public as well as private agencies in program, policies, and procedures relative to the Special Needs Adoption Program (SNAP).
- (6) Provide technical assistance for the adoption module in ICWIS for COFCs.
- (7) Respond to adoption inquiries and making referrals to appropriate adoption services within two (2) business days of inquiry.
- (8) Collaborating with public and private agencies (contractual and non-contractual) to provide adoption services to adoptive families and children in order to preserve the permanency plan for the children.
- (9) Collaborate with the Indiana Adoption Initiative in recruitment activities, including:
 - (a) registration of the child to be placed in the Picture Book;
 - (b) registration of the child to be placed on the Internet;
 - (c) adoption fairs; and
 - (d) other activities as scheduled.
- (10) Visit each county office in the assigned region a minimum of twice a year to assist with adoption issues.

707.2 Regional Special Needs Adoption Program (SNAP) Team

In an effort to broaden the base of options available for the adoptive placement of Indiana's children, primarily those with special needs, regional SNAP teams were developed.

707.21 Goals and Objectives of a Regional SNAP Team

The general objectives of the regional SNAP team are to:

- (1) implement adoption policies and procedures as outlined in federal P.L. 103-383 containing the Multiethnic Placement Act of 1994 (MEPA) and in federal P.L. 104-1988 containing the Interethnic Adoption Placement Provisions of 1996 (IEAP). IEAP states that no state or any other entity in the state that receives funds from the federal government and is involved in adoption or foster care placements may "deny any person the opportunity to become an adoptive or a foster parent, on the basis of the race, color, or national origin of the person or of the child involved; or delay or deny the placement of a child for adoption or into foster care, on the basis of the race, color, or national origin of the adoptive or foster parent, or the child involved." NOTE: This section shall not be construed to affect the application of the Indian Child Welfare Act of 1978.
- (2) monitor adoption policies and procedures as practiced by county offices in their respective regions.
- (3) establish adoption policies and procedures addressed by P.L. 251-1989 and SNAP. These shall not be contrary to the Indiana adoption laws.
- (4) be familiar with the special needs children who are free for adoption and waiting for placement.
- (5) be familiar with the prospective adoptive families.
- (6) consider and make decisions/recommendations for adoptive placements based on the best interests of the children.
- (7) arbitrate specific concerns involving adoption and placement not presently addressed. The regional adoption SNAP team, including the SNAP specialist, Regional Manager and the appropriate family case manager, will be the arbitrators in such matters.

707.22 Policies for Implementing a Regional SNAP Team

The team approach shall be implemented and used by each region to review the home studies of prospective adoptive families and information regarding special needs children in need of adoptive placement that are presented to the team. The regional SNAP team will then make recommendations to the COFC in the county in which the child is located regarding proposed adoptive placements. The county director is responsible for making the final decision regarding the prospective adoptive placement.

The following policies shall be used in implementing a regional SNAP team.

- (1) A region may elect to have more than one team based upon the size of the region, the number of local offices comprising the region and the geographic location of the local offices within the region. The Regional Manager and the Directors of the county offices comprising the region are to determine the number of teams to be established. When developing and determining the location of the teams, providing quality and improved services to our adoptive applicants, and particularly our children, is the paramount concern. The greater emphasis is to be placed on the reduction of the length of time children must await placement while not sacrificing the quality of adoption services.
- (2) If more than one team is established in a region, in addition to other functions for the team as identified by the region, the team also shall serve the following functions:
 - (a) Assist with serving the backlog of children in the region who are free for adoption and waiting for placement.
 - (b) Assist with serving the backlog of prospective adoptive families who have been recommended for placement and are still waiting for the placement of a child.
- (3) A designated time is to be set for the regional SNAP team to meet. However, the team may meet at other times as need dictates in order to handle matters that will bring about the improvement of the delivery of adoption services.

707.23 Composition of the Regional SNAP Team

The team(s) shall consist of a staff member from each of the county offices comprising the region. Recommended team members are:

- (1) the SNAP specialist;
- (2) the adoption case manager's supervisor;
- (3) the adoption case manager;
- (4) the child's case manager;
- (5) the case manager for the prospective adoptive family;
- (6) the foster care case manager;
- (7) the Child Protection Service (CPS) case manager;
- (8) the child welfare supervisor/director;
- (9) an experienced adoptive parent;
- (10) a licensed child placing agency (LCPA) representative for each LCPA in the region with a current adoption contract.

The following staff is recommended as ex-officio members of the team:

- (1) child welfare field consultant
- (2) county Director
- (3) Regional Manager
- (4) Adoption Coordinator

Any combination of the following person(s) may have been involved in a given case and, therefore, are to be invited to participate in the regional SNAP team meeting when the case is discussed.

- (1) the consulting psychologist;
- (2) the prospective adoptive family;
- (3) the LCPA that completed the family preparation assessment;
- (4) the foster family;
- (5) the child;
- (6) the guardian ad litem (GAL) or court appointed special advocate (CASA);
- (7) a teacher;
- (8) a doctor.

NOTE: Each county office of family and children (COFC) will send a family case manager (FCM), supervisor or director to regional SNAP meetings no less than every other month. Everyone attending regional SNAP meetings will have the opportunity to vote. A chairperson and a secretary are to be identified by the team. Minutes are to be taken at each meeting and a copy submitted to the adoption coordinator at Central Office, Bureau of Family Protection/Preservation, COFCs within the respective region, and licensed child placing agencies (LCPAs) with current adoption contracts in the region.

A confidentiality form is to be signed by all team members at each meeting.

707.24 Procedures for Referring a Child with Special Needs to the Regional SNAP Team

The following information is a step-by-step procedural outline for referring a child with special needs to the regional SNAP team. For a procedural outline of the entire process of adoption placement, see Appendix WW, Family Case Manager Procedure for Adoption Placement.

Children considered to have special needs are referred to the SNAP specialist when a petition to terminate parental rights is filed. The following procedure shall be followed:

- (1) According to IC 31-34-21-7.3, non-identifying information on special needs children is to be posted on the Internet when the court authorizes the filing of a

petition to terminate the parent-child relationship OR when a petition to terminate the parent child relationship is filed. The FCM is to complete SF 50016/FPP 0041 Child Registration for Internet to initiate the posting. The form is to be sent to the regional SNAP specialist within 15 days of the filing of the petition to terminate the parent-child relationship. See Appendix H.

- (2) The FCM will complete a social summary of the child within 30 days of filing the petition to terminate the parent-child relationship. See Appendix UU Social Summary on Child to be Placed.
- (3) If the COFC does not have an identified family for the child, the FCM responsible for the child's case sends the social summary along with a current photograph of the child to the regional SNAP specialist within 30 days of the filing of the petition to terminate the parent-child relationship. NOTE: A current picture of the child must be presented with the Social Summary.
- (4) The child's case manager or the SNAP specialist, whichever is appropriate, will present the child summary at the next regional SNAP team meeting and state SNAP Council meeting using the Child Profile. See Appendix L.
- (5) Once termination of parental rights is ordered, the FCM will complete SF11840/FPP1440 Child Registration: "My Forever Family" Picture Book (see Appendix I) and send it to the regional SNAP specialist within 30 days of the order of termination of parental rights. The SNAP specialist will give the child's registration, photo, and social summary to the Adoption Initiative for publication in the "My Forever Family" Picture Book. Changes to information included in the "My Forever Family" Picture Book are to be sent to the SNAP specialist using SF 9703/FPP 1443, Change Notice: "My Forever Family" Picture Book. See Appendix K.
- (6) The FCM will complete the form "Withdrawing a Child From Internet: Termination of Parental Rights Initiated" to remove a child's information from the Internet whenever the child is reunited with the family or an adoption petition for the child is filed. See Appendix J.
- (7) Ideally, the SNAP team is to have three (3) families to consider for each child. Under no condition is a placement to be delayed because fewer than three families have been identified unless the identified families do not satisfy the best interests of the child. NOTE: The placement of a child in an adoptive home is not to be delayed or denied on the basis of race, color, or national origin of the family. The "Adoption Family Selection Scale" is to be used to present the families to the team. See Appendix M.
- (8) The regional SNAP team is to use the Adoption Family Selection Scale to match a family with the child. See Appendix M.
- (9) If a child is free for adoption for six (6) months without a match with a family through the team and the SNAP specialist, the child shall be listed with the National Adoption Exchange (NAE). The referral of the child will be made via the regional SNAP specialist.
- (10) If there is at least one family available for consideration for a child, the family preparation document is to be presented to the team, and the case manager

who prepared the family is to be present at the meeting to offer additional information regarding the family available.

707.25 Posting Non-Identifying Information on the Internet

For specifics regarding when non-identifying information is to be posted on the Internet, see subsection 707.24 (1) above. It is the responsibility of the COFC to post non-identifying information on the Internet to facilitate a potential adoptive placement of a CHINS whenever it is appropriate to do so. This includes non-identifying information for children who are in pre-adoptive placement in a kinship or relative home prior to the actual filing of an adoption petition.

The specific non-identifying information includes:

- (1) the child's age, gender, and a summary of the child's educational, social and medical background, including known disabilities;
- (2) the reason the child was removed from the child's home;
- (3) whether a person has expressed interest in adopting the child;
- (4) the name, address and telephone number of a contact person.

The information posted on the Internet may not identify the name of any of the following persons:

- (1) the child
- (2) the child's biological or adoptive parents
- (3) a sibling of the child
- (4) a caregiver of the child

Information will be updated by the COFC as events occur, such as reunification with the family or the filing of an adoption petition. The COFC will complete the appropriate forms and send them to the regional SNAP specialist within 15 days of the filing of a petition to terminate parental rights. See Appendices J and K.

707.26 Regional SNAP Team Procedures for Foster Parent Adoption of Children with Special Needs

The following procedure shall be followed when consideration is being given to recommending that a child with special needs be adopted by the child's current foster parents with whom the child has been placed for at least six (6) months:

- (1) When the permanency plan goal becomes adoption, the foster parent(s) is to be informed of that plan for the child.
- (2) Prospective adoptions of foster children by foster parents do not have to be referred to the regional SNAP team. Exceptions would include circumstances in which there is a current referral alleging abuse or neglect perpetrated by the

foster parent or a court order requiring a staffing of the desire of the foster parent(s) to adopt.

- (3) The SNAP specialist, family case manager (FCM), the foster parent(s) wishing to adopt and other relevant parties will meet to discuss adoption at the local office. This meeting will include information on the Adoption Assistance Program (AAP), County Adoption Subsidy (CAS), Indiana Adoption Subsidy Program (IASP), and Nonrecurring Adoption Expenses (NRAE). Additionally, information from the child's case file is to be shared with the pre-adoptive family; and information on available post-adoption services is to be discussed. All information that is discussed is to be documented in the child's case file.

707.27 Regional SNAP Team Procedures for Adoption by a Relative

Procedures are the same as for foster parent adoptions. See subsection 707.26.

707.28 Regional SNAP Team Procedures for Adoption by COFC Employees

If a county office of family and children (COFC) staff employee applies for adoption, the family preparation assessment must be conducted by an adjacent COFC or an adjacent regional SNAP specialist or a licensed child placing agency (LCPA). Such a practice prevents conflict of interest and is in keeping with regional planning to provide services across regional lines.

The following procedures shall be followed when a COFC employee is being considered for the adoptive placement of special needs or non-special needs children.

- (1) If a COFC employee indicates an interest in adoption, the employee shall be advised that they must go through the same adoption preparation assessment process as other non-COFC employees and that the decision to recommend a prospective adoptive applicant for placement is made by a regional SNAP team.
- (2) The family preparation assessment for a COFC employee is to be conducted by an adjacent COFC or an adjacent SNAP specialist or LCPA. The assessment shall be presented to an adjacent regional SNAP team by the agency preparing the document so that the adjacent team can render a decision regarding the status of the family preparation assessment. See subsection 712.44, Processing the Completed Family Preparation Assessment.
- (3) If the COFC employee is recommended for placement, the regional SNAP team shall complete the process by using the procedure as outlined in subsection 707.24, Procedures for Referring a Child to the Regional SNAP Team.

708 Services to the Birth Parents

Family case management services are to be available to birth parents to:

- (1) help them retain or regain custody of their child if the child is a CHINS;
- (2) identify and assist in making arrangements for needed support services, when applicable;
- (3) help them deal effectively with separation and loss of the child(ren);
- (4) share case plan goals for the child(ren) and receive parent(s) input, when appropriate;
- (5) help them terminate their parental rights, voluntarily or involuntarily;
- (6) secure from them comprehensive background information on the child; i.e., educational, social, psychological, legal, developmental and medical history which includes genetic and hereditary information; and
- (7) secure from them information, data, materials and items they would like to share with the child, if the child is adopted.

708.1 Post-Adoption Visitation Privileges

In accordance with IC 31-19-16, at the time that an adoption decree is entered, the court may grant post-adoption contact privileges to a birth parent who has either consented to the adoption or voluntarily terminated the parent-child relationship. The court may grant such privileges if:

- (1) the court determines such an arrangement is in the child's best interests;
- (2) the child is at least two (2) years old, and a significant emotional attachment exists between child and birth parent;
- (3) each adoptive parent consents to the arrangement;
- (4) the adoptive parents and the birth parents execute a post-adoption contact agreement and file it with the court;
- (5) the licensed child placing agency sponsoring the adoption and the child's guardian ad litem (GAL) or court appointed special advocate (CASA) recommend the post-adoption contact agreement, or the COFC or other agency that prepares the report to the court is advised of the agreement and includes comment on it in the court report;
- (6) consent to the post-adoption agreement is obtained from the child if the child is 12 years old; and
- (7) the agreement is approved by the court.

If an adoption includes a post-adoption contact agreement and if, at some point, the adoptive parents elect not to abide by the agreement, the adoption itself is irrevocable. However, the birth parents have a right to seek enforcement of the agreement. An adoptive parent or a birth parent may petition the court to modify or compel compliance with a post-adoption agreement. However, no monetary damages may be awarded as a result of such a petition. A court may modify or void a previously approved agreement before or after the adoption, if the

court determines it is in the child's best interests to do so. Before making a decision relative to a post-adoption visitation agreement, the court may appoint a GAL or CASA for the child.

709 Services to Children

In an effort to reduce the number of adoption disruptions and dissolutions, the COFC must adequately prepare children for the adoption process, collect pertinent background data, and assist in establishing and maintaining a strong support system.

709.1 Preparation and Assessment of the Child

The child will need to grieve the loss of the birth family. The family case manager (FCM) is to discuss termination and adoption with a verbal child. The FCM might wish to consult with the child's therapist as to how this can best be approached with the child. Involving foster parents to help support the child's feelings of loss also may be helpful. Useful techniques may include the following:

- (1) Introduce the idea of adoption to the child and foster parent(s)/primary caregiver.
- (2) Make a Life Book with the child. See Section 4 of this manual.
- (3) Prepare the birth parents or other significant caregiver for a good-bye visit with the child. These should usually be supervised to make certain that the child is given positive information and is helped to move on.
- (4) Explore the possibility of some post-adoption visitation privileges that would benefit the child. (IC 21-19-16)
- (5) Assess the child for eligibility for AAP, CAS, IASP, and NRAE.

Foster parents, teachers, physicians, counselors, relatives, and other significant adults in the child's life are to be consulted in order to develop a comprehensive and balanced picture of the child. The information to be obtained and written or collected into a social summary includes:

- (1) all available social, educational, psychological, medical and genetic information;
- (2) the child's likes, dislikes and needs;
- (3) the child's current life style, behavior patterns; and
- (4) expectations and potential for future development and functioning of the child.

See Social Summary on Child to be Placed in Appendix UU of Section 7 of this manual.

709.2 Birth Family History

Family background information is to be obtained from both birth parents in order to:

- (1) determine whether there is any significant hereditary factor, illness or pathology that may affect the child's normal development;

- (2) help the adoptive parents, and eventually the child, understand the reasons for adoption; and
- (3) decide which characteristics should be considered in selecting an adoptive family.

709.21 Developmental History

As much information as possible is to be obtained from the birth parents and previous caregivers regarding the child's developmental history and is to include:

- (1) birth and health history, including the names and addresses of previous medical and dental providers;
- (2) early development history;
- (3) the child's characteristic response to people and situations;
- (4) school programs, where appropriate;
- (5) intellectual functioning,
- (6) placement history and the child's adjustment to placements.

709.22 Medical Information

Current, accurate medical information is needed to determine the state of the child's health. Significant factors that may interfere with normal development are to be identified, and the implications of any medical problems or conditions that have been corrected or may need correction or treatment or which may affect future development are to be included. Additional medical information regarding the child can be obtained from the medical passport program. See Section 4 of this manual.

709.23 Psychological History

As much information as possible is to be obtained from the birth parents, previous caregivers, and the case file on the child's psychological condition and is to include:

- (1) types and results of any psychological testing;
- (2) names, addresses and telephone numbers of agencies providing psychological services;
- (3) types of psychological services received (examination, treatment and prevention) and the diagnosis and prognosis resulting from same;
- (4) type of emotional stress the child has experienced and the child's reaction to stress ; and
- (5) mental health of birth family members.

709.24 Legal History

Each child's record is to contain a copy of the following, if appropriate and available:

- (1) child's birth record;
- (2) petition for wardship/CHINS;
- (3) court order declaring the child a CHINS;
- (4) placement history;
- (5) court order ordering child support;
- (6) court order ordering adoption assistance;
- (7) voluntary consents relinquishing the child for adoption;
- (8) petition to terminate parental rights;
- (9) court order terminating parental rights, whether voluntary or involuntary; and
- (10) adoption decree, if child was previously adopted.

710 Placement Policy and Guidelines

The following constitutes general policy and guidelines for placement of children in pre-adoptive/adoptive home care:

710.1 Abandoned Infants

Effective July 1, 2000, a definition of "abandoned infant" was added to IC 31-9-2-0.5 as it pertains to IC 31-34-21-5.6 concerning exceptions to the requirement to make reasonable efforts to preserve and reunify families.

710.11 Definition

"Abandoned infant" means:

- (1) a child who is less than 12 months of age and whose parent, guardian, or custodian has knowingly or intentionally left the child in:
 - (a) an environment that endangers the child's life or health; or
 - (b) a hospital or medical facility; and has no reasonable plan to assume the care, custody, and control of the child; or
- (2) a child who is, or appears to be, not more than 30 days of age and whose parent;

- (a) has knowingly or intentionally left the child with an emergency medical services provider and
- (b) did not express intent to return for the child.

710.12 Placement Procedures for Abandoned Infants

IC 31-34-2.5 requires an emergency medical services provider to take custody of an abandoned infant left in the provider's care. The emergency medical service provider is to notify the child protection service in the county office of family and children immediately regarding the abandoned infant, and the county office of family and children (COFC) is to assume care, control, and custody of the infant. The infant is to be treated as a child taken into custody without a court order, except that efforts to locate the child's parents or reunify the child's family are not necessary, if the court makes a finding to that effect under IC 31-34-21-5.6 (b)(5). Such a finding may be made at any point in a CHINS proceeding.

Once the abandoned infant is taken into custody by the COFC, the COFC attorney is required to take steps to have the infant declared a child in need of services (CHINS) and to have a guardian ad litem appointed. Periodic case reviews must be held while the child is in care, and all parties must be notified of all reviews, including the permanency hearing, at least 10 days prior to the hearing. Notification must be made in person or by certified mail.

A foster parent may petition the court to request intervention as a party to the proceeding except a foster parent who has been the subject of a substantiated report of child abuse or neglect; or if they have been convicted of a felony listed in IC 12-17.4-4-11. A court may grant the petition to intervene if the court determines it is in the best interests of the infant to do so.

710.2 Healthy Children with No Special Needs

Infants and young children are to be placed in an adoptive home at as early an age as possible to ensure attachment between parent and child. Early placement is advisable, even directly from the hospital when possible, except when:

- (1) the physical, mental, or emotional health needs of the child are such that early placement would not be beneficial to the child;
- (2) the child's parents have not had sufficient time to become emotionally ready to relinquish the child; and/or
- (3) an at-risk placement is considered too risky.

A physical or emotional condition is not to preclude early placement if the facts about the condition are reasonably well known and are firmly understood by the adoptive parents. Adoptive parents are to affirm in writing what medical, social and developmental information was shared about the child(ren). The family case manager (FCM) is to review the affirmation for accuracy and modify it, if necessary. The adoptive parent(s) and FCM are to date and sign the affirmation, thus verifying that all parties involved are in agreement with the content of the document. See subsection 714.1 for further information regarding the sharing of information.

710.3 Special Needs Children

Successful adoptive placements, especially for children with special needs, are dependent upon the amount of accurate information available and shared regarding the child and the family. Refer to subsections 707.25 and 709 for a description of the type of information to be obtained.

710.4 Preserving the Sibling Bond in Placement

Indiana recognizes the importance of the bond that exists between siblings especially when they are taken into care and are separated from their primary caregivers. The bond between siblings is often the longest lasting relationship most people have, and these bonds help children develop their own unique personal identity throughout their lifetime. It is our Division's responsibility to maintain this sibling bond throughout the child's involvement with the Division, if possible. This includes the time from the point at which the child is taken into care by the agency until a permanency plan is developed and implemented.

710.41 The Importance of Placing Siblings Together

Biological siblings share the same genetic makeup. This becomes very important as children move into foster and adoptive families where they differ in appearance, medical predisposition, talents, and intellectual capabilities. When placed with siblings, they are less likely to feel isolated. Biological siblings share past experiences and family history. When children from dysfunctional families are placed in substitute care, a sibling is the only other person who knows how things were in the family of origin and the subsequent history of foster placement. Children need to integrate their past with their future in order to have continuity and to develop a clear understanding of their identity.

However, often it is difficult to find foster families who are able and willing to accept large sibling groups. Consequently, there is a tendency to place siblings separately in foster and adoptive homes. In fact, there are families who are willing to adopt groups of four or more children. Facilitating sibling placements might entail issuing a court order to accommodate an increased number of children in a home or searching for foster homes or facilities in other counties that will accommodate larger sibling groups. It is the responsibility of each county office of family and children to recruit and maintain families that are willing to adopt sibling groups.

Children coming into care typically have troubled backgrounds, and this may result in moderate to severe behavior problems. When a sibling is removed from a home because of behavior problems, the remaining children may feel that the same thing can happen to them. This reduces their sense of trust in their caregivers.

Siblings are often separated when one is victimizing another. Separating the siblings does not guarantee that the abuse will not continue in another home. Therapy, with a safety plan in place, may be an appropriate intervention. The safety of the victim is the paramount concern in sibling placement decisions. In all instances, these circumstances are to be brought to the attention of the court.

Many times siblings are separated because they do not get along with each other. When children are separated because of sibling rivalry, it teaches them that the way to deal with conflict is to walk away from it, not to work it out. The complex

bonds linking brothers and sisters are universal and among the most important in life. They become even more important as we age. In the final analysis, sometimes siblings are the only family we have. These relationships form the blueprint for later relationships with peers, friends, marriage partners, and their own children. Siblings who remain together learn how to resolve their differences and develop strong relationships.

710.42 Policy Regarding Placing Siblings Together In Out-of-Home Care

The reasons for siblings being separated when placed in out-of-home care are many and varied. However, the policy of the Division of Family and Children with regard to the placement of siblings in out-of-home care is as follows:

In the absence of a strong reason to the contrary, groups of siblings are to be placed together whenever possible in order to maintain existing ties and supports and to minimize the degree of loss to the children.

Therefore, it is the policy of the Division of Family and Children that children who are not initially placed together have contact within 48 hours (or two working days) of placement. It is also the policy that children are to be placed together within 10 working days. An exception to this policy would occur when one of the children is in residential placement, hospitalized, or in a juvenile detention center. Efforts are still to be made for children to have ongoing contact.

While it is often not possible to place siblings together immediately when they are taken into care, it is important that siblings be reunited as soon as possible. The same policy is to apply when additional siblings are taken into substitute care at a later date. When children from the same family are wards in two or more different counties, it is the responsibility of those counties to initiate a visitation plan.

If parental rights are terminated on a child or the permanency plan for a child is adoption, and if the child's sibling(s) is in a pre-adoptive placement, the family who has the sibling is to be approached about taking the other sibling(s). In the event of previously finalized adoptions, the adoptive parents of those children are to be approached regarding the placement of new siblings free for adoption. The emphasis continues to be on the child's essential connections and respecting the power of those connections in achieving a successful adoption for the child.

710.43 Non-Discrimination in Placement Decisions

All placement recommendations by the COFC or the regional SNAP team will be made based on the child's specific needs and best interests and the family's ability to provide the resources necessary to meet the child's needs. Neither the COFC nor the regional SNAP team will delay or deny the placement of a child for adoption on the basis of the race, color, or national origin of the adoptive parent(s) or the child involved.

710.44 Making the Decision to Separate or Move a Child

Separation of siblings requires as careful consideration as severing parent-child attachments. Any decision to separate siblings before, during, or after placement must be handled as an exception to policy.

The following guidelines are to be followed:

- (1) Keep the focus on the best interests of the child
- (2) Never make the decision alone. Include the court, current and former caregivers, therapists, supervisors, counselors, guardians ad litem (GALs), court appointed special advocates (CASAs) and any others who have played an important role in the child's life. All decisions to separate siblings in contemplated adoptions, including adoptions by foster parents and relatives, must be staffed by the regional SNAP team.
- (3) Consider the child's wishes as part of the decision-making process.
- (4) Document all of the reasons for and against separating the children. Making a list will force an examination of the pros and cons. Provide clear documentation of the circumstances leading up to the decision in the event a decision to separate is ever legally challenged.
- (5) Special attention must be given to any sibling relationships known and remembered, and even unacknowledged ones are to be explored in terms of their later developmental impact on children in care.
- (6) If separation is necessary, efforts are to be made to help all the children involved understand and grieve for the loss.
- (7) The plan to separate is to be supported by a specific, concrete plan for future contacts between/among the children.

710.45 Post-Adoption Sibling Contact

In accordance with IC 31-19-16.5, at the time an adoption decree is entered, the court may order the adoptive parent to provide specific post-adoption contact with a pre-adoptive sibling for an adopted child who is at least two (2) years old if:

- (1) the court determines that such contact is in the child's best interests; and
- (2) each adoptive parent consents to the post-adoption contact privileges.

To make a determination concerning post-adoption contact privileges, the court may consider the recommendations of:

- (1) the licensed child placing agency (LCPA) sponsoring the adoption;
- (2) the child's guardian ad litem (GAL) or court appointed special advocate (CASA);
- (3) the COFC or other agency submitting a report to the court concerning the adoption; and

- (4) the wishes of the adopted child or the adoptive parents.

If an adoption includes a post-adoption contact order with a pre-adoptive sibling and if, at some point, the adoptive parents elect not to abide by the agreement, the adoption itself remains irrevocable. However, a pre-adoptive sibling or the adopted child, by next friend or by GAL or CASA, or the adoptive parent may petition the court to vacate or modify such an order or to compel compliance with it. No monetary damages may be awarded if a post-adoption contact with a pre-adoptive sibling order has been violated. A court may modify or vacate such an order at any time after the adoption, if the court feels it is in the adopted child's best interests. Before the hearing, however, the court may appoint a GAL or CASA for the child only if the interests of an adoptive parent and those of the adopted child differ such that an appointment of a GAL or CASA is necessary.

711 Recruitment of Adoptive Families

Recruitment is part of the continuum and a basic element of the total child welfare program.

711.1 Primary Objectives

The primary objectives of recruitment are to:

- (1) make the needs of the children visible;
- (2) develop a sound public awareness program designed to educate the general populace to the need for permanent homes for waiting children;
- (3) educate the public regarding the types of children in need of homes, the special needs of these children, and the types of families needed to adopt them; and
- (4) eliminate the barriers to the adoption of these children.

711.2 Steps in Recruitment

In preparation for any adoption recruitment campaign, certain essential steps are to be taken:

- (1) Define the goals of the campaign.
- (2) Focus on what is to be achieved, as a result of the recruitment campaign.
- (3) Assess the office's own capabilities, and reach out for input from clients and representatives of the community in planning the recruitment campaign.
- (4) List ways to reach the goal(s) and activities that might be included in a campaign.
- (5) Identify target populations.
- (6) Explore and assess community resources.
- (7) Establish time frames.
- (8) Develop a budget and identify sources of funding.

- (9) Develop procedures and have staff in place to respond to, follow-up on and handle inquiries that are a result of the recruitment campaign. The agency is to take care to implement a recruitment campaign that can be adequately handled by the agency's existing staff.
- (10) Identify and implement specific measures to maintain confidentiality of children and persons involved in the recruitment campaign.
- (11) Develop campaign materials which could include but would not be limited to brochures, posters, fact sheets, handouts, photographs, displays, videos, pamphlets, flyers, billboards, yard signs, balloon launches, bumper stickers, buttons, bookmarks, T-shirts, key rings and transit advertising.

The end result of an effective recruitment campaign is that there will be waiting families instead of waiting children.

711.3 Basic Approaches to Recruitment

There are three (3) basic approaches to recruitment to make the needs of the children visible:

- (1) Generic recruitment involves presenting general information to the public about the needs of waiting children. This approach allows for broad education about the varied levels of need without encouraging families to identify or become attached to a single child.
- (2) Child-specific recruitment focuses on individual waiting children in order to attract specific families as placement resources. It provides more detailed and specific insight about the child needing to be placed. This approach usually requires more complex planning, but it has proven to be highly effective in recruiting families for the most challenging children because it helps families to eliminate inappropriate responses and to have realistic expectations.

Child-specific recruitment is not necessarily limited to the placement of the one child who is featured during a recruitment campaign. On learning that the child has found a family, interested callers often are receptive to learning about similar available children.

- (3) Targeted recruitment focuses on identifying the most common demographics of children awaiting adoptive homes and recruitment of families willing and able to meet these needs. For example, if the majority of children free for adoption were adolescents, then recruitment activities would be targeted at populations willing to adopt teenagers. Targeted recruitment is the most effective means of identifying families to meet the needs of the backlog of waiting children.

NOTE: The COFC or the regional SNAP team will not deny the opportunity for any person to become an adoptive parent solely on the basis of the race, color, or national origin of the prospective parent or the child.

711.31 General Recruitment

Recruitment campaigns are to have clear, rational goals and give a clear message of the intent. This can be done through:

- (1) the acquisition of accurate information about the population of children to be served; and

- (2) the assessment of the agency's capacity to staff various types of projects

711.311 Adoption Listing of Agencies Providing Adoption Services within the State of Indiana

In accordance with IC 31-19-8-3, DFC is required to compile a listing consisting of public agencies and licensed child placing agencies (LCPAs) that provide adoption services within the State of Indiana. The listing is compiled and updated on an annual basis. Each year, all public agencies providing adoption services in the State of Indiana will be sent an administrative letter concerning the need to update the list and instructions regarding the process. The letter will include the following attachments:

- (1) The agency's own completed Adoption Agency Survey Listing(s) from the previous year to be used to verify the data previously submitted to Central Office by the agency. Changes/modifications are to be noted on the survey data previously submitted by marking through the data needing to be changed.
- (2) A blank copy of the Adoption Agency Survey Listing to be used to record any changes that need to be made to the original completed adoption survey. See Appendix O, Adoption Agency Survey Listing.
- (3) A list of the regional SNAP specialists. Additional questions regarding how to complete the Adoption Agency Survey Listing are to be directed to the Adoption Coordinator at Central Office.

On May 1 of each year, Central Office will mail the administrative letter and attachments described above to the agencies. The completed survey is due in Central Office no later than June 1.

Every agency must submit an Adoption Agency Survey Listing to the Adoption Coordinator at Central Office. If there are no changes to be made to the original survey data, the agency is to submit the original survey over a cover memo indicating that the survey data is correct as printed on the original adoption survey.

If changes are to be made to the original survey data, Central Office will make the reported changes and send a revised copy of the Adoption Agency Survey Listing back to the agency for verification by June 1. If no changes are reported to the Central Office by June 30, then the adoption survey data will be printed as previously submitted.

The adoption survey listing must include current information regarding the following data:

- (1) The geographic area served by each agency providing adoption services.
- (2) The fees charged by the agency for all adoption services.

- (3) The approximate waiting period between the time the application is submitted and the time the family preparation begins.
- (4) The approximate length of time required for completing the family preparation.
- (5) The approximate length of the waiting period between the time the family preparation is approved and the time the placement is made.
- (6) The length of the supervisory period after a placement is made.

The licensed child placing agencies and the COFCs must provide the information listed above to the DFC so that the DFC can meet the requirements of the law. The list must be available for public inspection and provided in sufficient copies no later than August of each year to the following:

- (1) county offices of family and children;
- (2) individuals upon request;
- (3) clerks of courts having probate jurisdiction in a county; and
- (4) public libraries.

711.32 Child-Specific Recruitment for Special Needs Children

Indiana's Adoption Initiative focuses on the diligent recruitment of potential adoptive families for Indiana's special needs children. The Initiative is to use the following methods to recruit families for their waiting children:

- (1) "My Forever Family" Picture Book is a photolisting of special needs children who are free for adoption. Copies of the picture book are sent to all COFCs and are available by subscription. The "My Forever Family" Picture Book" is also available on the Adoption Initiative's website. (www.state.in.us/fssa/adoption)
- (2) A listing of legal risk children with non-identifying information is published on the Adoption Initiative website. (www.state.in.us/fssa/adoption)
- (3) A toll-free number (1-888-25-ADOPT) for the Indiana Adoption Initiative has been established for families seeking adoption information.
- (4) Indiana's Adoption Initiative arranges statewide media coverage to seek adoptive families.
- (5) Statewide and regional adoption fairs are held to provide information to the community about adoption and the children available for adoption.

COFCs are to contact their regional SNAP specialist for information about Indiana's Adoption Initiative recruitment activities.

711.321 "My Forever Family" Picture Book

The “My Forever Family” Picture Book is a photolisting service. It is Indiana’s primary tool for child-specific recruitment of adoptive homes for special needs children.

711.3211 Purpose and Goal

The “My Forever Family” Picture Book is used to promote and facilitate the placement of children with special needs from Indiana into permanent, nurturing adoptive homes. Indiana utilizes several avenues to bring special needs children who are awaiting permanent placement in adoptive homes to the attention of the entire state and nation. See subsection 707.1 for a definition of special needs as used for the photolisting services. The “My Forever Family” Picture Book photolists any child with special needs who is under the care of either an Indiana COFC or an Indiana-licensed private adoption agency. The child must be legally free for adoption.

711.3212 Mandatory Registration for Special Needs Children

Registration of children with special needs with the “My Forever Family” Picture Book is mandatory for all children who meet the following criteria:

- (1) children who have special needs as defined in subsection 707.1 above;
- (2) children who are legally free for adoption, with regard to both parents, through termination of parental rights; and
- (3) children for whom an appropriate, interested adoptive parent able to meet the child's needs has not been identified within 30 days of the time the child became free for adoption.

Children 14 years of age or older must sign a written consent in order to be placed in the photolisting.

Children who are at legal risk (see subsection 706.24 regarding legal risk adoption) may be registered at any time prior to the mandatory “My Forever Family” Picture Book registration deadline at the agency's discretion.

To register children for the “My Forever Family” Picture Book, the COFC must complete SF 11840/FPP 1440 Child Registration: “My Forever Family” Picture Book. (See Appendix I) Information included on this form must be specific and complete. Descriptions are to present the child as unique and are to combine appeal with accuracy.

NOTE: The narrative for the “My Forever Family” Picture Book will be replicated directly from the registration form.

See subsection 711.3213 for guidelines on writing narratives. Contact information should be listed for the family case manager or supervisor on the child's registration form in case further information is needed.

One copy of the registration form and appropriate consent form is to be forwarded to the regional SNAP specialist. The registration form is NOT to be sent to Central Office. Child registration forms submitted that are not completed in their entirety will be returned to the originator for completion and resubmission to the regional SNAP specialist.

NOTE: The regional SNAP specialist is to be notified immediately of a change of status of a child. SF 9703/FPP 1443 Change Notice: "My Forever Family" Picture Book is to be used. See Appendix K.

SF 11840/FPP1440 Child Registration requires photographs. The use of the child's photograph is essential to making optimal use of the photolisting in finding a permanent adoptive home. See subsection 711.3214 for procedures on processing child photographs.

711.3213 Guidelines for Writing Child Narratives

The guidelines for writing child and family narratives provides the family case manager with a uniform format to use in writing narratives on children who are to be registered for the "My Forever Family" Picture Book, or other children or families who are featured in adoption recruitment programs.

The general purpose of a child narrative is to provide a clear, honest picture of the child being registered.

- (1) The narrative is to be as positive as possible; however, it is important that it accurately reflects the child's present level of physical, emotional and intellectual functioning. If possible, begin and end the description with positive information.
- (2) Since the descriptions will be read by a wide variety of people, it is important not to be highly graphic or to reveal information that is confidential.
- (3) The details of a child's separation from the legal family are not appropriate for inclusion in the narrative. Information regarding the child's placement history is to be general in nature. Statements such as, "has had numerous placements"; "has known much instability since coming into care"; "came into care in 19__ or 2__;" can give important information without being specific.

- (4) If it is known that a child has suffered abuse or neglect or deprivation, it is important to mention this information in a general way. Specific details about the abuse are never to be included. If the child is the product of an incestuous relationship, this also is not to be mentioned.
- (5) Descriptive phrases such as: "large expressive eyes"; "friendly smile"; "oval shaped face"; "bubbly personality"; "naturally curly hair", help make the child real. In the case of a seriously handicapped child, it is particularly appropriate to describe any physical, mental, emotional and behavioral characteristics that a prospective family may find appealing.
- (6) The child's personality characteristics, such as "quiet", "alert", "verbal", "outgoing", are to be described whenever possible. This also applies to negative characteristics, but try to balance such information with something positive.

Information concerning known disabilities and how they seem to affect the child's ability to function are to be provided.

- (1) For children with medical problems, give information, when available, regarding whether or not the condition is progressive, correctable or controlled with medication. Include the kinds of services the child currently is receiving and may need in the future.
- (2) If there are any known, serious, hereditary diseases in the child's family, this is to be included.
- (3) If the child is receiving psychological counseling and is making progress, be sure to note this. Be honest about whether a child has emotional or behavioral problems, and how they seem to be affecting the child's functioning, without going into great detail.
- (4) Include information about a child's developmental and educational performance. When writing about a child who is said to be functioning on some level of mental retardation, it is important to use phrases such as: "currently tests in the moderate range of mental retardation"; "testing shows child to be functioning at the educable retarded level"; or "child attends classes for severely retarded children".
- (5) Avoid labeling the child. Describe what the child has achieved or is working on achieving rather than listing what the child cannot do. If a child is said to have

learning disabilities, the child may not be mentally retarded, although the child's IQ score on standard tests may fall in that range.

- (6) Hobbies, skills or any special interests a child may have are to be mentioned.
- (7) For an older child, include any reasonable statements the child may make about the kind of family the child hopes to join.

711.3214 Procedures for Processing Child Photographs

A good photograph of the child to be registered in the “My Forever Family” Picture Book is an essential tool in the placement process. Originators of the registrations are encouraged to submit a good quality photograph, which has the capabilities of being reproduced in large quantities along with each registration form. By following the procedures as prescribed below for processing the child's photograph, the family case manager will receive a good quality photograph of the child, which will serve as a very valuable tool in finding a permanent adoptive home. Photos must be updated yearly if a child's plan is still adoptive placement.

There are two (2) ways to process a child's photograph for the “My Forever Family” Picture Book.

(1) Sears Photography Services

The National Adoption Exchange (NAE) has arrangements with the corporate office of Sears to provide professional photographs of all children who are free for adoption. If a special needs child is eligible to be placed on the NAE; i. e., the child can be placed outside of Indiana, the procedures outlined below for acquiring a Sears picture should be followed:

- (a) Request a Sears authorization form from the Adoption Initiative clearing the child for photography services by Sears. The child's family case manager is responsible for making the arrangements for the Sears sitting.
- (b) The local Sears portrait studio will give the family case manager a three-pose proof sheet the day of the sitting. This will be used to register the child in the “My Forever Family” Picture Book. Sears also will send the photograph to the National Adoption Exchange. The NAE will distribute photographs to the

National Adoption Network (NAN) and the Adoption Initiative.

- (c) The Adoption Initiative will forward the remaining photographs to the child's family case manager or SNAP specialist for further distribution.

(2) Agency's Photography Services

The agency holding wardship of a child for whom an adoptive placement outside of the State of Indiana cannot be considered and, therefore, whose photograph cannot appear in the NAE is responsible for making arrangements to have a good, sharp, clear, close-up photograph made of the child.

- (a) Professional photographs are preferred. Wal-Mart, Sears, K-Mart, Target, and J. C. Penney periodically offer professional photography specials at a reasonable rate. Dates of the photography specials are announced by the local newspaper and television station.

School photographs are acceptable. Therefore, funds are to be available for the child(ren) to participate in the program. If the child is not school-age, most schools will provide such services, upon request, for a fee. Local high schools, college and university journalism and photography classes are good resources to explore for assistance in securing a quality photograph.

- (b) Color photographs are desired. Polaroid photographs are not acceptable.
- (c) If an agency or personal camera is used, it is very important to take into consideration the appropriate background and lighting needed in order to get a good, clear, vivid picture. A plain, neutral background is appropriate. Avoid a dark background if the child is wearing dark clothing or if the child's complexion is in the medium to dark range. Avoid backgrounds containing pictures, flowers and other decorative wall items. The main focus should be on the child.
- (d) A tight facial (close-up) shot is always desirable, even if a child has a noticeable disability. Information on the child's disability can be placed in the narrative.

- (e) To reduce or avoid shadows in the photographs, every effort should be made to see that the lighting is centralized; and the child should be positioned so that all sides are clearly in focus

NOTE: While family narratives/photographs are no longer printed in the “My Forever Family” Picture Book photolisting, a family that a COFC is promoting through another recruitment resource could submit a photograph for inclusion with the narrative.

711.322 Statewide Adoption Fairs

Adoption fairs are held at least twice a year in different locations throughout the state. The fairs feature pictures, social summaries, and occasional videos of specific children who are in need of adoptive homes.

712 Services to Adoptive Parents

The following procedures are required to adequately assess and prepare prospective adoptive parents for placement of a child.

712.1 Initial Intake Adoption Procedures

The first step in the process of educating and preparing a family for adoption occurs at the point at which the potential parent(s) makes the first contact with the agency. The way in which an agency responds to an inquiry sets the tone of the entire placement process, and may assist or hinder the family's ability to develop a realistic picture of its own capabilities and skills in parenting a child.

712.11 Initial Contact Procedures

Initial calls regarding adoption are to be taken by a family case manager or other individual designated in each county office of family and children by the Director. This person must be knowledgeable about Indiana adoption as it applies to children with and without special needs. The person will log calls on an Adoption Inquiry Form (Appendix P) and refer to the appropriate person as outlined below.

712.12 Responsibilities of Intake/ Designated Family Case Manager

The designated family case manager (FCM) has the responsibilities outlined below:

712.121 For All Adoptable Children

Contact must be made with all persons making initial adoption inquiries within three (3) working days in order of receipt regardless of the type of child requested; i.e., children with or without special needs.

712.122 For Non-Special Needs Children

- (1) Record responses to inquiries on the bottom half of the Adoption Inquiry Form (Appendix P).
- (2) Refer persons interested in adopting children without special needs to the proper licensed child placing agency (LCPA) for information on available services. This will ensure that they will receive services on a more timely basis. The emphasis of the county office of family and children (COFC) is on providing adoption services to persons interested in adopting children with special needs.

712.123 For Special Needs Children

- (1) Record responses to inquiries on the bottom half of the Adoption Inquiry Form.
- (2) Make a copy of the form, and send it to the appropriate SNAP specialist.
- (3) Keep a log of SNAP adoption inquiries that will be given to the regional SNAP specialist.
- (4) Conduct initial in-office/home interview and participate in orientation meetings or training for persons interested in adopting children with special needs. The Checklist of Acceptable Challenges can be completed during these sessions. (See Appendix Q of this section) Or refer these persons to LCPAs contracting to provide adoption services.

712.2 Adoptive Family Preparation and Assessment

In the past, it has been presumed that nurturing, loving and providing a secure home with some encouragement is all that is needed to successfully parent emotionally disturbed, neglected, abused, and abandoned children. The increased number of requests for post-placement and post-legal adoption services from families who have adopted children as infants and children with special needs has dispelled this myth.

Adoption is a life-long process and commitment. Therefore, families are to be provided training and otherwise prepared and supported during the process. Preparation and assessment of families for adoption is a process designed to accomplish these objectives. Through this process, families are empowered to undertake adoption with more confidence.

The ultimate adoption goals of DFC are to:

- (1) provide a safe, healthy, permanent home for children;
- (2) develop and implement uniform statewide adoption policies and procedures; and
- (3) reduce the adoption disruption and dissolution rate.

In order for DFC to accomplish these goals, we must view adoptive parents as precious resources and assets, who are to be given preparation and intensive support. Preparation is realized when adoptive parents are empowered with the knowledge, skills, support services and

financial assistance necessary to effectively respond to the needs of children placed with them for adoption and to freely advocate on their behalf.

A family preparation assessment process has been created and implemented statewide to promote uniform adoption procedure throughout Indiana. It is a modified version of a training module developed by Spaulding for Children entitled "Parents as Tender Healers" (PATH) taken from the National Resource Center for Special Needs Adoption. PATH is a module consisting of two (2) components:

- (1) the adoption orientation meeting; and
- (2) the adoption preparation training.

712.21 The Adoption Orientation Meeting

Applicants wishing to adopt special needs children are to attend an Adoption Orientation Meeting to be made available on a regular basis at designated sites within each region. The orientation meeting should be offered based on the number of families interested in adopting and the needs of the children in the region.

The purpose of the adoption orientation meeting is to provide information regarding the adoption process in general and the Special Needs Adoption Program specifically. This meeting is to address but is not limited to:

- (1) a description of who the waiting children are, using pictures and written descriptions;
- (2) a description of common challenges, crises and troubling behaviors of the children who wait;
- (3) an explanation of children who have experienced abuse/neglect;
- (4) an overview of:
 - (a) adoption process and training;
 - (b) agency expectations;
 - (c) pre-placement activities;
 - (d) visitation;
 - (e) placement information including:
 - (i) placement agreement forms;
 - (ii) post-placement supervisory services;
 - (iii) adoption subsidy information brochure; and
 - (iv) support groups and services;
 - (f) legalization process;

- (g) post-legalization services; and
 - (h) subsidies and other financial assistance.
- (5) an explanation of specific topics germane to Indiana's Special Needs Adoption Program and children with special needs such as, but not limited to:
- (a) developmental delays;
 - (b) attention deficient disorder (ADD);
 - (c) attachment issues;
 - (d) severe emotional challenges;
 - (e) intellectual challenges including information regarding:
 - (i) realistic and appropriate academic and behavior expectation;
 - (ii) available programming;
 - (iii) special educational opportunities for all challenges; and
 - (iv) other support services within the school system;
 - (f) fetal alcohol syndrome/fetal alcohol effect
- (6) a sharing of the video vignette "The Children Who Wait".

Special needs adoption practice is shaped and driven by the needs of the children who wait for adoption placement. As professionals and families embark upon the challenges of this work, it is crucial that all involved have a clear understanding of the children who are special needs; what challenges they face, and what the implications are for training and practice.

Information regarding the adoption orientation meeting can be provided to the prospective applicant(s) by an office staff person(s) who is designated

*This vignette was developed as a part of the National Special Needs Adoption Curriculum and presents families and practitioners speaking to these issues.

to receive in-coming telephone inquires for adoption. A list of the specific meetings that indicates the date, time and place of each meeting are to be provided to the person(s) receiving the telephone inquiries. A list of the names, addresses and telephone numbers of the caller(s) is to be given to the regional SNAP specialist or designee or to the LCPAs contracted to provide orientation and training in the counties where the orientation/training will be conducted.

Prospective applicants who are interested in adoption but are unable to attend the adoption orientation meeting are to be contacted by the regional SNAP specialist or the designated person in the prospective applicant's county of residence. A personal orientation is to be scheduled in the regional office, appropriate COFC or the home of the prospective applicant(s). See Appendix R for a sample notification to adoption applicants interested in special needs children and who elect to continue

the application process. Such notification advises adoptive applicants what to expect as the process continues.

712.22 Adoption Preparation Training Sessions

Effective adoption preparation training is one of the major procedures used to empower families who have decided to pursue special needs

adoption. This training also helps potential applicants to be more realistic and to determine if

special needs adoption is the best option for them and how they may be effectively prepared for the rewards and challenges associated with the decision to adopt.

The following philosophies form the foundation for the adoption preparation training:

- (1) Most families can adopt with preparation and support.
- (2) Adoption is a life-long and life-changing process.
- (3) Success in an adoption can be more accurately measured by the degree to which the needs of the family are being met and by the enduring strength of the commitment to the adopted children rather than what or how many problems the family may experience as a result of the adoption.

After attending the orientation meeting, all potential adoption applicants, will be scheduled to attend foster parent training or other approved training as a means of adoption preparation training.

Adoption preparation training provides an opportunity for the potential adoption applicant to become sensitized to:

- (1) issues of separation and loss;
- (2) the importance of building or maintaining essential connections; i.e., permitting a child to have some degree of connection with the past;
- (3) the importance of enhancing self-concept;
- (4) the importance of preserving and promoting a child's cultural identity;
- (5) the role and responsibility of all parties in the achievement of permanency;
- (6) the difference between attachment and bonding; and
- (7) the development of skills in building relationships and instilling discipline through effective communication.

Potential applicants will have the opportunity to develop a relationship with a “buddy” adoptive or foster family; and through that opportunity, they may develop an ongoing support system.

Prospective adoptive families may need to become licensed foster parents in order to provide services to children who are considered a legal risk placement. See subsection 706.24. Such licensure of adoptive families will increase the number of permanent homes available for children and decrease the length of time children wait for adoptive homes.

712.23 Adoption Preparation Assessment Tools

The purpose of the preparation assessment tools is to build knowledge and skill resulting in empowerment.

712.231 Types of Adoption Preparation Assessment Tools

The following information delineates the assessment tools used to prepare a person/family for adoption.

712.2311 Adoptive/Foster Family Inventory

This tool is to be utilized with each prospective adoption applicant. The adoption case manager is to offer assistance and/or complete the tool for those applicants who are not comfortable in processing written documents. This tool is used to assist the adoption case manager in completing the written process and to assist the applicants in clarifying their feelings and beliefs about adoption. See Appendix S of this section.

The adoptive/foster family inventory contains the following:

- (1) a self-description of the person or family applying and background information;
- (2) a description of the adoptive applicant’s marriage relationship or relationship with significant other(s) as appropriate; and
- (3) a description of the applicant’s children and the applicant’s relationship with them as appropriate.

712.2312 Foster Care/Adoption Information Sheet

This tool is to be utilized with each applicant. The adoption case manager is to offer assistance and/or complete the tool for those applicants who are not comfortable in processing written documents.

This tool is used to gather personal information and placement preference data from the prospective adoption applicant, to assist the adoption case manager in completing the written process and to help the applicant take a closer

look at his or her own personal background and the type of child(ren) that the applicant feels he or she can successfully parent. (See Appendix T of this section.)

The foster care/adoption information sheet contains the following:

- (1) identifying information;
- (2) personal data;
- (3) information on the immediate family.

712.2313 Family Network Diagram, Genogram and Eco-Map

All prospective adoption applicants are to complete the family networking diagram, genogram and eco-map during the home visits with the designated adoption staff person. These tools are used to describe basic family membership and structure. Specific symbols are used to describe the family members, their relationships, and their status positions in the family. See The Family Network Diagram Symbols: (Genogram and Eco-Map), Appendix U. The purpose of these tools is to assist the family in making some realistic choices about the types of children and the types of behaviors and challenges they can or cannot accept; and to encourage them to look more closely at their family situation through use of the:

(1) Family Network Diagram Form

See Appendix V of this section. This tool looks at:

- (a) family structure;
- (b) family network members involved in the adoption preparation process; and
- (c) family members and significant others who need to be prepared for the adoption.

See Appendices W and X respectively for “Interpretation of the Family Network Interview” and the “Outline for a Brief Family Network Interview”.

(2) Genogram

See Appendix Y of this section. The symbols for the genogram are the same as those used with the family network diagram. They are used to depict the development of a family over time. See Appendix U of this section.

In addition to the multi-generational diagram of the family, genograms are used to record the following:

- (a) family interaction patterns; e.g., whether the family members were very close or distant; whether there were conflicts, etc.);
- (b) medical history; and
- (c) other family information of special importance, such as:
 - (i) ethnic background and migration date
 - (ii) religions or religious change
 - (iii) education
 - (iv) occupation or unemployment
 - (v) military service
 - (vi) retirement
 - (vii) criminal history
 - (viii) physical abuse or incest
 - (ix) obesity
 - (x) alcohol or drug abuse
 - (xi) smoking
 - (xii) dates when family members left home
 - (xiii) current location of family members

See Appendix Z for the “Outline for a Brief Genogram Interview” and Appendix AA for the “Genogram Interpretive Categories”.

(3) The Eco-Map

See Appendix BB of this section.

The purpose of the eco-map is to identify the following:

- (a) family structure;
- (b) family interaction patterns;

- (c) family members involved in the adoption preparation process;
- (d) family members and significant others who need to be prepared for the adoption process;
- (e) family environment and aspects that are important;
- (f) family and other relevant systems;
- (g) family and community resources available; and
- (h) family boundaries and the nature of them.

The following tools should be used in preparing the Eco-Map: the “Eco-Map Diagram Form,” Appendix CC; the “Eco-Map Symbols,” Appendix DD; and “Interpretation of the Family Eco-Map,” Appendix EE.

712.2314 Child Behavior/Child Health Challenges Checklist

This is a tool used to further explore the level of acceptance an adoptive applicant has regarding specific behaviors and health problems a child with special needs might have. The tool is designed to elicit information required to make the best match between a child with special needs and a prospective adoptive family. See Appendix FF.

712.232 Practical Application of Assessment Tools/Techniques

Preparation and assessment of families is a process by which families are empowered to make informed decisions as to whether or not adoption is an appropriate option for them. Criteria for using the tools/techniques listed in subsection 712.23 are listed below and must:

- (1) be used with all prospective adoptive families;
- (2) be compatible with the family's style of communication, relating and self-expression;
- (3) respect or provide for the family's integrity;
- (4) enhance the family's power to make decisions regarding adoption;
- (5) allow for the review of the information gathered with families in terms of its validity to the process;
- (6) provide opportunity for interaction between family and case manager;
- (7) be clear as to applicability to the preparation/assessment process;

- (8) allow for the review of the results with the family in terms of the educative and assessment-related qualities of the tools/techniques covering the following;
 - (a) how/whether these methods impacted preparation and assessment of the family;
 - (b) what questions the method raised and/or answered; and
 - (c) what else will be needed in the process;
- (9) enhance the understanding of the family and/or child.

712.24 Additional Methods of Gathering Information for Adoption Assessment

The following methods are used to obtain information concerning a prospective adoptive family in addition to that obtained via use/completion of the aforementioned assessment tools.

712.241 References

References serve as a means of gaining further understanding of the applicant(s). References should be persons who are well acquainted with the person/family and who can comment on their ability to parent an adopted child, with emphasis on the particular type of child requested. References will be contacted by letter during the family preparation assessment process and requested to complete a reference form. See Appendices GG and HH for “Request for Reference Letter” and “Reference Form” respectively. Three (3) references are required. Sources could include but are not to be limited to, one relative, a friend, neighbor, employer, former employer, teacher, religious leader or physician.

712.242 Interviews

No specific number of interviews is required for a family preparation assessment. Usually, a minimum of two (2) or three (3) sessions following the initial interview(s) and orientation meeting will be necessary. Personal interviews with family members and other persons living in the home are required and are used to complete the “Family Network Diagram”. See Appendix V of this section. It is also used to share general information on the adoption process and the responsibilities of the agency and the family in the adoption process.

712.243 Home Visits

At least two (2) home visits will be made with the family, but more may be added depending upon need. These visits provide an opportunity to accomplish the following goals:

- (1) Process the genogram and the eco-map.
- (2) Assess the physical environment.

- (3) Obtain a sense of the family in the home environment.
- (4) Determine if the housing and neighborhood are sufficient to promote the health, safety, wellbeing and privacy of each family member.
- (5) Gain a sense of how well the child(ren) will integrate into the family.
- (6) Answer questions and discuss any private concerns of the family.
- (7) Review the family's written materials.

712.244 Financial Profile

The prospective adoptive family must have sufficient resources to meet the everyday expenses of each family member as well as make provisions for future needs. Medical insurance availability or Medicaid eligibility is necessary before a child can be placed with a family for adoption. See Appendix II of this section.

712.245 Policy Provisions in Accident and Sickness Insurance for Adopted Children

IC 27-8-5-21 requires the following insurers to cover adopted children of the insured or enrollee on the same basis as other dependents:

- (1) any individual or group policy or plan of health and accident insurance regulated under IC 27-8-5; or
- (2) any health maintenance organization or limited service health maintenance organization regulated under IC 27-8-7 that provides coverage to an Indiana resident.

The policy or plan may not contain any provisions concerning:

- (1) pre-existing condition limitations;
- (2) insurability;
- (3) eligibility; or
- (4) health underwriting approval that solely concerns children who are adopted.

Insurance coverage provided under IC 27-8-5-21 is effective upon the date of placement for the purpose of adoption or the date of the entry of an order granting the adoptive parent custody of the child for purposes of adoption, whichever comes first. Insurance coverage continues after the established effective date unless the placement disrupts prior to legal adoption, and the child is removed from placement. If a specific premium or subscription fee is required to cover the adopted child, the

policy/contract may require notification of the adoption and payment of the premium or fees within 31 days after the adoption if the policy/contract is to continue beyond 31 days.

Adoptive families and potential adoptive families should be advised to investigate the insurance company policies on coverage for adopted children. If the company's policies are found to be in conflict with IC 27-8-5-21, it is to be reported to the Indiana Department of Insurance for resolution, particularly since some insurance agencies doing business in Indiana are not licensed by the insurance commissioner of Indiana. The toll-free number for use in-state is 1-800-622-4461. Indianapolis area residents may call 232-2395.

712.246 Adoptive Family Medical Report

As a basis for evaluating the health status of a prospective adoptive applicant, all members of the household, including all children in the home, must have a physical examination. The physical examination must be done within 12 months prior to the date a child is placed. If a child is not placed within 12 months of the physical examination, a subsequent medical report must be submitted. The prospective adoptive applicant is responsible for all fees associated with the required physical examinations. See "Medical Report for Adoption/Foster Care" in Appendix JJ of this section.

712.3 Processing the Adoption Application, Consent and Release of Information Forms

To ensure the best interests of the child(ren) who is to be placed for adoption is being achieved, the processing and signing of the following forms are required:

712.31 Adoption Application

NOTE: According to the Interethnic Adoption Placement (IEAP) provisions (federal P. L. 104-188), a person or government that is involved in adoptive placements may not deny to any individual the opportunity to become an adoptive parent on the basis of the race, color, or national origin of the individual.

The adoption application is one of the first forms to be utilized in the adoption process and must be completed by prospective adoption applicants with the exception of licensed foster parents or relatives already caring for the child (ren). The application serves multiple purposes and is designed to document:

- (1) a formal notice indicating an intent/interest in adopting;
- (2) the characteristics of special needs children that the prospective adoption applicant is willing to consider;
- (3) general background information regarding the family structure;
- (4) knowledge regarding reason(s) for adopting; and

(5) information from potential references.

See “Application for: Foster Family Home License or Adoption,” Appendix KK in this section.

712.32 Consent for Release of Information

The prospective adoption applicant is to complete, date, and sign this form thereby giving approval to release pertinent information necessary for the completion of the adoption family preparation assessment process. The information is shared with the licensed child placing agency (LCPA), COFC and the Central DFC office. See “Consent to Release Information for Foster Family Home License or Adoption,” Appendix LL of this section.

712.33 Voluntary Release for Limited Criminal History Record

This form is to be completed and signed by the prospective adoptive applicant voluntarily giving consent for law enforcement agencies and/or criminal justice systems in every known state of residence to release prior criminal history or arrest records to the LCPA, COFC and the Central DFC office. See Appendix MM of the section.

712.34 Request for Limited Criminal History Information

After receiving a signed voluntary release for limited criminal history information from the prospective adoptive applicant, the LCPA or the appropriate COFC will process this form as prescribed to request desired information and will submit the same to the Indiana State Police, Central Repository. See Appendix NN of this section.

Denial for adoption cannot be made strictly on the basis of an applicant’s criminal record. This background must be evaluated in relation to current functioning. Withholding information regarding a criminal record may warrant denial of an application. According to IC 31-19-11-1 (c), a conviction of a felony or a misdemeanor related to the health and safety of a child by a petitioner for adoption is a permissible basis for the court to deny the petition for adoption. In addition, the court may not grant an adoption if a petitioner for adoption has been convicted of any of the felonies described as follows:

- (1) Murder (IC 35-42-1-1).
- (2) Causing suicide (IC 35-42-1-2).
- (3) Assisting suicide (IC 35-42-1-2.5).
- (4) Voluntary manslaughter (IC 35-42-1-3).
- (5) Reckless homicide (IC 35-42-1-5).
- (6) Battery as a felony (IC 35-42-2-1)
- (7) Aggravated battery (IC 35-42-2-1.5)

- (8) Kidnapping (IC 35-42-3-2)
- (9) Criminal confinement (IC 35-42-3-3)
- (10) A felony sex offense under IC 35-42-4
- (11) Carjacking (IC 35-42-5-2)
- (12) Arson (IC 35-43-1-1)
- (13) Incest (IC 35-46-1-3)
- (14) Neglect of a dependent [(IC 35-46-1(a)(1) and IC 35-46-1-4 (a)(2)].
- (15) Child selling [(IC 35-46-1-4(b)]
- (16) A felony involving a weapon under IC 35-37.

712.4 The Family Adoption Preparation Assessment
712

713 The following is a step-by-step procedural outline of the creation and disposition of the family adoption preparation assessment:

712.41 Writing the Family Adoption Preparation Assessment

It is important that the family adoption preparation assessment be written in a manner that empowers the family and contains factual information that is related directly to the adoption process. To reduce technical errors in recording information to be contained in the written process, please refer to "Guide to Strengthening Technical Skills in the Family Preparation Assessment Process," Appendix OO of this section.

The following elements as contained in the "Outline for Adoptive/Foster Family Home Preparation Summary" and Cover Page (Appendix PP) are to be used in writing the family adoption preparation assessment.

- (1) Identifying information
- (2) A contact summary
- (3) Current family structure/family network diagram
- (4) Family history/the genogram
- (5) Parenting style and strengths
- (6) Social supports and resources/the eco-map
- (7) Home environment/community
- (8) Financial profile
- (9) Parental understanding of child's history

- (10) Child-specific assessment
- (11) Verifications (Criminal history from each state of residence, local criminal history, child protection history from Indiana and each state of residence, Sex Offender Registry. COPIES OF ALL MUST BE INCLUDED IN PREPARATION SUMMARY.)
- (12) Family's understanding of agency role
- (13) General and summary assessment
- (14) Recommendation of family for adoption by county office of family and children or licensed child placing agency.

The final element for a family preparation summary is the "Recommendation and Signatures" page. See Appendix QQ.

712.42 Approving/Disapproving the Adoption Family Preparation Assessment

The following information clarifies the difference in procedure when considering applicants who wish to adopt a child with no special needs and those who wish to adopt a child with special needs:

712.421 For Adoption Applicants Requesting Placement of a Non-Special Needs Child

The decision regarding whether to recommend an adoption applicant(s), based upon a family preparation assessment, for placement of a non-special needs child is made at the county office (COFC) level among the family case manager (FCM), FCM supervisor and Director. No other procedures are required.

Families inquiring about the adoption of infants and non-special needs children who are not in the state's custody should be referred to licensed child placing agencies (LCPAs) specializing in recruitment and services for these children.

712.422 For Adoption Applicants Requesting Placement of a Special Needs Child

For the purpose of making decisions regarding placement of special needs children, regional SNAP teams are established in each region. These teams decide whether or not to recommend an applicant/family for adoptive placement of a special needs child. The team approach provides more objectivity and serves as a support mechanism to the family case manager for the applicant/family regarding the decisions made relating to the placement. See subsection 707.2 for more information on regional SNAP teams.

712.43 Updating An Adoption Family Preparation Assessment

It is important that the family preparation assessment be updated on a systematic basis. Such a system aids in selecting and preparing the appropriate child(ren) for adoptive placement with the family. The policies and procedures outlined below are to be followed in the updating process:

- (1) Annual update: If a family has been recommended for placement for one (1) year or more, an update must be completed before a placement is made. Agencies shall notify families who have been recommended for placement in writing when the update is due. The following forms will be mailed to the prospective adoptive family by the LCPA or the COFC: “Family Preparation Updating Information Questionnaire”, “Special Needs Challenges”, and “Notification to Update Adoption Family Preparation Assessment”. See Appendices RR, SS, and TT.

NOTE: Update fees: A family preparation assessment update fee can be charged if the family has been recommended for placement two (2) years or more, a placement has not been made, and the family desires not to adopt a child with special needs. Updating information is to be returned to the agency within 30 days after receipt of the request for it. Families desiring to adopt a child(ren) with special needs and who have been recommended for placement will not be charged an update fee.

- (2) Notification of major changes: The families who have been recommended for placement shall notify their licensed child placing agency (LCPA) or county office of family and children (COFC) within 10 working days when a major change(s) has taken place within the family unit. This would include change in address, household composition and employment or income. Any substantiated child abuse or neglect reports and criminal charges occurring within the past year must also be reported to the LCPA or COFC.

712.44 Processing the Completed Family Preparation Summary

Adoptive applicants are to be informed when their family preparation assessment has been completed and the status of same. The LCPA or COFC that completed the assessment will present a copy of the completed and approved family preparation summary to the prospective adoptive family. Adoption records and data are confidential, but adoption applicants have a right to review and receive a copy of their family preparation summary upon request.

712.45 Summarizing the Family Preparation Assessment for Use in Court

Indiana Code does not require submission of the full adoptive family preparation assessment for the adoption petition to be granted. Rather a summary report including the above minimal information must be submitted. The summary report and recommendation of the agency or agencies shall not be binding on the court, but shall be advisory only.

According to IC 31-19-8-5, the COFC shall submit to the court a written report of its investigation and recommendation as to the advisability of the adoption within 60 days of receipt of the petition. If the COFC is unable to complete the report within the prescribed amount of time, the COFC is to contact the court and request additional time. This may be done with the authorization of the Director of the COFC or that person’s designee. The report must include, to the extent possible:

- (1) the former environment and antecedents of the child;
- (2) the fitness of the child for adoption;
- (3) whether the child is classified as "hard to place" as defined by IC 31-9-2-51, (see subsection 722.1); and
- (4) the suitability of the proposed home for the child.

As cited in IC 31-19-8-6, the report may not contain information concerning the financial condition of the parent(s) or a recommendation that a request for an adoption subsidy be denied, in whole or in part, due to the financial condition of the parent(s).

713 Locating and Selecting an Appropriate Family

The search for an adoptive home for a non-special needs child who is in the custody of the state begins and ends within the COFC unless special circumstances warrant a referral to the regional SNAP team. The search for an adoptive home for a child having special needs and who is in the custody of the state begins within the COFC with the assistance and support of the regional SNAP team and SNAP specialist. If an appropriate family is not identified locally, the search for a potential adoptive family resource is shared with other COFCs within the region. In addition, the statewide SNAP Council is to be used to share information about families seeking to adopt and the children who are available for adoption. If a child is placed in a relative or foster family home in which the criteria for an adoptive placement are met, continuance in that home in which the child has formed strong positive attachments is in the child's best interests. See subsections 706.1 and 706.22 for guidelines for relative and foster parent adoptions.

Indiana's "My Forever Family" Picture Book can provide assistance in locating adoptive families. This is a child-specific recruitment technique. Children who are to be featured are to be referred to the regional SNAP specialist with a current photograph, child registration form and social history. The SNAP specialist is to facilitate the publication. The "My Forever Family" Picture Book is mailed to other adoption partners in other states, and can be accessed via the Internet thereby greatly broadening the base of potential available families.

If the child(ren) can be placed out-of-state, the National Adoption Exchange (NAE) serves as a source for locating adoptive families. Refer to subsection 711.3214 for further information regarding the NAE.

During the early stages of adoption, a situation may develop in which the adoptive parent and the adoptee realize that their expectations of each other do not match. Unmatched expectations produce a serious situation for children and families. Although both the adopted children and the families adopting them enter into their new relationship with high expectations, these expectations may have very little in common. Therefore, the selection of an adoptive home is to be made based upon the ability of the adoptive parent(s) to:

- (1) meet the child's physical, medical, social, cultural, mental and psychological needs; and
- (2) to be able to offer the child a secure future with a sense of belonging.

This is in keeping with the child's best interests. The COFC with legal responsibility for the child, through the regional SNAP team and with the support and assistance of the SNAP specialist, has the right and the responsibility to choose the most appropriate family from among those available.

Placement decisions are to be based upon the child's needs and the ability of a particular family to best meet those needs.

714 Pre-adoptive Placement Procedures

The following procedures are to be used prior to making any adoptive placement:

- (1) Provide written copies of psychological history and evaluation, current ongoing support services, important family background information and other details concerning the child's behavior and needs to all appropriate parties; i. e., the prospective adoptive parent(s) or another agency that has an adoptive source.
- (2) Exchange written information regarding the child and family prior to placement of the child.
- (3) If another agency is involved, contact the other agency directly to clarify information about the child and the family. Confirm placement plans in writing using SF23142/FPP1446, Interagency Agreement in Adoption Placement, Appendix G in this section.
- (4) Arrange for the prospective adoptive parents to meet with the child's case manager and foster parents to discuss the child, if appropriate.
- (5) Arrange pre-placement visits for the child and family.
- (6) Confirm the plans for supervision.
- (7) Discuss post-placement and post-legal adoption services.

This procedure shall be followed in all placements.

714.1 Sharing Information with the Adoptive Parents

In placing a child for adoption, the COFC is to share with the adoptive parents all available information concerning the biological parents, including medical, psychological, and educational information that does not identify the child's biological family or their address and phone number. This information is to be provided to the adoptive parents no later than the time that the placement is made; or, with the consent of the adoptive parents, no longer than 30 days after placement. The COFC also must provide to the adoptive parent(s) information regarding the child, including all available social, medical, psychological, educational, and legal records. This information always must be given in writing as well as verbally. Regarding records concerning the child and the biological parents that the COFC knows exist in other agencies but of which the COFC does not have possession, the COFC is to provide the adoptive parents with a summary of those records. At the request of the adoptive parents, the COFC also is to attempt to obtain a copy of requested records from the other agencies. The family case manager (FCM) is to read the records very carefully in order to remove all identifying information, following which the records are to be presented to the adoptive parents (IC 31-19-17). See also subsection 709.2 for an overview of more specific information that must be shared.

Copies of psychological evaluations, case plans, social summaries, school records, medical reports and other pertinent data on the child must be shared with the adoptive family. The adoptive parent(s) must affirm in writing the full extent of the information shared regarding the child(ren). The family case manager is to review the information for accuracy and modify, if necessary. The adoptive parent(s) and the family case manager must sign and date the affirmation, thus verifying that all parties involved are in agreement with the content of the document.

714.11 Child Social Summary Data

Before an adoptive placement occurs, the prospective adoptive family must be given the child's social summary to use as a guide to discuss the child's history with the case manager in detail. This will help the family make a more informed decision as to whether they desire to adopt a specific child. See Appendix UU "Social Summary on Child to be Placed," in this section for the information to be shared with the family before placement.

714.12 Adoptive Placement Agreement

Prior to placement of a child into an adoptive home, the adoptive parent(s) must sign an adoptive placement contract. See Appendix VV for a sample of such a contract.

715 Adoptive Placement Procedures

The adoptive placement is a sensitive and critical period for both the prospective adoptive family and the adoptee. In some instances, they will be separated from each other by geographic distance. The opportunity to get to know each other before placement should be managed via visitation to bridge the gap from foster care to adoptive placement and to implement good, sound adoptive placement procedures. These procedures can be found in Appendix WW of this section, "Family Case Manager Procedure for Adoption Placement."

Once the decision is made to place a child in a selected adoptive home, the time for moving the child will be determined by the county after consultation with the SNAP specialist, as appropriate. The process of moving children should be made in stages:

- (1) The cooperation of the foster parent(s)/primary caregiver(s) is to be sought in the total planning for moving the child out of care into the adoptive placement whenever possible.
- (2) The first meeting between the child and the adoptive parents is to be arranged, preferably in the foster home.
- (3) A commitment from the child, adoptive parents, family case manager, and foster parent(s)/caregiver(s) is to be obtained whenever possible in order to proceed.
- (4) The pre-placement visits are to be planned. The number will depend upon the needs of the child and family.
- (5) The child is moved.
- (6) Post-placement visits and supervision are to be provided.
- (7) The provision and availability of post-legal adoption services is to be discussed.

In placing any child, it is important to share with the adopting family the availability of support services and to leave an open door for contact with the agency. This step is very important because a significant number of children reenter the system, even those who were adopted as infants. These children may not have been identified as children who have some type of special challenge that requires support services which often times requires some type of financial assistance such as AAP, CAS, IASP, and NRAE.

715.1 Types of Children Relative to Placement Procedures

Children can be divided into four (4) categories for purposes of adoptive placement: non-verbal, verbal, non-special needs and special needs children.

715.11 Placing the Non-Verbal Child

Non-verbal children usually can be placed into permanency more quickly than verbal children. After an adoptive placement is made, the family case manager is to arrange for at least two (2) supervisory visits for a child who is four (4) months old or younger and at least three (3) supervisory visits to the adoptive home for the toddler, or as needed.

715.12 Placing the Verbal Child

Generally, the verbal child is over three (3) years of age. However, there can be exceptions to this generalization. For example, a four year old child who is developmentally delayed might be a non-verbal child. Most children over the age of three need two to three weeks to adjust to the idea of moving. Preplacement visitation prepares the child and the adoptive parents for the reality of living together.

715.13 Placing the Non-Special Needs Child

Refer to subsections 710.2 and 710.3 on finding permanency for the non-special needs and the special needs children respectively.

Placement of a child with no special needs can be arranged and implemented entirely at the local level. Such a child need not be referred to the regional SNAP specialist but may be referred given appropriate special circumstances.

The number of pre-placement visits is determined by the needs of the child and family. It is usually appropriate to have more visits for the older or special needs child. The number of visits is to be agreed upon mutually by the family case managers for the child and family, the adoptive family and the SNAP specialist.

715.14 Placing the Special Needs Child

The COFC must use the procedures for placement as outlined in subsection 707.24, Procedures for Referring a Child to the Regional SNAP Team. The decision for a special needs child(ren) to be placed in an adoptive home in intradepartmental placements is to be made by the regional SNAP team and the COFC. The COFC with legal custody has the final decision as to when a placement begins. The decision is to be made cooperatively via an exchange of the child's social, medical, developmental and legal history, as well as the recommended family preparation assessment. An appropriate period of visitation must have taken place also prior to placement with the pre-adoptive family. All information, decisions and agreements are to be provided in writing as specifically as possible in order to provide a clear and accurate picture of the child and the family.

715.2 Adoption Taxpayer Identification Number (ATIN)

The adoption taxpayer identification number (ATIN) is a temporary identification number issued by the IRS when a Social Security number cannot be obtained for an adopted child. A family should apply for an ATIN if their situation meets all of the following qualifications:

- (1) The adoption is a domestic adoption.
- (2) The child is legally placed in the home for adoption by an authorized adoption agency/agent.
- (3) The adoption is not yet final, and the family is unable to apply for a new SSN for the child pending finalization of the adoption.
- (4) The family qualifies to claim the child as a dependent.

The form to be used to obtain an ATIN is Form W-7A, Application for Taxpayer Identification Number for Pending Adoptions. The family should contact the IRS for more information and for the form.

716 Post-Placement Supervision and Services

The adoptive placement of a child does not end the responsibility of DFC. On the contrary, it marks the beginning of involvement in a particularly crucial stage of an adoptive placement. The appropriate and timely provision of post-placement supervision and services could mean the difference between a successful or a failed adoption.

716.1 Need for Immediate Contact and Follow-Up

After the child has been placed in the home, a follow-up visit should be planned within the first week. Subsequent visits can be more or less frequent and are to be determined by the family's need for support or services. The case manager must actually see the child at each visit and meet with the child alone if the child is of an age to participate in meaningful dialogue.

716.2 Case Manager Supportive Services

The function of supportive services is to be family-focused and to provide the following services:

- (1) Information about and guidance through the adoption placement supervisory period for the child, the parent(s) and the family as a whole.
- (2) Sources of information and referral resources, as needed.
- (3) Financial assistance, including adoption subsidy.
- (4) Evaluation of the progress of the placement.

The length of the supervisory period is determined by agency policy rather than by law. Six (6) months to one (1) year of supervision is usually appropriate. The longer supervision period is suggested for the older or special needs child.

716.3 Assisting the Family with Legal Finalization of Adoption

The county office of family and children (COFC) shall give appropriate assistance in completing the adoption process. The COFC is to give consent to the adoption when the family is functioning satisfactorily; or if difficulties exist, when the family is prepared to cope with them. Consent by the COFC is to be based on a factual showing of readiness for the finalization of the adoption.

716.31 Filing the Adoption Petition

Adoption petitions may be filed:

- (1) in the county where the adopting parent(s) resides, if an Indiana resident;
- (2) in the county where the public or private agency having custody of the child is located; or
- (3) in the county where the child to be adopted resides. (IC 31-19-2-2).

Adoptive parents must be residents of the state of Indiana in order to file an adoption petition in Indiana with one exception. IC 31-19-2-3 states that an individual who is not a resident of Indiana and is adopting a hard-to-place child, as defined in IC 31-9-2-51, may file a petition with the clerk of the court having probate jurisdiction in the county where:

- (1) the public or private agency having custody of the child is located; or
- (2) the child resides.

Full information needed by the attorney for the parent(s) filing the petition is to be furnished by the COFC. This will include, as appropriate:

- (1) a copy of the parental consent;
- (2) the court order terminating parental rights;
- (3) the consent of the COFC, if it holds wardship; and/or
- (4) the child's consent, if the child is age 14 or older;
- (5) a medical history report. As prescribed by IC 31-19-2-7, a medical report of the health status and medical history of the adoptee and the adoptee's birth parents, including neonatal, psychological, physiological, and medical care history, must accompany all adoption petitions or be filed within 60 days of the filing of the petition.

716.311 Contents of the Petition

An adoption petition must include:

- (1) the name, sex, race, age (known or approximate) and birth place of the prospective adoptee;
- (2) the new name to be given to the child, if any;

- (3) whether the child owns real or personal property, and if so, a description of the value of same;
- (4) the name, age, and place of residence of the petitioners and the place and date of marriage, if appropriate;
- (5) the name and place of residence of:
 - (a) the child's parent(s);
 - (b) the guardian or next of kin, if the child is an orphan;
 - (c) the court/agency of which the child is a ward, if appropriate; or
 - (d) the agency sponsoring the adoption, if appropriate;
- (6) the length of time, if any, that the child has lived with the petitioner;
- (7) other pertinent information including whether financial assistance is being sought and whether receipt of such assistance is a condition of the petitioner.

716.312 Fees Associated with Petitioning for Adoption

A person who files a petition to adopt a child under 18 years of age must attach to the petition:

- (1) an adoption history fee of \$20 payable to the State Department of Health and
- (2) a putative father registry fee of \$50 payable to the State Department of Health for administering the putative father registry.

716.32 Filing Agency Adoption Reports with the Court

Upon receipt of an adoption petition, the COFC must respond to the court with an adoption report within 60 days. This includes all adoption petitions for minors and independent adoptions except those adoptions sponsored by Indiana-licensed child placing agencies.

NOTE: Agency adoption reports are not binding on the court.

716.321 Contents of Agency Reports to the Court

The agency's report to the court must include as much of the following as possible:

- (1) the prospective adoptee's history;
- (2) the child's fitness for adoption;
- (3) whether the child is considered hard to place; and

- (4) whether the proposed adoptive home is suitable for the child.

NOTE: No information concerning the financial status of the prospective adoptive parents nor any agency recommendation for denial of a subsidy, in whole or in part, based upon their financial status is to appear in an agency court report. It is not considered when the court makes its decision regarding the disposition of the petition.

716.322 Filing the Indiana Medical History Report

COFCs shall complete State Form 9966/Indiana Department of Health (ISDH) 06-073 Indiana Adoption Medical History Report, (see Appendix XX to this section) for all children under COFC wardship who are adopted in Indiana. A copy of this report shall be sent to the State Registrar and the adoptive parent(s) (IC 31-19-2-7). The form is available from the Indiana State Department of Health, Division of Vital Records; P.O. Box 1064; Indianapolis, IN 46206-1064. In addition, a COFC must complete this form for all interagency and intercounty adoptive placements that occur within Indiana for which the COFC is providing supervision when those adoptions will be completed in Indiana. Information necessary to complete the form is to be taken from the referral material on the child provided by the placing agency. If this material is inadequate, the COFC is to send a copy of the Indiana Adoption Medical History Report to the placing agency requesting that they complete the form. Such requests may be sent directly between the two agencies and do not need to be sent through the Interstate Compact.

In relative, stepparent, and non-agency (independent) adoptions, the Indiana Adoption Medical History Report should be completed by the attorney responsible for filing the adoption petition. COFCs, however, are still responsible for submitting a written report of their investigation(s) and recommendations as to the advisability of these independent adoptions to the court as required by law. A copy of the Indiana Adoption Medical History Report is to be given to the adoptive parent(s) by the court.

716.323 Subsequent Reports to the Court Regarding Financial Assistance for Adoption

Families who receive financial assistance relative to their adoptive placement in the form of either a county adoption subsidy (CAS) or federal Adoption Assistance through the Title IVE-Adoption Assistance Program (AAP) are to be sent a reminder to:

- (1) file their annual report with the court regarding continuation of the subsidy, or
- (2) reapply for Adoption Assistance (IVE-AAP) for information on Title IVE-AAP on a biennial basis.

See Section 8 of this manual. The written reminders are to be sent 60 days before the due date of the document.

716.4 Assisting the Family with Post-Legal Adoption Services

The county office (COFC) in which the family resides must assist the family in securing post-legal adoption services. The services include, but are not limited to the following:

- (1) Referring the family to an adoptive parent/self-help support group or providing assistance in organizing an adoptive parent/self-help support group if one is not available in close proximity to the adoptive family. See Appendix YY "How to Effectively Organize Adoptive Parent Support Groups" and Appendix ZZ "Guidelines for Developing a Successful Ongoing Support Group" in this section.
- (2) Assisting adoptive families in identifying counseling and psychological resources in the community sensitive to and knowledgeable regarding the issues surrounding adoption.
- (3) Assisting in arranging for respite care.
- (4) Conducting informational and training sessions on effectively parenting children with special needs.
- (5) Putting the adoptive family in touch with an adoptive parent buddy system and providing technical assistance and support in organizing and implementing an adoptive parent buddy system if one is not in close proximity to the family.

717 Adoption Disruption

Disruption is a term used to describe the interruption of an adoptive placement that occurs after the placement of the child and before the legal finalization of the adoption. Disruption often follows a predictable pattern and may occur because of one or more of the following circumstances:

- (1) Unidentified factors or critical information existed that was not recognized earlier by the case manager or the family.
- (2) The family and child(ren) were unable to make the appropriate adoptive attachment.
- (3) Emergency or unpredictable circumstances existed which precluded the normal progress of the adoption.
- (4) The family and child needed additional support and preparation for the adoption process.

According to the Institute for Human Services (4/6/98), the following are the Steps of Escalation Leading to Adoption Disruption:

- (1) **The Honeymoon:** Adoptive families typically experience pleasure and excitement at the onset of the adoption (Pinderhughes and Rosenberg 1990). They are positive and hopeful about the family's future. The child may be attempting to adjust to the adoption by being compliant, responsible, or withdrawn, and displays few or no behavior problems. The parents are able to manage the child's behavior. This phase may last several months or, in some cases, years, with no major crisis experienced by the family.
- (2) **Diminishing Pleasures:** The adoptive parents begin to feel tension in their interactions with the child. They have difficulty tolerating the child's misbehavior. What may have been "cute" during the honeymoon is irritating now. However, the parents are still hopeful that this is "just a phase"

and that it will eventually pass, returning the family to the level of comfort they felt during the Honeymoon Phase. During this stage, the case manager should be alert to indicators that the family is becoming disappointed in the child. Case managers should listen carefully to the adoptive parents' reports of family adjustment. During this phase, adoptive parents often are unable to face their emerging doubts, and either consciously or unconsciously attempt to "cover up" disappointments or minor problems. They may, for example, talk about the child in unrealistically positive, "glowing" terms. If the case manager can help the adoptive parents identify their issues and concerns and help the adoptive parents resolve them, then there is a good chance that the problems will not escalate further. Early intervention is critical.

- (3) **The Adopted Child is Seen as the Problem:** Despite their best efforts, the parents are unable to tolerate the child's behaviors. Every tantrum, angry word, or misbehavior upsets the parents. The child senses the parents' tension. This raises the child's anxiety, and the child's negative behavior and emotional withdrawal increase. The parents interpret this as a rejection of them by the child, and they may overreact to minor infractions. Further escalation can be prevented if the caseworker can provide counseling services, or can refer the family to a therapist skilled in adoption issues. The parents need to learn to realistically interpret the misbehavior and understand the child's emotional turmoil; learn to approach this as a family problem, and not identify the child as "the problem". Adoptive parents need guidance to develop behavioral management strategies to stop the misbehavior.
- (4) **Going Public:** Eventually, the child's behavior impacts the family's public life. The child may experience school problems, or extended family and friends may witness behavioral outbursts. Prior to this time, the family has likely dealt with the struggle privately. Now the parents turn to others for support and sympathy, and they often air a long list of complaints. Other people may offer advice, may concur with the parents' assessment that the child is the problem, or may unintentionally support the parents' subconscious (or conscious) intent to disrupt. While the adoption, at this point, is quite tenuous, appropriate services and interventions can still help families re-establish stability and avoid disruption.
- (5) **The Turning Point:** The family continues to deteriorate. The child is involved in a "critical incident" which was long expected and dreaded by the parents. The child may act out sexually, steal, assault a family member, or provoke the parent to lose control. In the family's perception, the child has "crossed the line", and there is no hope of reconciliation. The family begins to fantasize about life without the child.
- (6) **The Deadline or Ultimatum:** The adoptive parents establish a deadline by which the situation must drastically improve, or the child must leave. Frequently, these demands are unrealistic, such as demanding that a child earn all "A's" on a report card after the child has earned failing grades during most of the school year. In doing so, the parent, either consciously or unconsciously sets the child up to fail. This, in the parents' minds, justifies the disruption.
- (7) **The Final Crisis:** The final crisis erupts within the family. It may occur because the child did not live up to the parents' ultimatum, or a small incident has become the "straw that broke the camel's back". The entire family is in turmoil. Outside interventions generally prove futile.
- (8) **The Decision to Disrupt:** The "final crisis" results in the decision to displace the child permanently from the family. In most cases, the family requests (or demands) the child's immediate removal. However, this may also be initiated by the child, a therapist, or social worker. The worker must act quickly to secure an appropriate placement for the child and must help the child and family members manage the trauma of separation.

- (9) The Aftermath: Once the child is removed, it would appear that the crisis is over. Yet all parties are typically experiencing considerable pain. The child often feels angry, hurt, and rejected. The parents, who generally appear angry, may also be experiencing guilt, feelings of loss, and an overwhelming sense of failure. The social worker may also feel guilty and may believe the disruption was his or her fault. Or the worker may be angry with the family. Unfortunately, this pain and anger may be denied or avoided (Partridge et. al. 1986). The worker may not want to be in contact with the turmoil. The family often does not reach out for help because of shame and embarrassment. The child's new caregivers or social worker may not want to broach the topic of the disruption for fear of upsetting the child. Consequently, all must generally cope with the trauma of disruption without support.

When an adoptive placement disrupts, it is recommended that the family case manager seek support and assistance from the regional SNAP team in assessing what the child's case plan goal and services need to be.

718 Adoption Displacement

“Adoption displacement” is the term used to describe a situation in which a child whose adoption has been finalized is placed outside of the child's adoptive family home. Consult your county attorney in these situations as services will need to be provided to the child and family for reunification.

719 Adoption Dissolution

“Adoption dissolution” is the term used when a request is made for a finalized adoption to be set aside in a court of law. Consult your county attorney in these situations.

720 Adoption Records

It is extremely important when working in the field of adoption to maintain an excellent record-keeping system. This is especially so in view of laws that permit and promote the possibility of birth parents, adoptees and pre-adoptive siblings locating each other.

720.1 Case Records

The COFC must maintain adoption case records indefinitely on each child for whom adoption services are provided and on each adoptive applicant from the time of application for service through adoption finalization or termination of agency service. The adoption record is to include:

- (1) the child's social history, including the child's placement history and identifying information about the child's birth family;
- (2) the petition for adoption;
- (3) the court summary for adoption;
- (4) the adoptive family preparation;
- (5) any medical/psychological reports from consultants or other persons;
- (6) the Indiana Adoption Medical History Report;
- (7) the date of the adoptive placement;

- (8) reports of placement and supervision;
- (9) the record of information given to the adoptive parents about the child and the child's family; and
- (10) all legal and other documents; i.e., the adoption decree, birth certificate, social security cards, etc.

720.2 Confidentiality

All papers, records and information pertaining to an adoption, whether part of:

- (1) the permanent record of the court;
- (2) a file in the State Department of Health, Division of Vital Records;
- (3) a file in Central Office or a county office of family and children (COFC);
- (4) a file in any licensed child placing agency, or
- (5) a file maintained by any health care provider as defined in IC 31-9-2-52,

are confidential and may be disclosed only in accordance with IC 31-19-19 (Confidentiality Requirements for Adoption History and Other Adoption Records) and IC 31-19-25 (Release of Identifying Information for Adoptions...; Requests for Information Concerning Pre-Adoptive Siblings).

720.3 Indiana Adoption History Program

On July 1, 1988, legislation creating the Indiana Adoption History Program became effective. See Appendix AAA for a copy of the flyer entitled "Indiana Adoption History Program". The forms used to implement this program can be found in the appendix to this section as well. Medical history reports filed with the State Registrar had been available to provide medical information for adoptees since 1986. Public Law (PL) 171-1988 established guidelines under which confidential files and records may now be opened to release not only medical information but also non-identifying or identifying information relative to the parties of an adoption. Information under this program is confidential as described under subsection 720.3. The Indiana State Department of Health (ISDH) administers the Indiana Adoption History Program through the State Registrar of Vital Records.

720.31 Types of Information Available for Release

The following is an enumeration of the types of information that can be released if those persons eligible to receive it follow the appropriate procedures:

720.311 Medical History

Medical history is a comprehensive medical report of the adoptee and the adoptee's birth parents for all adoptions finalized after 6/30/93, as described in IC 31-19-17-4. The Medical History Report includes:

- (1) neonatal, psychological, physiological, and medical care history on forms prescribed by the State Registrar (A copy of this report shall be sent to the person identified as the State Registrar and to the adoptive parent.); and
- (2) any medical information voluntarily transmitted to the Registrar.

720.312 Non-Identifying Information

In accordance with IC 31-19-23-1, non-identifying information can be released by:

- (1) the state registrar;
- (2) the division of family and children;
- (3) a county office of family and children;
- (4) a licensed child placing agency;
- (5) a professional health care provider as defined in IC 34-6-2-117;
- (6) the attorney who arranged the adoption; and
- (7) a court.

Non-identifying information includes:

- (1) any information not including medical history that concerns an “interested party” to an adoption as defined in subsection 720.321; and
- (2) any information which does not identify a birth parent, an adoptive parent or an adoptee.

Non-identifying information may include, but is not limited to general biographical sketches regarding the following:

- (1) Birth/biological parent(s)
- (2) Grandparent(s), if known
- (3) Sibling(s), if applicable

These sketches could include the following, but are not limited to:

- (1) color of eyes and hair, complexion, body stature, personality, educational achievements, religious affiliation, nationality/ethnicity, occupation, avocation, talents, likes and

dislikes, fears, favorite hobbies or sports, favorite table games, colors, etc.;

- (2) general location of where the birth parents were born; i. e., the quadrant of Indiana or other state (North, South, East, West);
- (3) number, sex and age of siblings, at placement, if applicable;
- (4) status of sibling(s), if known:
 - (a) living, deceased, married, single, divorced, established family member with children, etc.;
 - (b) adoptive status of sibling(s) and, if adopted, whether they were placed together with a single person or family.

The COFC or licensed child placing agency is to use discretion in the amount of non-identifying information released to *qualified persons, as defined in IC 31-18-19-2(a) when such a step could lead to the identification of persons associated with the adoption. The attorney for the COFC is to be consulted for assistance in making decisions concerning whether certain information should be released.

720.313 Identifying Information

In accordance with IC 31-9-2-54, identifying information includes:

- (1) any name or address that a party to an adoption has used or is using;
- (2) the original birth certificate;
- (3) any other information, except the medical history, that may identify a person as a party to an adoption or as a birth parent, adoptive parent or an adoptee.

720.32 Persons Who Can File the Adoption History Registration Form or Receive Information

The following delineates what persons are qualified to transfer information to or receive information from the Adoption History Registry:

720.321 Medical Information

Any person may voluntarily transmit medical information to the State Registrar for inclusion in the Medical History. The transmission of such information must be submitted on State Form 13342/State Department of Health 06-074 Indiana Adoption Medical History Registry which includes an affirmation by the person completing the form that the information is true or the person believes it is true. A copy of ISDH 06-074 and a copy of the confidential form containing the aforementioned affirmation may be found in Appendices BBB and CCC respectively in this section. These forms are available

* See Glossary for definition of term.

from the Forms Distribution Center and can be ordered in the usual manner. See Appendix DDD “Medical History Definitions/Examples” for additional information regarding completing the Medical History Report. See Appendix EEE for a copy of SF 47261 Medical Information for Adopted Persons flyer.

The State Registrar shall release a copy of the Medical History to an interested person, which is defined as:

- (1) an adoptee,
- (2) a birth parent,
- (3) an adoptive parent,
- (4) a relative of a birth parent,
- (5) a relative of an adoptive parent,
- (6) the DFC or the COFC,
- (7) an adoption agency (a licensed child placing agency), or
- (8) a court.

In addition, the State Registrar may release a copy of the Indiana Medical History Report to any person who satisfies the Registrar that the person has a legitimate need for the information. Any category of information not prescribed by the Indiana Medical History Report shall not be released under IC 31-19-19-4.

720.322 Non-identifying and Identifying Information

In accordance with IC 31-19-18-2, non-identifying and identifying information may be received or transmitted for inclusion with the adoption history by the following persons:

- (1) An adoptee who is an adult (age 21) or over; or if the adoptee is deceased, the adoptee’s spouse or relative (parent, children, brother, or sister), providing this relationship existed at the time of the adoptee’s death.
- (2) A birth parent; or, if the birth parent is deceased, the birth parent’s spouse or relative (parent, children, brother, or sister) providing this relationship existed at the time of the birth parent’s death.
- (3) An adoptive parent.
- (4) A pre-adoptive sibling

720.33 Registering on the Adoption History Registry

These registration forms must be filed with the State Registrar of Vital Records (Indiana Adoption History Registry), the state or county office of family and children, child placing agencies, health care providers or courts. However, COFCs are encouraged to instruct applicant(s) to forward the forms and other required identification, documentation and changes directly to the State Registrar of Vital Records.

Different forms are used to register to receive medical, non-identifying and identifying information as follows:

720.331 Filing for the Release of Non-Identifying Information:

The pink “Non-identifying Information: Adoption History Registration Form” is used to file for the release of non-identifying information. See subsection 720.312 for the definition of non-identifying information. A copy of this form is in Appendix FFF to this section.

720.332 Filing for the Release of Identifying Information:

The blue “Identifying Information: Adoption History Registration Form” is used to file written consents for or restrictions on the release of identifying information relating to any adoption. See subsection 720.313 for the definition of identifying information. See Appendix GGG for a copy of the form.

720.333 Completing the Indiana Adoption History Registration Form

Either Adoption History Registration Form may be filed by mail or in person. The forms submitted must be originals with original written signatures. The form must be typed or printed clearly using black ink only. In addition, the following is required:

- (1) Personal Identification: Original photo/signature identification is required if a form is filed personally. If a form is mailed in, a copy of photo/signature identification is required. A driver's license, State identification, Social Security card with original signatures or any legal identification containing the applicant's original signature is acceptable.
- (2) Documentation of relationship to adoptee: This may be required. A birth certificate, affidavit, court adoption records, a notarized statement from the agency handling the adoption or baptismal records serves the purpose.
- (3) An affirmation of truthfulness: The person submitting the form must affirm that the information transmitted is true or that the person believes it to be true and that the person is a person described under subsection 720.32.

Original forms presented for filing to agencies other than the Indiana Adoption History Registry located at the Indiana State Department of Health (ISDH) are to be photocopied by the receiving agency. The

photocopies must be indexed and stored for future reference, and the original document and a photocopy of the personal identification item(s) used are immediately forwarded to the Indiana Adoption History Registry, Section B499; 2 North Meridian Street; Indianapolis, IN 46204. The COFC must keep a photocopy of the personal identification as well.

No person or agency can accept a photocopy of a completed Adoption History Registration Form unless the original document has been initially filed with and the copies have been made by and received from the Indiana Adoption History Registry. Copies will be sent to specific agencies when this action is requested by the person filing with the Registry, and these documents will be certified by the State Registrar of Vital Records.

720.34 Entities Required to Release Adoption History

The following is an enumeration of the persons/agencies required to release adoption history information to persons qualified to receive it:

720.341 Non-Identifying Information

In accordance with IC 31-19-23-1, the following entities are required to release non-identifying information that relates to any adoption to any of the persons listed in 720.32 upon request:

- (1) State Registrar
- (2) DFC Central Office
- (3) County office of family and children
- (4) Licensed child placing agency
- (5) A professional health care provider
- (6) The attorney who arranged the adoption
- (7) A court

720.342 Identifying Information

In accordance with IC 31-19-22-2, the following entities are required to release identifying information:

- (1) State Registrar
- (2) DFC Central Office
- (3) County office of family and children
- (4) Licensed child placing agency
- (5) A professional health care provider

(6) A court

Only individuals qualified to receive the information can receive it, and these persons must request it themselves. See subsection 720.32. The release of identifying information requires the consent of both the adult adoptee and the birth parent. An exception to this requirement is made if an affidavit is provided to the agency releasing information stating that the adult adoptee or both birth parents are deceased.

The initial release of adoption history identifying information relating to any adoption by any person or agency requires the written authorization of the State Registrar of Vital Records. This authorization will be mailed from the Indiana State Department of Health using the U.S. Postal Service.

720.35 Adding to/Modifying Filed Forms

See subsection 720.32 for an enumeration of persons who can file additional information or modify information already filed.

720.351 Medical History Forms

Any person can add or modify medical information. See subsection 720.321 for details regarding this process.

720.352 Non-identifying/Identifying Information

It is the responsibility of the person completing the Indiana Adoption History Registration Form to advise the receiving agency of any future changes to the information filed. This includes changes to the filer's address and telephone number and the desired modifications to the consents or restrictions selected. The request to add to or modify the information must be made in writing. The COFC is to instruct the person providing the changes to mail them directly to the Indiana State Department of Health (ISDH), Indiana Adoption History Registry; 2 North Meridian Street; Indianapolis, IN 46204. The COFC must keep a photocopy of the changes. IC 31-19-18-2 also authorizes the State Registrar to accept and file additional information for qualified persons.

720.36 Costs

No fee can be charged for the filing of Indiana Adoption History Registry forms. The only cost that can be required is a reasonable fee made by a child placing agency or health care provider for the actual expenses incurred in the preparation of information to be released when this action is authorized. COFCs cannot charge a fee for the filing of these forms.

Questions relating to the administration of the Indiana Adoption History Program shall be directed to the Adoption History Program Coordinator [(317) 233-7253], at the Indiana State Department of Health.

720.37 Penalties for Transmitting False Information or Disclosing Confidential Information Under the Adoption History Program

IC 31-19-18-7 and IC 31-19-19-5 state that:

- (1) any person who knowingly transmits false information to an adoption history;
or
- (2) an employer or any person who administers adoption records, who recklessly, knowingly, or intentionally discloses or permits an employee to disclose any confidential information relating to an adoption

commits a class A misdemeanor. Any public employee who knowingly transmits false information or discloses any confidential information relating to an adoption is subject to discharge under IC 31-19-19-5.

720.4 Procedures for Obtaining Adoption History Information Not Available from the State Registrar

In accordance with IC 31-19-22-7, an adoptee or a birth parent who submits a written consent for release of identifying information may request the attorney, child placing agency (LCPA) or county office of family and children (COFC) to contact the adoptee or birth parent whose consent is necessary before identifying information can be released. Also, any interested person, as defined in 720.321 above, who has a need to obtain medical non-identifying or identifying information not contained in the Adoption History Registry information through the State Registrar and not forthcoming from the sources noted above may file a petition with any court with probate jurisdiction in Indiana for the desired information. The petition must contain, to the best of the petitioner's knowledge, the following:

- (1) The full name and address of the petitioner.
- (2) The adoptee's full name, sex, date of birth and if known, the place of birth and the nature of the medical information being sought; current address, county of adoption proceeding, name and address of the agency that placed the adoptee; the full name and current address of the adopting parents, if any; date of adoption proceedings, full name and current address of the birth parent.
- (3) An affirmation:
 - (a) by an attending physician, if medical information is sought, that indicates:
 - (i) the nature of the illness;
 - (ii) the belief that the illness is hereditary or congenital; or
 - (iii) the necessity for obtaining/sharing the information for the diagnosis or treatment of any person; or
 - (b) by the petitioner, if medical, non-identifying or identifying information is sought, as to why the release of the information may be beneficial to the welfare of the adoptee or birth parent; and
 - (c) that the information sought is not available through the State Registrar.

- (4) A statement by the petitioner agreeing to pay a reasonable fee for the services of a confidential intermediary, if one is appointed, and reasonable fees and actual expenses of an attorney, child placing agency or health care professional requested to search records and release information.
- (5) A description of the information sought. (IC 31-19-24-1)

Upon the filing of such a petition, the court shall establish that the State Registrar has been served with notice of the petitioner's request for disclosure of information and has been afforded opportunity to respond to the petitioner. (IC 31-19-24-2)

720.41 Confidential Intermediary

If the above requirements have been met, the court may appoint a confidential intermediary after consultation with the State Registrar or the State Registrar's designee. The court shall provide the confidential intermediary with an order authorizing a search of all necessary records maintained by:

- (1) the Division of Public Health Statistics;
- (2) the Central Office or the county offices of family and children;
- (3) any licensed child placing agency; or
- (4) any health care provider as defined in IC 34-6-2-117.

The confidential intermediary shall be instructed by the court to act as quickly as possible. The confidential intermediary shall:

- (1) make complete and reasonable efforts to locate the information specified in the order;
- (2) attempt to locate any person specified in the order to obtain the information;
- (3) adhere to any limitations set by the court to prevent the search from causing harm to a birth parent or adoptee;
- (4) inform the person contacted of the medical or other need; and
- (5) obtain the needed information.

All communications under this procedure are confidential and shall be made by a personal contact by the confidential intermediary. Any person contacted by the confidential intermediary may file, through the confidential intermediary, a consent or non-consent to disclosure of the medical information sought. In the event of a non-consent, the confidential intermediary shall report to the court the reason given, if any, for non-consent. If a person does not agree to release the information through the confidential intermediary, the court may order the release of the information after considering information as to the person's refusal to release the information.

If information is released to the confidential intermediary, the information shall be filed with the court in a manner that protects the identity and location of the person releasing the information and the confidentiality of the information obtained. The court is then required to review the information and may order its release to the petitioner to the extent that the court considers just based upon a medical emergency or good cause shown.

If an imminent threat of death or serious bodily injury exists, the court may conduct the above proceedings without written pleadings. Any confidential intermediary discharging responsibilities in good faith as outlined above is immune from any liability, civil or criminal, that might result. (IC 31-19-24-12)

720.42 Hearings

All hearings held in these proceedings shall be held in closed court without admittance of any person other than:

- (1) essential court officers;
- (2) the parties to the hearing;
- (3) witnesses;
- (4) counsel;
- (5) persons who have not previously consented to the adoption but who are required to consent; and
- (6) representatives of the agencies present to perform their official duties.

720.5 Procedures Regarding Identifying Information for Adoptions Filed After December 31, 1993

For persons adopted after December 31, 1993, the process for obtaining identifying information is different from that for persons adopted prior to that date as outlined below:

720.51 Release of Identifying Information

When a person who was adopted after December 31, 1993, becomes at least 21 years of age, the adoptee may request identifying information by submitting a written request to the State Registrar. The following are to release identifying information upon receiving the written request:

- (1) The State Registrar
- (2) The Division of Family and Children
- (3) The county office of family and children
- (4) A licensed child placing agency

- (5) A professional health care provider
- (6) The attorney who arranged the adoption
- (7) A court

An adoptee's birth parent may restrict access to identifying information concerning the birth parent by filing a written non-release form with the State Registrar. The non-release form remains in effect during the period indicated by the person submitting the form. The form is renewable and may be withdrawn at any time by the person who submitted the form. (IC 31-19-25-3)

720.52 Requests for Information Concerning Pre-adoptive Siblings

When a person who was adopted after December 31, 1993, becomes at least 21 years of age, or when a pre-adoptive sibling of such an adoptee becomes at least 21 years of age, either person may submit a written request to the State Registrar:

- (1) stating an interest in being reunited with any pre-adoptive siblings; and
- (2) authorizing the State Registrar to release the name and present location of the person submitting the request to any pre-adoptive siblings who make similar inquiries. (IC 31-19-25-6)

If the State Registrar determines that a pre-adoptive sibling and an adoptee have made similar requests to release identifying information, then the State Registrar shall release the pre-adoptive sibling's name and present location to each requesting person. (IC 31-19-25-7)

A request for information may be withdrawn in writing at any time. (IC 31-19-25-10)

720.53 Requests by Adoptive Parents for Information Concerning Pre-adoptive Siblings

The adoptive parents of a person who was adopted after December 31, 1993, and who is less than 21 years of age may submit a written request for information concerning the identity and present location of any pre-adoptive siblings of the adoptee. If a mutual inquiry has been made, the State Registrar may release the name of any pre-adoptive sibling and the current location to any adoptive parent(s). (IC 31-19-25-9) A request for information may be withdrawn in writing at any time. (IC 31-19-25-10)

721 Adoption Fees

The information below delineates what fees, if any, may be assessed relative to the placement of children on an adoptive basis.

721.1 Legal Base

IC 12-19-1-14 authorizes the COFC to charge a placement fee and an adoption family preparation assessment fee.

721.2 Adoption Fee Plan

Before adoption fees can be charged for adoption services by a COFC, an Adoption Fee Plan (AFP) must be on file in and approved by the Central Office. It is strongly recommended that a regional AFP be established and adopted by each COFC within the region.

In an effort to bring uniformity on a statewide basis to the AFP process, a format for developing policies and procedures for an AFP has been developed. See Appendix HHH “Format for Developing Policies and Procedures for an Adoption Fee Plan” in this section. Each region/COFC is to follow this format in developing/revising the AFP and is to submit it to Central Office for approval.

721.3 Adoption Family Preparation Assessment Fee

A family preparation assessment fee shall not be charged to families adopting children with special needs as defined in subsection 707.1. The adoption family preparation assessment fee for applicants seeking children who have no special needs may not exceed the time and travel costs incurred by the COFC in completing the assessment. This fee may be charged whether or not the home is approved for adoptive placement and whether or not a placement is made.

721.4 Adoption Placement Fee

No fee may be charged for the adoptive placement of children with special needs. The placement fee for children with no special needs may not exceed the actual costs incurred by the COFC for medical expenses of children and mothers. It may not include medical expenses paid by Medicaid or by any other source, nor may it include foster care costs. This fee may be charged only if a placement is made.

721.5 Amount and Use of Adoption Family Preparation Assessment and Placement Fees

The following information constitutes the fee schedule for non-special needs adoption services established by Central Office.

Adoption Services Fee Schedule
For Non-Special Needs Adoption

	Adoption Category	Adoption Services	Minimum Fee
1.	Stepparent	Investigative Court Report	\$100.00
2.	Independent	Post-Placement Investigative Court Report	\$200.00
3.	Agency	Family Preparation Assessment Family Preparation Assessment Update* Post-Placement Investigative Court Report	\$400.00 *\$500.00
4.	Intercountry	Family Preparation Assessment Family Preparation Assessment Update* Post-Placement Investigative Court Report	\$500.00 *\$600.00

5.	Interstate	Post Placement Investigative Court Report	\$300.00 *\$400.00
6.	Infant Placement	Family Preparation Assessment Family Preparation Assessment Update* Post-Placement Investigative Court Report	\$500.00 *\$600.00 to actual cost

*An additional \$100.00 will be assessed to complete a family preparation update. Family preparation updates are necessary for families whose original family preparation document is two (2) years old.

This fee schedule is based upon an estimated average of actual cost incurred for specific types of services and represents a minimum charge to families seeking non-special needs adoption services. A COFC may charge more than the amount prescribed in the fee schedule if the actual cost incurred by the COFC exceeds the prescribed amount.

In no case shall a fee be charged if the family/child(ren) is being considered for county adoption subsidy (CAS) or federal Title IV-E Adoption Assistance Program (IVE-AAP) subsidy. Adoption fees for the placement of children with no special needs may be reduced or waived in hardship cases or for other good cause. Such cases include those in which the income of the prospective parent(s) is limited to the extent that the added burden of the full fee would adversely affect the security of the child placed in the home.

The approval of Central Office is required when an adoption fee is reduced or waived. To obtain this approval, submit SF45275/FPP0306 Agreement for Adoption Fee for Placement of Non-Special Needs Children. A copy is located in Appendix III of this section.

Fees are to be deposited in a separate account in the adoption trust clearance fund and are to be used by the COFC for the care of children whose adoption is contemplated and for improvement of adoption services provided by the COFC. (IC 12-19-1-14) Such adoption services may include, but are not limited to, the following:

- (1) Maternity care for mothers considering adoptive placement.
- (2) Adoption training.
- (3) Purchase of training materials for prospective adoptive parents.

721.6 Placement Fee Contracts for Non-Special Needs Children

After the COFC has officially approved the home, the COFC Director shall notify the person(s) in writing of the amount of the fee, when it is due and how it may be payable, as agreed to by the adoptive person(s) and the COFC.

Four (4) copies of the adoption fee contract (SF45275/FPP0306) shall be enclosed for applicant signature(s). The original is given to the applicant, the first copy is filed as part of the adoptive home record, the second copy is forwarded to the COFC accounting personnel. If the fee is to be reduced or waived, the fourth copy is forwarded to the Central Office for review and approval or disapproval.

721.7 Fees in Interagency Placement

Fees for adoption family preparation assessments are to be charged and collected by the COFC completing the family preparation assessment. Adoption placement fees are to be charged and collected by the COFC with legal custody of and financial responsibility for the child to be adopted.

The COFC should have a prior written agreement with the adoptive family regarding the charging and collection of all adoption fees in an interagency placement, including adoptive placements with licensed child placing agencies.

721.8 Fees for Custody Studies

COFCs may not levy fees for conducting custody studies because there is no provision in Indiana law for such a charge. A court, however, may order a fee for a custody study on a case-by-case basis.

721.9 Disbursement of Funds Collected for Custody Studies

In order to disburse funds collected by order of the court for custody studies, the COFC receipts the fee in the Adoption Trust Clearance Fund. Monies in the Adoption Clearance Fund can then be used for any expenses related to adoption.

722 Aid for the Adoption of Hard to Place Children (County Adoption Subsidy)

The following information provides a definition of hard to place children and describes the circumstances under which a county may subsidize an adoption of such a child through the use of county adoption subsidy (CAS) funds.

722.1 Definition and Purpose

Subsidized adoption is a plan by which the COFC provides or continues financial support for a child beyond the legal finalization of an adoption. A county adoption subsidy (CAS) is appropriate for hard to place children who would otherwise remain in substitute care until adulthood. The subsidy is intended to enable these children either to find adoptive homes or to be adopted by their foster parents when appropriate.

722.2 Legal Base

IC 31-19-26 allows approved adoptive families to be provided with financial assistance in the adoption of a legally free, hard to place child. A "hard to place child" is defined in IC 31-9-2-51 as one who is disadvantaged because of:

- (1) ethnic background;
- (2) race;
- (3) color;
- (4) language, physical, mental, or medical disability;
- (5) age; or
- (6) membership in a sibling group which should be placed in the same home.

It should be noted that this definition of a hard to place child is much broader than the definition for a child with special needs used by the Adoption Assistance Program (IVE-AAP). See subsection 707.1 for a definition of a special needs child. The adoption subsidy law uses a broader, more generic definition to accommodate statewide variation in the needs of children and to allow for changes over time. The IVE-AAP definition is more specific to the current reality of children being considered for AAP assistance yet flexible to any future change in need. See Section 8 of this manual for detailed information concerning IVE-AAP funding.

722.3 Types of County Adoption Subsidy Assistance

Adoption subsidy can include a per diem payment, a payment for medical expenses, or both. The adopting family must include a request for an adoption subsidy in their adoption petition, and the court must include an order granting the subsidy in the adoption decree for payment to be implemented.

722.31 Per Diem

Per diem subsidy is determined and ordered by the court for the support of the adoptive child in an amount not to exceed the monthly cost of care if:

- (1) the child had remained in a foster home; and
- (2) federal assistance under 42 U.S.C. 673 is not equal to the total monthly cost of care of the child in a foster home.

722.32 Medical

The court may order medical subsidies to be paid for the medical, surgical, hospital and related expenses due to the physical, mental, emotional or medical needs of the child if:

- (1) the condition or the cause of the condition existed before the adoption petition was filed; and
- (2) payments from insurance or public funds to treat the condition or the cause of the condition are not available to the adoptive child or adoptive parents.

722.33 Indiana Adoption Subsidy Program (IASP)

Refer to Manual Section 8.

722.4 Limitations of Adoption Subsidy

When a petition for adoption has been filed seeking subsidy and the court orders payment of a subsidy, the order must contain the following information:

- (1) Whether a subsidy will be paid for the support of the adoptive child (see subsection 722.31); or for the medical, surgical, hospital and related expenses for the adoptive child (see subsection 722.32); or for both.
- (2) The amount of each subsidy to be paid.

- (3) The condition or cause covered by the subsidy if a subsidy will be paid for the medical, surgical, hospital and related expenses for the adoptive child.
- (4) Any condition for the continued payment of a subsidy other than a requirement set forth in IC 31-19-26.

The COFC responsible for the substitute care of the adoptive child may be ordered to pay either or both of the subsidies (per diem/medical) to the adoptive parents or to the designated payees to the extent that the COFC has funds available to them. The following provisions then apply:

- (1) The subsidies shall continue until the child reaches 18 years of age, becomes emancipated, dies, the child's adoption is terminated, or until further notice of the court, which ever occurs first.
- (2) The court may order a subsidy granted to continue until the adoptive child becomes 21 years of age if the adoptive child files a petition for the order and the court determines that the child is enrolled in a secondary school, college or university, or course of vocational training leading to gainful employment.
- (3) The subsidies shall continue even though the adoptive parents leave the jurisdiction of the court.
- (4) The adoptive parents are required by the court to file a sworn report with the court (with a copy to the COFC making the subsidy payments) at least once each year as to their location and the location and condition of the child.
- (5) The court or the COFC may request confirmation of the veracity of the sworn report from any governmental agency that provides services in the area of Indiana in which the child resides.
- (6) On the basis of the sworn report, the subsidy may be continued, increased, reduced or discontinued by order of the court.
- (7) The subsidies shall not affect the legal status of the child nor the rights and responsibilities of the adoptive parents as provided by law.

722.5 Court Requirements Regarding Adoption Subsidy

See subsection 716.3 for basic information regarding what information needs to be included in the adoption petition and agency report to the court regarding adoption subsidies.

722.51 Court Report

When the petition includes a request for a subsidy, information must be provided in the agency report concerning the reason that this child is considered to meet the legal definition of a "hard to place" child, including the child's specific needs. There is also to be a statement which describes the period that the child has been in foster care and an account of the agency's efforts to recruit an adoptive home in which subsidy would not be needed. If the recommendation of the COFC is in favor of the subsidy being granted, the report should describe the reason for recommending financial aid; what needs it will cover; and comment on any other conditions, such as the recommended duration of continued subsidy, that the COFC believes advisable to make.

722.6 Guidelines for Offering Adoption Subsidy

If it appears that a family would be an appropriate adoptive family for a hard to place child, the agency shall discuss the availability of a subsidy with the family. The total financial circumstances of the family will not be a factor in determining the need for subsidy, the type and amount of aid required, and the period or duration of time needed. According to IC 31-19-8-6, the report may not contain information concerning the financial condition of the parents or a recommendation that a request for a subsidy be denied, in whole or in part, due to the financial condition of the parents. Eligibility should be determined on an individual basis.

NOTE: The subsidy amount agreed upon is to be documented in case log notes in the adoption case.

A subsidy paid for medical, surgical, hospital, and related costs must be due to a physical, mental, emotional or medical condition of the child which existed before the adoption. In assessing the need for and the amount of subsidy, the COFC should assess the following factors:

- (1) Present and future needs of the prospective adopted child.
- (2) Social, recreational, educational and vocational activities and goals for the child.

Expenses to be considered in determining a subsidy may include:

- (1) food, clothing, shelter, including property upkeep, taxes, insurance; education, transportation, unusual medical expenses, dental expenses, personal or special needs for the prospective adoptive child;
- (2) employment expenses, reasonable debts; projected needs, including expenses such as household equipment replacement if the child is destructive; respite care expenditures if the child is emotionally disturbed, destructive, hyperactive, etc.

Resources of the child to be assessed include:

- (1) Adoption Assistance (IV-E AAP) (See section 8 in this manual);
- (2) Social Security Income; and
- (3) other resources.

See Section 8 of this manual.

722.7 Financial Assistance in Interagency Placements

If the child has been under the care of a private, licensed child placing agency (LCPA), due to the biological/legal parents voluntarily relinquishing their parental rights, the child's placement can be considered for subsidy. The child must meet federal Title IVE requirements. See Section 8 in this manual. A conference is to be held between the staff of the COFC and the private agency in order to reach a clear understanding as to the best interests of the child. The criteria for subsidy are the same as those considered for a child who is served directly by the COFC. The private agency and the adopting family must follow all established procedures, and both the COFC and the LCPA must file reports to the court. In those cases in which the COFC has made the foster care and medical care payments and a private, licensed child placing agency

has assumed other responsibility for the child, the COFC must make a written report to the court, including a recommendation with regard to granting a subsidy to the adoptive family. In those cases, the private, licensed child placing agency is responsible for making the written report on all other aspects of the adoption, including the background of the child. Any plan to deviate from this requirement must be approved by the court having adoption jurisdiction.

722.8 Agency Records in Adoption Subsidy Cases

When an adoption with a subsidy ordered by the court is finalized, the wardship or service case(s) should be terminated and sealed, as are all adoption records. Specific procedures that meet the legal requirements for both adoption records and the ongoing legal and financial records for subsidy payments are as follows:

- (1) Close and seal the child's wardship case with all related documents. A cross-reference to the service case of the adoptive parents should be included.
- (2) Close and seal the adoption case. Cross-reference to the child's wardship case and the new adoption subsidy case.
- (3) Prepare a new case folder for the subsidy case using the Ad. S-00-0000 number. Include in the folder:
 - (a) a copy of the adoption petition;
 - (b) a copy of the court summary and the recommendation regarding the subsidy signed by the COFC;
 - (c) a copy of the adoption order indicating the nature of the subsidy;
 - (d) a copy of each annual report to the court (It is recommended that the COFC offer cooperation to the court in establishing a process which will facilitate the orderly filing of the annual sworn reports of the adoptive parents.);
 - (e) all other pertinent financial records; and
 - (f) any other records deemed essential by the court of local jurisdiction.
- (4) Establish an account for the child through the automated county accounting system.
- (5) Make subsidy payments from Account No. 32600.
- (6) Close all records when payments are discontinued.

722.9 Adoption Subsidy vs. Adoption Assistance Program, IV-E AAP

A distinction is to be made between the two (2) resources for providing aid for adoption for hard to place children; i.e., County Adoption Subsidy (CAS) and the Adoption Assistance Program, (IV-E AAP). The major differences between the two are:

- (1) The funding source is different. CAS is funded 100% by county property taxes (although per diem may be reimbursed by Title IV-B monies from Table 1 capped funds), and IVE-AAP is funded by federal, state and county monies.

- (2) Eligibility requirements differ in the two (2) programs.
- (3) IV-E AAP is available regardless of the state of residence of the child and parents. CAS is available to Indiana residents; however, non-residents may petition for subsidy for hard to place children if the child's adoption is finalized in Indiana.

See Section 8 regarding the Adoption Assistance Program.

724.91 Payment of Nonrecurring Adoption Expenses (NRAE)

The federal Title IV-E Adoption Assistance Program (AAP) provides for payment of specified nonrecurring adoption expenses incurred by adoptive parents of children with special needs as defined in 707.1. This service applies to all special needs children, not just to IVE-AAP eligible children. Refer to Section 8 of this manual for further definitions, eligibility requirements and procedures for processing claims. Adoptive families desiring to apply for reimbursement of nonrecurring adoption expenses must have a signed nonrecurring adoption agreement in place before the adoption is finalized in order to be considered for reimbursement.

APPENDIX- SECTION 7

- A. State Form 12582/FPP 1331, Consent to Adoption
- B. State Form 12587/FPP 1331A, Voluntary Relinquishment of Parental Rights
- C. State Form 48998/FPP0003, Notice of Hearing to Terminate the Parent-Child Relationship
- D. State Form 45095/FPP 1337, Notification of Approval of Child Placement
- E. State Form 45094/FPP 1338, Notification of Disapproval of Child Placement
- F. Legal Risk Acknowledgement Agreement
- G. State Form 23142/FPP 1466, Interagency Agreement in Adoption Placement
- H. Child Registration for Internet
- I. State Form 11840/FPP 1440, Child Registration: "My Forever Family" Picture Book
- J. Withdrawing a Child from Internet: Termination of Parental Rights Initiated
- K. State Form 9703/FPP 1443, Change Notice: "My Forever Family" Picture Book
- L. Child Profile
- M. The Adoptive Family Selection Scale
- N. Family Scale
- O. Adoption Agency Survey Listing Form
- P. Adoption Inquiry Form
- Q. Checklist of Acceptable Challenges
- R. Notice to All Applicants for Consideration as Potential Adoptive Parents
- S. Adoptive/Foster Family Inventory
- T. Foster Care/Adoption Information Sheet
- U. The Family Network Diagram Symbols (Genogram and Eco-Map)
- V. The Family Network Diagram Form
- W. Interpretation of the Family Network Diagram
- X. Outline for a Brief Family Network Interview
- Y. The Genogram
- Z. Outline for a Brief Genogram Interview

- AA. Genogram Interpretive Categories
- BB. Instructions for Preparing the Family Eco-Map
- CC. The Eco-Map Diagram Form
- DD. The Eco-Map Symbols
- EE. Interpretation of the Family Eco-Map
- FF. Child Behavior/Child Health Challenges Checklist
- GG. Cover Letter for Personal References (SAMPLE)
- HH. Reference Form
- II. Financial Profile
- JJ. Medical Report for Foster Care/Adoption
- KK. State Form 10100/FPP 0317, Application for Foster Family Home License, or Approved Relative Home

- LL. Consent to Release Information for Foster Family Home License or Adoption
- MM. Voluntary Release for Limited Criminal History Record
- NN. Request for Limited Criminal History Information
- OO. Guide to Strengthening Technical Skills in the Family Preparation Assessment .Process
- PP. Outline for Adoption/Foster Family Preparation Summary and Cover Page
- QQ. Recommendation/Signature Page for: Adoption/Foster Family Preparation Summary
- RR. Family Preparation Updating Information Questionnaire
- SS. Special Needs Challenges
- TT. Notification to Update Adoption Family Preparation Assessment (SAMPLE)
- UU. Social Summary on Child to be Placed
- VV. Contract of Placement: Adoptive Home Agreement
- WW. Family Case Manager Procedure For Adoption Placement
- XX. State Form 9966/SDH 06-073, Indiana Adoption Medical History Report
- YY. How to Effectively Organize Adoptive Parent Support Groups
- ZZ. Guidelines for Developing A Successful Ongoing Support Group

- AAA. SBH IAHP-2/VR 1, Indiana Adoption History Program Flyer
- BBB. State Form 13342/SDH 06-074, Indiana Adoption Medical Voluntary History Report
- CCC. IAMHR 2/VR1, Confidential Form To Be Filed With Adoption Medical Voluntary History Registry
- DDD. SBH Form 13296/SDH06-076, Medical History Definitions/Examples
- EEE. State Form 47261, Medical Information for Adopted Persons Flyer
- FFF. State Form 4789/SDH06-093-33, Non-Identifying Information: Indiana Adoption History Registration (pink)
- GGG. State Form 47896/SDH06-093-34, Identifying Information: Indiana Adoption History Registration (blue)
- HHH. Format for Developing Policies and Procedures for an Adoption Fee Plan (AFP)
- III. State Form 45275 (3-92) / FPP 306, Agreement for Adoption Fee for Placement of Non-Special Needs Children

**Child Registration for Internet
(IC 31-34-21-7.3)**

State Form 50016 (2-01)/FPP 0041

Instructions:

Use for child who is identified as a child in need of services (CHINS) and for whom:

- a court authorizes the filing of a petition to terminate the parent-child relationship; or
- a petition to terminate the parent-child relationship is filed.

Registration number _____
(To be completed by Adoption Initiative office staff)

Name of Child: _____
(Name will not be entered on Internet)

Registration:

1. Is the case plan goal adoption? Yes No
2. Has termination of the parental right for the child been filed? Yes No
3. Age of Child: _____
4. Gender of Child: _____
5. Race of Child: _____
6. Is the child a member of a sibling group? Yes No
7. Is the sibling group to be placed together? Yes No

8. Brief summary of the child’s educational, social, and medical background (include known strengths and needs/disabilities).

9. Reason for removal from the child’s home.

10. Has anyone expressed an interest in adopting this child? Yes No

11. Contact SNAP specialist listed below to express interest in the above-mentioned child _____

12. County location of contact person: _____

13. Telephone number of contact person: _____

NOTE: Revised form should be available for order from the Forms Distribution Center by 04/01/01.

**Child Registration for Internet
(IC 31-34-21-7.3)**

State Form 50016 (2-01)/FPP 0041

Instructions:

Use for child who is identified as a child in need of services (CHINS) and for whom:

- a court authorizes the filing of a petition to terminate the parent-child relationship; or
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Name of Child: _____
(Name will not be entered on Internet)

Registration:

1. Is the case plan goal adoption? Yes No
3. Has termination of the parental right for the child been filed? Yes No
4. Age of Child: _____
5. Gender of Child: _____
5. Race of Child: _____
6. Is the child a member of a sibling group? Yes No
14. Is the sibling group to be placed together? Yes No

15. Brief summary of the child’s educational, social, and medical background (include known strengths and needs/disabilities).

16. Reason for removal from the child’s home.

17. Has anyone expressed an interest in adopting this child? Yes No

18. Contact SNAP specialist listed below to express interest in the above-mentioned child _____

19. County location of contact person: _____

20. Telephone number of contact person: _____

NOTE: Revised form should be available for order from the Forms Distribution Center by 04/01/01.

APPENDIX J

**Withdrawing a Child from Internet:
Termination of Parental Rights Initiated
(IC 31-34-21-7.3)**

State Form 50015 (2-01) / FPP 0042

Name of Family Case Manager: _____ County: _____

Name of SNAP Specialist: _____ Region: _____

Date of Request: _____

Name of Child: _____

Registration number: _____

Has termination of parental rights (TPR) been finalized? Yes No

Reason for withdrawing the child:

Child reunified with parent, guardian, custodian Child in adoptive placement

TPR denied or dismissed Child's permanency plan has changed

Other: _____

NOTE: Revised form should be available for order from Forms Distribution Center by 04/01/01.

AGENCY NAME:

ADDRESS:

PHONE:

GEOGRAPHIC AREA SERVED:

	FEE CHARGED	APPROXIMATE WAITING PERIOD
HOME STUDY ASSESSMENT		
Step-Parent/Relative		
Independent		
Non-Special Needs		
Special Needs		
Foreign		
Foster Parent		
Infant (non-special needs)		
Interstate		
Up-date		
CHILD PLACEMENT		
Special Needs		
Non-Special Needs		
Infant		
Siblings		
Independent		
Foreign		
Interstate		
SUPERVISION OF PLACEMENT		

APPENDIX P

ADOPTION INQUIRY FORM

DATE OF INITIAL INQUIRY _____ TIME

SURNAME
ADOPTIVE APPLICANT _____ BIRTHDATE
ADOPTIVE APPLICANT _____ BIRTHDATE

ADDRESS
Number Street(Apt.) City/State Zip

PHONE (HOME) _____ (WORK)

COUNTY OF RESIDENCE:

OTHERS IN HOME (NUMBER) _____ (AGES) _____ (SEX)
HOW REFERRED TO AGENCY

AREA OF ADOPTION INTEREST

NUMBER _____ SEX _____ AGE _____ RACE

BY: _____ COFC
Name Telephone number

REFERRED TO: _____ Name
Telephone number COFC/Region

COMMENTS:

FOLLOW-UP CONTACT:

___ Phone call/written contact by SNAP on _____ Date

STATUS:
(DATE)

___ Invitation to an orientation/information meeting or individual interview

APPENDIX P

___ Attended information meeting

___ Decision not to apply

___ Canceled scheduled for another time

Date

___ Reason stated

CONTACT PERSON

Name

Telephone Number

Date

FOLLOW UP CONTACT:

DATE _____ PHONE CALL Y or N WRITTEN Y or N

INTAKE ADOPTION PACKET MAILED/HAND DELIVERED ON

APPLICATION GIVEN ON

APPLICATION RETURNED ON

DATE FAMILY PREPARATION BEGUN

DATE FAMILY PREPARATION COMPLETED

DECISION NOT TO APPLY _____ REASON

DATE REFERRED TO SNAP

BY FAMILY CASE MANAGER

Name

Telephone Number

COFC

Date

APPENDIX Q

CHECKLIST OF ACCEPTABLE CHALLENGES

(Indicate Y=yes, N=no, M=maybe)

A. Medical Challenges

1. Hearing Impaired
2. Sight Impaired (not correctable with glasses)
3. Speech Impaired
4. Non-ambulatory physical handicap
5. Diabetes
6. Epilepsy
7. Cerebral Palsy
8. Downs Syndrome
9. Other Diagnosed Medial Condition(s)
10. Terminally Ill
11. AIDS/HIV positive
12. Pregnancy
13. Sickle Cell: Anemia Trait
14. Other Genetic

B. Mental Challenges

Mental Retardation

15. Mild
16. Moderate
17. Severe
18. Learning Disabilities

C. Developmental Challenges

19. Physical
20. Mental
21. Emotional

D. Emotional Challenges

22. Abused/Neglected Child
23. Sexual Acting Out
24. Lying
25. Stealing
26. Bedwetting
27. Nightmares
28. Self-Abusive

E. Physically Aggressive

29. Toward other children
30. Towards adults
31. Toward property
32. Toward animals
33. Truancy
34. Alcoholism

APPENDIX Q

- 35. Drug Abuse
- 36. Running Away
- 37. Firesetting
- 38. Behaviors involved in Satanic worship

F. Other Challenges

- 1. Sibling Group
 - 2-3 Children
 - 4-5 Children
 - 5 or more Children

- 2. Older Children
 - 2-6 years of age (minority)
 - 7-9 years of age (all children)
 - 9-12 years of age (all children)

APPENDIX R

NOTICE TO ALL APPLICANTS FOR CONSIDERATION AS POTENTIAL ADOPTIVE PARENTS

Dear

Your recent inquiry about the Special Needs Adoption Program is the first step in enabling your family to provide a permanent home for a waiting child with special needs.

We know that you have given careful consideration to your decision to contact us, and we are delighted that you want to help us find loving families for Indiana's children who wait for a forever family.

In the weeks and months ahead we will be providing you with all the information we can about adoption and the children with special needs who await placement. Keeping in mind that adoption is a life-long process, we hope that this information will allow **you** to make the final decision as to whether adoption is best for you and your family.

Hopefully, after your family preparation assessment process is completed, you will decide that adoption **is** for you, and we will try to match your family with a child or children. Although our primary responsibility is to the children, we also have an obligation to provide appropriate training and support services to our adoptive families.

Please don't hesitate to contact us when you have concerns or questions. Our goal is to make adoption a rewarding experience for families and children.

Sincerely,

APPENDIX S

ADOPTIVE / FOSTER FAMILY INVENTORY

Please use separate paper to respond to the following. The inventory tool may be completed by the individual applicant or with the assistance of the Family Case Manager/SNAP Specialist. Each applicant should respond individually. Your answers will assist the Family Case Manager/SNAP Specialist in completing your written family preparation assessment, as well as assist you in clarifying your feelings and beliefs about adoption/foster care.

NAME: _____ DATE: _____

FAMILY AND BACKGROUND

- A. Describe your family background.
 - 1. Relationship to your own parents
 - a. Describe the continuing relationship with them.
 - b. Do you visit back and forth?
 - c. What are their feelings regarding your plans to adopt/foster parent?
 - 2. Describe your relationship with brothers and sisters.
 - 3. Was childhood satisfying?
 - a. What kind of memories do you have of your childhood?
 - b. Were there marked deprivations?
 - c. What was your most memorable experience. (Both positive and negative and why.)
 - d. Were you active in any childhood activities? (school, church, scouts, etc.)
 - 4. How were you disciplined as a child and youth (or teenager)?
 - 5. Do you respect your parents for this discipline?
 - 6. What person was most important to you as you were growing up? Who was most influential? Why?
 - 7. Has alcohol or substance abuse ever touched you, your family, or someone close to you?
- B. If you were separated in childhood or youth from one or both parents, why? How do you feel about it now?
- C. How did you see your parent's marriage/relationship?
 - 1. Have you patterned your life after it?
 - 2. Tried to improve? How different?

SELF

- A. Describe your personality.
- B. What are your life goals?
- C. Tell about your hobbies, interests, dislikes, etc.
- D. What do you like best about yourself? What would you like to change?
- E. Has abuse or neglect ever touched your family or someone close to you?

APPENDIX S

- F. Have you ever had professional counseling? If so, how long ago?
- G. How do you resolve differences in your marriage/relationship?
- H. What things do you do for fun as a family/unit?
- I. How much privacy do you require?

CHILDREN

1. If you have children, describe their physical appearance, school performance, personality etc.
2. What types of behavior require parental discipline?
3. Are there any forms of discipline you feel are inappropriate?
4. At this time, what type of child do you feel you can parent?
5. What strengths and background do you feel you have that will enable you to parent this type of child?
6. At this time, what do you think you will expect from your children?
7. At this time, what goals do you want your children to achieve?
8. What is your plan for child care while you are working?
9. In what way do you see adoption or fostering satisfying your needs?
10. How do you plan on explaining the adoption or placement to the child?
11. What attitude or feelings do you anticipate the child having toward the absent birth parents in the future?
12. How could you help the child with these feelings?
13. What response on your part would be harmful?
14. How do you anticipate responding if the child decides to seek out the absent birth family members?
15. How do you want to parent your child that is similar or different to the way you were raised?
16. Have you ever obtained professional counseling? If so, why?
17. Would you hesitate to seek counseling for yourself or your child for discipline or behavior problems that might occur?
18. Who will be other significant people in the child's life?

APPENDIX S

MARRIAGE/SIGNIFICANT OTHER RELATIONSHIP

- A. Tell what your marriage or significant other relationship means to you. Why do you like being married or single?
1. What do you need to get out of marriage or significant other relationship?
 2. Have you found such fulfillment in your marriage/relationship?
 3. What do you contribute to your marriage/relationship?
 4. How would you like your marriage or relationship and life style to be?
 5. What are the respective roles of you and your spouse or significant other in your marriage/relationship?
 6. What are common interests?
 7. What are separate interests?
- B. Describe your spouse or significant other yourself.
1. Strengths
 2. Vulnerabilities
 3. Satisfaction in life. Is spouse/significant other happy with achievements or goals?
- C. How does your spouse or significant other relate to other people?
1. How do you see your spouse or significant other as a parent?
 2. How do you see yourself as a parent?
- D. What do you like most about your spouse or significant other?
1. What bothers you most about this person?
 2. In what ways would you change or have your spouse or significant other be different.
- E. If you were previously married, describe that marriage and the factors in its termination.
1. How is your present marriage different?
 2. Why do you feel that your present marriage is more stable?
- F. If there is a marked age difference between you and your spouse or significant other, what does this mean to your marriage/relationship?
- G. If you have experienced infertility in your marriage, how have you been able to accept this fact? How do you think your spouse has accepted this fact? (applicable to adoption applicants only)
- H. What were the most memorable times during marriage or significant other relationship?
- I. Have you and your spouse ever been separated?

APPENDIX T

FOSTER CARE/ADOPTION INFORMATION SHEET

EXPLANATION:

State and agency standards require that applicants supply some facts about their own background. This information serves as a partial source so that we might furnish the appropriate guidance you will need to decide whether or not you want to become a foster or adoptive parent.

Other opportunities will be made available for you to explore further what foster parenting and adoption is all about and to prepare you for fostering or adopting should you decide to proceed with the family preparation process.

Your right to confidentiality will be duly respected.

Please complete this information sheet and submit to the Family Case Manager/SNAP Specialist. If you need assistance with completing the form, please notify the Family Case Manager/SNAP Specialist.

PLEASE PRINT

PERSONAL DATA

LAST NAME _____ DATE _____ FH

STREET ADDRESS _____ CITY

PHONE: HOME _____ OFFICE

PERSONAL DATA

APPLICANT A

APPLICANT B

Full legal name _____

Birthplace and date _____

Nationality background _____

Complexion, color of eyes and hair _____

Height and body build _____

Serious illness or disabilities _____

Social Security Number _____

EDUCATION

Highest grade completed
and date _____

Last school attended _____

Average grade _____

RELIGION

Church affiliation _____

Pastor's name _____

ORGANIZATION MEMBERSHIP

HOBBIES AND INTERESTS

SCHOOLS AND DISTANCE FROM HOME:

APPLICANTS' FATHERS

Names & ages, if living.
If deceased, give age,
date, and cause of death.

Applicant A's Father

Applicant B's Father

PLACE OF BIRTH

NATIONALITY BACKGROUND

PRINCIPAL OCCUPATION

HEALTH

APPENDIX T

RELIGION _____

ADDRESS _____

EDUCATION _____

APPLICANTS' MOTHERS

Names (maiden) & ages, if living. If deceased, give age, date, and cause of death.

PLACE OF BIRTH _____

NATIONALITY BACKGROUND _____

PRINCIPAL OCCUPATION _____

HEALTH _____

RELIGION _____

ADDRESS _____

EDUCATION _____

BROTHERS AND SISTERS: List names, ages, if living (date and cause of death, if deceased); health, marital status, and number of children.

APPLICANT A

APPLICANT B

(If additional space is needed, please add and attach to this page.)

APPENDIX T

PERSONAL BACKGROUND

Applicant A

Applicant B

Previous marriage or relationship _____

Date: _____

Reason for termination _____

Number of children _____

Name and ages _____

PRESENT MARRIAGE

Date and place

Names, birthdates of children

Number of children deceased

Applicant A

Applicant B

HAVE YOU EVER BEEN ARRESTED FOR/
CONVICTED OF A CRIME? _____

HAVE YOU EVER HAD
PSYCHIATRIC TREATMENT? _____

IF INFERTILE, WHAT IS THE
REASON FOR INFERTILITY? (for adoption applicant only)

APPENDIX T

WHAT MEDICAL STEPS HAVE BEEN TAKEN? (for adoption applicant only)

REASON FOR WANTING A CHILD:

AGE OF CHILD DESIRED: _____ SEX

OTHER REQUIREMENTS:

PHYSICAL DEFECTS, NATIONALITY, RACIAL, OR OTHER FACTORS YOU COULD NOT CONSIDER:

HOW LONG HAVE YOU CONSIDERED ADOPTION/FOSTER CARE?

APPLICABLE TO FOSTER CARE APPLICANTS

(Applicant A) I understand that I must successfully complete twenty (20) preparatory hours before I can have a child placed with me. Yes _____ No

I also understand that I can withdraw from the preparatory program at any time before licensing takes place and that a license will not be granted if I withdraw. Yes _____ No

(Applicant B) I understand that I must successfully complete twenty (20) preparatory hours before I can have a child placed with me. Yes _____ No

I also understand that I can withdraw from the preparatory program at any time before licensing takes place and that a license will not be granted if I withdraw. Yes _____ No

APPENDIX T

NOTE: Please be informed that before DFC can consider granting a license, it will be necessary to:

- a. complete the family preparation process;
- b. have a tuberculosis test;
- c. obtain a written statement from your doctor about your general physical health;
- d. show a record of your marriage license, unless you are a single person;
- e. show a record of your divorce, if you have been married before;
- f. have references on file; and
- g. have a signed Criminal History Affidavit on file.

AGAIN: Explanations and directions will be given to you concerning the above requirements.

(Signed) _____
Applicant A

Date

(Signed) _____
Applicant B

Date

PREFERENCE DATA

Foster Care/Adoption History

Have you ever applied to another child placing agency? If yes, please list ALL agencies to whom you have EVER applied for adoption or foster care. If needed, use additional sheet.

Name of Agency	Address	Date Applied	Was a family preparation assessment done?	Check those agencies where you have currently applied.	Check those agencies where you currently have a family preparation completed.
----------------	---------	--------------	---	--	---

PLACEMENT PREFERENCE

Please put an "X" on any category you would definitely consider. Please put an "*" on those you might consider but would like to discuss further.

Male ___ Female ___ No Preference ___ Twins ___ Siblings

AGE OF CHILD:

Infant to 3 months ___ 3 to 6 months ___ 6 to 12 months ___ 1 to 3 years

3 to 6 years ___ 6 to 10 years ___ 10 to 14 years ___ 14 and over

NATIONAL DESCENT: (Adoption and Foster Care Analysis and Reporting System (AFCARS) Categories)

Prior to 10/1/99: American Indian/Alaskan Native ___ Asian/Pacific Islander ___ Black ___ White ___

Beginning 10/1/99: American Indian or Alaskan Native ___ Asian ___ Black or African American ___ Native Hawaiian or Other Pacific Islander ___ White ___ Hispanic or Latino Origin ___

MEDICAL CONDITION:

Prematurity ___ Developmental disabilities ___ Diabetes ___ Hearing disorders

Facial disorders ___ Birthmarks ___ Seizure disorder ___ Vision impairment

Speech problem ___ Illness or diseases ___ Mental/or emotional challenges

Behavioral challenges ___ Sexually abused ___ Physically abused ___ Emotionally challenged

Intellectually challenged ___ Genetic/hereditary conditions ___ Learning disabled

APPENDIX T

(For adoptive applicants only)

YOUR FUTURE ADOPTIVE CHILD

(Please Print)

1. When do you plan to tell him he is adopted? How would you approach this subject?
2. What would be the affect on your adopted child if you have a birth/biological child?
3. How do you plan to discipline the child?
4. What are your educational goals for the child?
5. What will you do if the child does not achieve this goal?
6. What will you do if a physical or mental handicap develops?
7. What is your plan for religious training?
8. Have you given care to children in your home? _____ What fulfillment did you receive and if problems developed, what were they?
9. What are your feelings toward an out-of-wedlock child?
10. Why do you want to adopt a child?

Interpretation of the Family Network Diagram

1. What is the family structure?
2. Which members of the family network have been involved in the adoption preparation process?
3. Who will need to be prepared for the adoption?

THE GENOGRAM

Symbols

Symbols for the genogram are the same as those introduced with the family network diagram. They are used to depict the development of a family over time.

In addition to the multigenerational diagram of the family, genograms are used to record the following information:

- 1) Family interaction patterns. For example, were the family members very close or distant? Were there conflicts or estrangements; i.e., family members cut off from each other?
- 2) Medical history
- 3) Other family information of special importance may also be noted on the genogram:
 - a) Ethnic background and migration date
 - b) Religions or religious change
 - c) Education
 - d) Occupation or unemployment
 - e) Military service
 - f) Retirement
 - g) Trouble with law
 - h) Physical abuse or incest
 - i) Obesity
 - j) Alcohol or drug abuse
 - k) Smoking
 - l) Dates when family members left home: in '74
 - m) Current location of family members

APPENDIX Z

Outline for a Brief Genogram Interview

Family Members

Names? Dates of birth? Occupations? Dates of marriage? Previous marriages? If so, give names of spouses, and names and sex of children with each spouse. Include all miscarriages, stillbirths, adopted and foster children. Include dates of marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members. Who lives in the household now?

Family of Origin

Mother's name? Father's name? They were which of how many children? Give names and sex of each sibling. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of the parents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members. Who lived in the household when they were growing up?

Mother's Family

The names of the mother's parents? The mother was which of how many children? Give names and sex of each of her siblings. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of grandparents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members.

Father's Family

The names of the father's parents? The father was which of how many children? Give names and sex of each of his siblings. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of grandparents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members.

Ethnicity

Give ethnic/religious background of family members and the language they spoke if not English.

Major Moves

Tell about major family moves and migrations.

Significant Others

Add others who lived with or were important to the family.

APPENDIX Z

Outline for a Brief Genogram Interview (continued)

For all those listed, indicate any of the following:

serious medical, behavioral or emotional problems
job problems

drug or alcohol problems
serious problems with the law

For all those listed, indicate any who were:

especially close
distant or in conflict
estranged, cut off from each other
overly dependent on each other

Adapted from *Genograms in Family Assessment* by Monica McGoldrick and Randy Gerson, New York: W.W. Norton and Company, 1985.

APPENDIX Z

Outline for a Brief Genogram Interview

Family Members

Names? Dates of birth? Occupations? Dates of marriage? Previous marriages? If so, give names of spouses, and names and sex of children with each spouse. Include all miscarriages, stillbirths, adopted and foster children. Include dates of marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members. Who lives in the household now?

Family of Origin

Mother's name? Father's name? They were which of how many children? Give names and sex of each sibling. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of the parents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members. Who lived in the household when they were growing up?

Mother's Family

The names of the mother's parents? The mother was which of how many children? Give names and sex of each of her siblings. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of grandparents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members.

Father's Family

The names of the father's parents? The father was which of how many children? Give names and sex of each of his siblings. Include all miscarriages, stillbirths, adoptive and foster siblings. Include dates of grandparents' marriages, separations, and divorces. Also include birth and death dates, cause of death, occupations and education of the above family members.

Ethnicity

Give ethnic/religious background of family members and the language they spoke if not English.

Major Moves

Tell about major family moves and migrations.

Significant Others

Add others who lived with or were important to the family.

APPENDIX Z

Outline for a Brief Genogram Interview (continued)

For all those listed, indicate any of the following:

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job problems

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serious problems with the law

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especially close
distant or in conflict
estranged, cut off from each other
overly dependent on each other

Adapted from *Genograms in Family Assessment* by Monica McGoldrick and Randy Gerson, New York: W.W. Norton and Company, 1985.

Interpretation of the Family Eco-Map

1. What resources are available to this family to support the adoption of a special needs child?
2. What resources are lacking that would need to be in place to support the adoption of a special needs child?
3. Has the family demonstrated strengths in dealing with larger external systems?
4. What is the nature of the boundaries around this family?

Name

Date

CHILD BEHAVIOR CHALLENGES CHECKLIST

Please indicate by using an X, after thoughtful consideration, your level of acceptance of the following behavior challenges. This information is used to help us in selecting the child most suited to your family. There are no right or wrong answers. Please mark each item.

In addition, please put a check mark by each item you have experienced in dealing with children.

		Most <u>Acceptable</u>	Willing <u>To Discuss</u>	Least <u>Acceptable</u>	Not <u>Acceptable</u>
<u>PHYSICAL BEHAVIORS</u>					
Temper tantrums	___				
Aggression					
fighting		___	___	___	
hitting/kicking		___	___	___	
biting		___	___	___	
Self-destructive or self abusive acts					
head banging		___	___	___	
pulls hair	___				
pinches self		___	___	___	
Destructive					
to own things		___	___	___	
to others' things		___	___	___	
to animals		___	___	___	
Stealing					
at home		___	___	___	
at school	___				
in neighborhood		___	___	___	
Hyperactive					
mild		___	___	___	
needs medication	___				
Short attention span	___				
Nervous - fidgeting	___				
<u>VERBAL BEHAVIORS</u>					
Lying					
occasionally		___	___	___	
frequently	___				
Use of profane language		___	___	___	
Talking back		___	___	___	
Bossiness	___				
Whining	___				
occasionally		___	___	___	
frequently	___				
Crying					
occasionally		___	___	___	
frequently	___				
Argumentative (sassy)		___	___	___	
Begging					
at home		___	___	___	

APPENDIX FF

		Most <u>Acceptable</u>		Willing <u>to Discuss</u>		Least <u>Acceptable</u>	Not <u>Acceptable</u>
at school	—		—		—		
in neighborhood		—		—		—	
<u>NON-VERBAL BEHAVIORS</u>							
Withdrawn		—		—		—	
Fearful		—		—		—	
Aloof - don't care attitude	—		—		—		
Needful of own privacy		—		—		—	
Forgetful	—		—		—		
Self-confident		—		—		—	
Independent		—		—		—	
Ungrateful		—		—		—	
Rejecting of love		—		—		—	
Disobedient		—		—		—	
Jealous		—		—		—	
Selfish		—		—		—	
Stubborn	—		—		—		
Depressed		—		—		—	
Moody		—		—		—	
Poor self-image		—		—		—	
Dependent/Clinging	—		—		—		
Insecure	—		—		—		
Manipulative							
to get own way		—		—		—	
to divide parents		—		—		—	
Given to explosive outbursts	—		—		—		
Excessive shyness	—		—		—		
<u>UNSOCIAL BEHAVIOR</u>							
Rude		—		—		—	
Interrupts	—		—		—		
Loud and noisy		—		—		—	
Refuses to share		—		—		—	
Picks nose		—		—		—	
<u>EATING PROBLEMS</u>							
Picky eater		—		—		—	
Poor eater	—		—		—		
Hoard food		—		—		—	
Eats between meals	—		—		—		
Eats to point of gagging		—		—		—	
<u>TABLE MANNERS</u>							
Messy - spills food	—		—		—		
Doesn't know how to use utensils	—		—		—		
Has poor table manners		—		—		—	
Selfish - grabs		—		—		—	

APPENDIX FF

	<u>Most</u>	<u>Willing</u>	<u>Least</u>	<u>Not</u>
	<u>Acceptable</u>	<u>to Discuss</u>	<u>Acceptable</u>	<u>Acceptable</u>
<u>SCHOOL ADJUSTMENT</u>				
Has poor relationship with other children	—	—	—	—
Disrespectful of teachers	—	—	—	—
Under-achiever	—	—	—	—
Daydreamer; doesn't listen	—	—	—	—
Fails to do homework	—	—	—	—
Disruptive in classroom	—	—	—	—
talks too much	—	—	—	—
can't sit still	—	—	—	—
Aggressive with others	—	—	—	—
in classroom	—	—	—	—
on playground	—	—	—	—
Truant or ditches school	—	—	—	—
Gifted	—	—	—	—
<u>SEXUAL BEHAVIOR</u>				
Seductive	—	—	—	—
Exhibitionistic	—	—	—	—
Has had early sexual experimentation	—	—	—	—
same sex	—	—	—	—
opposite sex	—	—	—	—
Adolescent sexual involvement	—	—	—	—
same sex	—	—	—	—
opposite sex	—	—	—	—
Engages in masturbation	—	—	—	—
privately	—	—	—	—
in front of others	—	—	—	—
Effeminate boy	—	—	—	—
Tomboy girl	—	—	—	—
Victim of sexual abuse	—	—	—	—
<u>MISCELLANEOUS</u>				
Thumb-sucking	—	—	—	—
Sleepwalking	—	—	—	—
Bedwetting	—	—	—	—
occasionally	—	—	—	—
nightly	—	—	—	—
Stool smearing	—	—	—	—
Pants soiling	—	—	—	—
occasionally	—	—	—	—
frequently	—	—	—	—
Poor personal hygiene	—	—	—	—
Runs away	—	—	—	—
Occasionally	—	—	—	—
frequently	—	—	—	—
Plays with matches	—	—	—	—
from curiosity	—	—	—	—
destructive	—	—	—	—
Has difficulty accepting limits	—	—	—	—

APPENDIX FF

Most Willing Least Not
Acceptable to Discuss Acceptable Acceptable

MISCELLANEOUS (con't)

Smokes cigarettes					
pre-teen		—		—	—
teen-ager	—		—	—	
Smokes marijuana					
pre-teen		—		—	—
teenager	—		—	—	
Has been exposed to excessive violence	—		—	—	

ADOPTIVE PARENTS WILLINGNESSTO WORK WITH CHILD'S:

BEHAVIOR PROBLEMS

Have frequent contact with teacher or school					
Take child for therapy or continue counseling	—		—	—	
Accept adoption family case manager's counseling and supervision		—		—	—
Continue with medication as long as physician indicates the need	—		—	—	
Participate in therapy as required by therapist	—		—	—	

PARENTAL BACKGROUND

One parent who is a schizophrenic					
Two parents who are schizophrenic	—		—	—	
One parent who is mentally retarded	—		—	—	
Two parents who are mentally retarded	—		—	—	
One parent who is an alcoholic		—		—	—
Two parents who are alcoholics		—		—	—
One parent who abused drugs	—		—	—	
Two parents who abused drugs		—		—	—
One parent who was in a mental institution	—		—	—	
Two parents who were in a mental institution	—		—	—	
One parent who was in prison	—		—	—	
Two parents who were in prison		—		—	—

SPEECH CHALLENGES

Stutters					
Talks with a lisp		—		—	—
Difficult to understand		—		—	—
Required speech therapy		—		—	—
Will always have trouble speaking and being understood	—		—	—	

APPENDIX FF

Most Willing Least Not
Acceptable to Discuss Acceptable Acceptable

VISION CHALLENGES

Sight is limited, glasses required	—	—	—
Sight in one eye only	—	—	—
Sight is limited, surgery may help or correct	—	—	—
Child is permanently blind	—	—	—

Sample Cover Letter for Personal References

Date:

RE:

Dear

_____ has/have applied to the County Office of Family and Children for the purpose of caring for children in the home/adopting a child(ren). Your name has been given as a personal reference. Please complete the enclosed form to the best of your knowledge, and return it as soon as possible to the County Office of Family and Children in the enclosed addressed envelope. We would appreciate a frank response to the questions. Please feel free to use the backside of this form or additional paper.

We shall appreciate your kind consideration and cooperation in this matter.

Very truly yours,

Foster Care/Adoption Specialist

REFERENCE FORM

In reference to: _____

How long have you known this person(s)? _____

In what capacity have you known this person(s)? _____

How often do you visit with this person(s)? _____

What would you say about the person(s)? _____

Personal character? _____

Social behavior habits? _____

Physical

health?

Emotional stability? _____

Do you think the person(s) would make good foster/adoptive parent(s)? _____

If so, why? _____

If not, why not? _____

Would you want the person(s) to care for your children? _____

What is the standing of the person(s) in the community? _____

How does the person(s) appear to manage personal and financial affairs? _____

Would you recommend placement of a child or children in this home? _____

Any additional information or comments would be genuinely appreciated. _____

ATTENTION: _____

Family Case Manager/SNAP Specialist

FINANCIAL PROFILE

Name _____ Date Submitted

INCOME

1. Salary and/or wages (current yearly gross income, including bonuses, if applicable)
Applicant A
Applicant B
2. Income from interest
3. Income from dividends
4. Rental income
5. Other

INVESTMENTS (Stocks, bonds, savings certificates, certificates of deposit, tax deferred annuities)
Name _____ Value

HOUSE

1. Estimated value
2. Original price
3. Balance on mortgage
4. Mortgagee
5. Monthly payment

AUTOMOBILES

Make _____ Year _____ Lien _____ Monthly Payment

RENTAL HOUSING

1. Monthly payment
2. Monthly utility costs

OTHER REAL PROPERTY

INSURANCE: WHOLE LIFE & TERM

Insured _____ Amount _____ Company _____ Monthly Cost

Medical Insurance: Yes: _____ No: _____

Company: _____

Cost, if applicable: _____

OUTSTANDING MONTHLY OBLIGATIONS
(Visa, Master Card, charge accts., etc.)

Name _____ Amount _____ Monthly Payment

BANK ACCOUNTS

1. Savings _____
Insured _____ Amount

2. Checking Accounts

Institution _____ Amount

RETURN TO:

RE:

MEDICAL REPORT FOR FOSTER CARE/ADOPTION
(Circle the Applicable Program)

NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____

This patient has come to you in response to a request from this agency for a complete report on the patient's physical condition. It is important for us to know of any health factors that might interfere with a person's ability to parent a foster child or raise a special needs child.

1. MEDICAL HISTORY:

Cancer _____	Tuberculosis _____		
Diabetes _____	Thyroid _____		
Epilepsy _____	Other _____	Glandular _____	Disturbance _____
Handicaps _____	Asthma _____		
Arthritis _____	Cardiovascular Disease _____		

2. LABORATORY TESTS:

Urinalysis _____
Wassermann _____
Chest X-Ray (if necessary) _____

3. GENERAL HEALTH:

Blood Pressure _____
Height _____ Weight _____

4. ABNORMAL FINDINGS ON PHYSICAL EXAMINATION AND MEDICAL DIAGNOSIS:

5. ANY ILLNESS OR DISABILITY WHICH MIGHT LIMIT THIS PATIENT'S ACTIVITY OR MAKE IT IMPOSSIBLE FOR THE PATIENT TO CARE FOR A GROWING CHILD OVER A NUMBER OF YEARS:

6. ALCOHOLISM OR DRUG ADDICTIONS:

7. FERTILITY: ABILITY TO CONCEIVE:

8. COMMENTS: ON EMOTIONAL STABILITY/MATURITY:

DOCTOR'S SIGNATURE: _____

ADDRESS: _____

PHONE: _____ DATE: _____

DOCTOR'S NAME: _____

(Typed)

APPENDIX MM

**VOLUNTARY RELEASE FOR
LIMITED CRIMINAL HISTORY RECORD**

I/We, the undersigned, hereby consent to a release of information from law enforcement agencies and/or the criminal justice system to the _____ County Office of Family and Children and/or the Division of Family and Children of any prior criminal history or arrest record as part of the application for the adoption process.

Name _____
(printed)

Name _____
(signature)

D.O.B. _____

Name _____
(printed)

Name _____
(signature)

D.O.B. _____

APPENDIX OO

Guide to Strengthening Technical Skills in the Family Preparation Assessment Process

To reduce technical errors in recording, the following guidelines may be helpful:

Look for misspellings and run-on sentences

Look for repetitions and wordy phrases

Look for sentences in which the actor is not identified

For example: It was felt that... or
Concern was raised that...

Look for judgmental language

Look for jargon or diagnostic terms used as description

For example; All attempts to mobilize the K family environmental
network were met with hostility and resistance.

Look for oversimplifications which can be identified by overuse of the verb to be

For example: The family is...

or by conclusion without supporting observations or assessments

Outline For Adoption/Foster Family Preparation Summary

I. Overview of the Family's Preparation

- * How did the family learn about adoption or fostering?
- * What is the reason for adoption or fostering?
- * How many children are they interested in adopting or fostering?
- * What characteristics, such as age, race, sex, or handicap is the family expecting in a child?
- * What pre-service training did the family receive?

II. Current Family Structure/Family Network Diagram

Describe the current family structure:

- * Who currently resides in the household?
- * Who helps out with the children?
- * Who visits regularly?
- * Who stays over?
- * To whom do they go for advice?
- * For single persons, is there a special person in the single person's life?
- * What relationship do the prospective parents have with their parents?
- * Who raised the prospective parents?
- * Have they experienced any recent losses (death, moves, divorces, fights, estrangements, etc.) within the extended family, non-blood kin, or friendship network?

III. Family History/The Genogram

- * Present a brief biographical sketch of each parent, including date of birth, race, where born, who raised each, and present occupation.
 - * Marital history of each parent, where they met, how long married
 - * How each partner describes the strengths of their relationship
 - * The challenges of their relationship
- * How do members of the adoptive or foster family see their family's history and life experience leading to their current decision to adopt or foster a child with special needs?
- * What is the extended family's history and experience with adoption or fostering?

IV. Parenting Style and Strengths

- * How were the parents parented as children?
- * What experience has this family had with parenting?
- * What discipline methods were used with them, and what discipline methods have they used?

If children are presently in the household:

- * How do the parents describe each child, including the child's adjustment and needs?
- * How comfortable is the family with the agency's policy on discipline?
- * What are the parents' expectations of each child?

APPENDIX PP

- * Are there particular stresses and strains with each child, and how are they handled?
- * Are children included in decision-making?
- * How does the family deal with or control anger, rage, possessiveness, or withdrawal in parent and child interactions?
- * How are anger, affection, joy, sadness, and other feelings expressed?
- * What are the family's expectations of adoption; of the adoptive child; of fostering; of the foster child; of siblings; and of themselves as adoptive parents?

V. Social Support-Resources/The Eco-Map

- * What supportive resources does the family currently have?
- * Anticipate issues affecting the family's eco-map after the adoption or foster placement of a child, such as resources needing to be developed or changes in relationships with larger systems.
- * Is the family ready to seek appropriate help and support from the agency?
- * Is the family ready to inform the family case manager of critical problems and concerns?

VI. Home Environment/Community

- * Describe the home, neighborhood and community.
- * Is the home adapted to the needs of any child, or a child with physical limitations?

VII. Financial Profile

For an adoption summary, attach the financial profile to the summary. For a foster family summary, the financial profile can be attached or the information can be included in the narrative in a financial subsection.

VIII. Parental Understanding of Child's History

- * Visualize a specific child in the family's network and genogram.
- * Discuss the family's preparedness to deal with the child's previous history.
- * Consider physical abuse, sexual abuse, neglect.
- * Address attitudes toward openness in adoption.
- * Address helping a child to adjust emotionally to the stress of separation and placement.
- * Discuss the family's ability to help a child maintain cultural and ethnic identity.
- * Address the family's readiness to maintain contact with the child's birth parents. (for foster parents only)

IX. Child Specific Assessment

- * What are the risks and strengths in this proposed placement?
- * What child-specific preparation occurred?
- * What training needs have been identified?
- * What are the factors that indicate success for this family with this child?
- * Can the family realistically project how their decision to adopt or foster this specific child will impact the family one year, three years, five years, ten years from now? Is the family open to seeking help in these areas?
- * Are there specific risk factors?
- * What risk management techniques have been put into place to minimize these risks?

X. Verifications

Complete the Requirements Checklist for foster care. For adoption summaries, address the information received from the following as required by the state adoption code and agency policies:

- * References
- * Medical report
- * Limited criminal history information

XI. Family's Understanding of Agency Role

- * Does the family understand their responsibilities as foster parents?
- * Does the family understand the agency's role?
- * What is the family's expectation of supportive services?

XI. General and Summary Assessment

- * What are your impressions of this family?
- * What are the family's strengths and risks?
- * How were they addressed?
- * What plans have the family developed to minimize risks?
- * What are the family's potential areas of vulnerability?
- * What are the necessary supports and supervision?
- * Comments and signatures of adoptive or foster parent(s)
- * Comments and recommendation of agency.

(See sample Recommendations and Signature Page, Appendix RR.)

Note: The General and Summary Assessment must include the fact that the family was advised of available subsidy resources; i.e., Title IV-E Adoption Assistance Program (AAP), Nonrecurring Adoption Expenses (NRAE) and County Adoption Subsidy (CAS).

This outline was adapted from the Spaulding for Children Adoption Family Summary Components Outline.

Cover Page For:

ADOPTION/FOSTER FAMILY PREPARATION SUMMARY

Applicant A Name: _____ Foster Home #
DOB: _____ Race:
Address :
Phone: (Home) _____ (Other)

Applicant A Name: _____ Foster Home #
DOB: _____ Race:
Address :
Phone: (Home) _____ (Other)

Children Race Relationship DOB

Dates of Contact:

Prepared by:

(Family Case Manager)

(Date)

(Supervisor)

(Date)

Recommendation/Signature Page For:
Adoption/Foster Family Preparation Summary

RECOMMENDATION AND SIGNATURES

COMMENTS BY THE FOSTER/ADOPTIVE PARENT APPLICANT(S)

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

PLACEMENT/LICENSING RECOMMENDATION AND ADDITIONAL COMMENTS

Date

Family Case Manager

Date

Supervisor _____

FAMILY PREPARATION
UPDATING INFORMATION QUESTIONNAIRE

County
Name
Date
Family Case Manager
Telephone _____ (Home)

1. Housing
_____ since (date)

2. Household Members

Please list below the names and ages of everyone now living in your home and their relationship to you. If any of these people are different than when you spoke with your family case manager last, please give details. (example: John Doe moved in January 1, 1998. Mary Smith got married May 5. Jimmy born August 1.)

Name _____ Age

3. Income
Name _____ Monthly Gross Income
Source
Name _____ Monthly Gross Income
Source
Name _____ Monthly Gross Income
Source

4. Expenses
Housing (mortgage/Rent) _____ Per Month
Utilities
Food
Clothing
Loan/Charge Payments
Insurance
Medical Expenses
Other

5. Health

APPENDIX RR

6. In your original application, you stated you were interested in adopting:
Please indicate any changes in the description of the type of child you would consider:

Please complete the attached checklist indicating which types of challenges you feel you are able to deal with.

7. Please notify the agency within ten (10) working days when a major change(s) has taken place within the family unit. Failure on the part of the approved prospective adoptive family to provide the required updating information as prescribed, or to notify the agency within the designated time frame of major changes in their family unit will be placed at the end of the listing of approved families.

Signed _____ Date

Signed _____ Date

SPECIAL NEEDS CHALLENGES

INDICATE AS HONESTLY AS POSSIBLE YOUR LEVEL OF ACCEPTANCE OF A CHILD WHO:

		<u>Most Acceptable</u>	<u>Willing To Discuss</u>	<u>Least Acceptable</u>	<u>Not Acceptable</u>
a.	has a slight limp	—	—	—	
b.	needs leg brace	—	—	—	
c.	has a missing arm or leg	—	—	—	
d.	is in a wheel chair	—	—	—	
e.	is paraplegic		—		—
f.	is quadriplegic	—	—	—	—
g.	has cerebral palsy	—	—	—	
h.	has cystic fibrosis	—	—	—	
a.	has a seizure disorder that is controlled by medication	—	—	—	
b.	has a seizure disorder not controlled, but child has seizures infrequently		—		—
c.	seizure disorder that is not controlled and has frequent seizures	—	—	—	
d.	seizure disorder reported in past, but no current medical verification and not showing currently	—	—	—	
a.	has a blood disorder that requires transfusions every three months		—		—
b.	blood disorder that requires hospitalization once a month		—		—
c.	blood disorder and whose life span is very limited		—		—
a.	has heart murmur, activity not curtailed	—	—	—	
b.	heart murmur, vigorous activity curtailed	—	—	—	
c.	may require open heart surgery at a later date but at placement just has to be watched	—	—	—	
d.	definitely will require open heart surgery	—	—	—	
e.	will require more than one open heart surgery		—		—

APPENDIX SS

		<u>Most Acceptable</u>	<u>Willing To Discuss</u>	<u>Least Acceptable</u>	Not
	<u>Acceptable</u>				
a.	has sight in both eyes but vision is limited and special glasses needed	—	—	—	—
b.	has sight in only one eye	—	—	—	—
c.	is blind, but surgery may give partial sight	—	—	—	—
d.	is blind and will never have sight	—	—	—	—
a.	has hearing problem with only partial hearing and surgery will not help	—	—	—	—
b.	has hearing problem with partial hearing, but surgery will help	—	—	—	—
c.	has hearing in only one ear	—	—	—	—
d.	has no hearing; is deaf and does not speak	—	—	—	—
e.	is deaf but does speak;	—	—	—	—
a.	has a deformed hand	—	—	—	—
b.	has a deformed arm	—	—	—	—
c.	has a deformed leg	—	—	—	—
d.	has a deformed face	—	—	—	—
e.	has two deformed arms	—	—	—	—
f.	has two deformed legs	—	—	—	—
a.	is in special education	—	—	—	—
b.	is in EMR (Educably Mentally Retarded)	—	—	—	—
c.	is in TMR (Trainable M.R.)	—	—	—	—
d.	is retarded and will always need supervision, such as sheltered workshop	—	—	—	—
e.	is Downs Syndrome ("Mongoloid")	—	—	—	—
a.	is hyperactive	—	—	—	—
b.	is hyperactive-requires medication but functions normally	—	—	—	—
c.	is hyperactive-requires medication and some kind of special classroom setting	—	—	—	—

APPENDIX SS

	<u>Acceptable</u>	<u>Most Acceptable</u>	<u>Willing To Discuss</u>	<u>Least Acceptable</u>	Not
a.	has been so emotionally traumatized that child is very withdrawn and will require therapy for an extended period of time	—	—	—	
b.	is so emotionally traumatized that child is abusive to self, such as pulling out hair, pinching self	—	—	—	
c.	so emotionally traumatized that child is abusive toward other people	—	—	—	
d.	so emotionally traumatized that child is abusive toward animals	—	—	—	
a.	stutters	—	—	—	
b.	has a lisp	—	—	—	
c.	has speech at age six which is very hard to understand	—	—	—	
d.	will generally in the future have trouble speaking and being understood	—	—	—	
a.	has a scar on face caused by harelip	—	—	—	
b.	was born with a cleft palate, now repaired	—	—	—	
c.	was born with both harelip and cleft palate, now repaired	—	—	—	
a.	has one birth parent who was diagnosed as schizophrenic	—	—	—	
b.	has both birth parents who were diagnosed as schizophrenic	—	—	—	
c.	has been diagnosed as schizophrenic, but medication controls	—	—	—	
d.	is autistic	—	—	—	
a.	is a carrier of sickle cell anemia (Black)	—	—	—	
b.	controlled sickle cell anemia	—	—	—	
c.	sickle cell, with frequent episodes	—	—	—	

Psychological/Emotional/Mental Challenges Checklist

INDICATE AS HONESTLY AS POSSIBLE YOUR LEVEL OF ACCEPTANCE OF A CHILD WHO:

		<u>Most Acceptable</u>	<u>Willing To Discuss</u>	<u>Least Acceptable</u>	Not
	<u>Acceptable</u>				
1.	lies moderately	—	—	—	
2.	lies continuously	—	—	—	
3.	steals from the penny candy store	—	—	—	
4.	steals from friends, classroom, stores, etc.	—	—	—	
5.	runs away once a week (average)	—	—	—	—
6.	runs away once a month (average)	—	—	—	—
7.	plays with matches just for fun	—	—	—	—
8.	plays with matches and tries to burn something down	—	—	—	—
9.	is a disruptive influence in the classroom	—	—	—	—
10.	abuses self	—	—	—	—
11.	abuses other people: hitting, kicking, biting	—	—	—	—
12.	kills animals, such as hamsters, rabbits	—	—	—	—
13.	is destructive to TV sets, radios, watches, etc.	—	—	—	—
14.	is a boy who enjoys wearing female underwear and accessories	—	—	—	—
15.	masturbates	—	—	—	—
16.	is silent for long periods	—	—	—	—
17.	is sad, angry for long periods	—	—	—	—
18.	talks a great deal about past abuses	—	—	—	—
19.	does not play with other children	—	—	—	—
20.	is consistently involved in fights (verbal and physical) with children	—	—	—	—
21.	wets the bed once a week (average)	—	—	—	—
22.	wets the bed every night	—	—	—	—
23.	is a teenage daughter who is sexually involved with her boyfriend	—	—	—	—

APPENDIX SS

- | | | | | |
|-----|--|-------|-------|-------|
| 24. | is a teenage son who is sexually involved with his girlfriend | _____ | _____ | _____ |
| 25. | is a teenager who is sexually involved with many of the opposite sex | _____ | _____ | _____ |
| 26. | is a teenager who is sexually involved with someone of the same sex | _____ | _____ | _____ |

The above are not necessarily typical of adoptive older children. However your expectations and attitudes are a large factor in how you would deal with these situations. Your level of acceptance is a major factor in the success or failure of an adoptive placement

APPENDIX TT

SAMPLE
NOTIFICATION TO UPDATE
ADOPTION FAMILY PREPARATION ASSESSMENT

Dear _____:

Enclosed please find your annual family preparation update and a checklist indicating what special challenges you feel you can meet.

Please complete all sections of the questionnaire and the checklists and return them within thirty (30) days of receipt in the envelope provided by _____.

If you have any questions, please feel free to call your family case manager, _____ at

Thank you for your continued interest in adoption.

Sincerely,

APPENDIX UU

SOCIAL SUMMARY ON CHILD TO BE PLACED

DATE:

CHILD'S FIRST NAME:

CHILD'S NICKNAME:

SEX:

BIRTHDATE:

RACE:

RELIGION:

REASON FOR AGENCY INVOLVEMENT:

TERMINATION: BEING PURSUED

VOLUNTARY

INVOLUNTARY

I. FAMILY HISTORY:

A. History of Birth Family

- Family history information will be gathered from previous records, child's initial Case Plan, etc.
- History information should include all factual information available on family members.
- Parent birth dates, race and the last known location are important.
- Attach parenting assessment for each parent and genogram.

B. Child's understanding of his past

- What is the child's understanding of why he or she was removed from the home?
- What is child's understanding of why parental rights were terminated?
- Does the child currently have contact with the birth family?
- How does the child feel about the birth family?
- Is the child interested in locating birth parents in the future?

C. Indicate status of all siblings.

- What are the permanent plans for these children?
- If there is a sibling split indicate reason why.
- What will be the plan for contact?
- What are the expectations of these adoptive parents in regard to visitation?

II. PHYSICAL DESCRIPTION OF THE CHILD:

HEIGHT:

WEIGHT:

EYE COLOR:

HAIR COLOR:

RACE:

UNUSUAL FEATURES:

APPENDIX UU

III. ACADEMIC FUNCTIONING:

A. Education History:

- Where has the child attended school starting with pre-school?
- Academic Functioning (attach report card and/or IEP)
- Has special education ever been recommended, if so attach IEP.
- If child is in special education, when was determination made? (attach IEP)
- What is the date of the most recent case conference? (attach IEP and conference notes)

B. Current school placement:

SCHOOL:

GRADE:

IV. EMOTIONAL FUNCTIONING:

- Has child been in therapy in the past or currently?
- If so, who is the therapist and what are the findings? (attach psychological evaluation)
- Is or has child ever been on psychotropic medication. If so, list current medications.
- Who is the psychiatrist monitoring the medication?
- Has the child ever received Intensive Outpatient or Inpatient Hospitalization for psychiatric issues? (attach hospital reports)

V. PERSONALITY: (Including description of fears, how child relates to peers and adults, social habits, hygiene habits, behavioral problems, talents, skills interest, history of drug or alcohol abuse, etc.)

VI. MEDICAL INFORMATION: (Current health of child and birth parents, hospitalizations and medical history of child and birth parents and developmental delays, please attach any medical documentation.)

VII. HISTORY OF FOSTER CARE PLACEMENTS:

VIII. FUNDING AVAILABLE: Title IV-E Adoption Assistance Program; Nonrecurring Adoption Expenses (NRAE); County Adoption Subsidy (CAS)h,

IX. ATTITUDE / READINESS FOR ADOPTION:

- What are the child's feelings about adoption?
- What issues must be addressed prior to and during adoption preparation process?

X. EVALUATION OF THE CHILD'S NEED IN A HOME. (Take into consideration the following factors: Special physical and emotional needs, Placement with siblings, Placement with relatives, Maintaining continuity of current placement, Racial identity factor, Religious preference, Child's wishes, Two parent or single parent family, Other children in adoptive home.)

Family Case Manager

Supervisor

APPENDIX VV

CONTRACT OF PLACEMENT

ADOPTIVE HOME AGREEMENT

THIS AGREEMENT made this _____ day of _____, 20____, at _____, Indiana, by and between the County Office of Family and Children, County of _____, State of _____, whose post office box/address is _____, hereinafter known and designated as second parties,

WITNESSETH:

WHEREAS _____, a minor child, born on the ____ day of _____, _____, was made a ward of, and committed to the care, custody and control of the first party by the Juvenile Court of _____ County, on the ____ day of _____, _____.

And, **WHEREAS**, the second parties desire to take said child into the home of second parties and be responsible for its custody, care and control.

NOW, THEREFORE, in consideration of the mutual covenants herein expressed, the first party hereby delivers said child to the second parties and the second parties hereby receive said child and agree to maintain and treat child kindly and as a member of the second parties' family, to furnish child with necessary and proper food, clothing, shelter and medical attention, to provide for child's moral and religious training, to cause child to attend the public or other schools as by law provided and to teach child some useful and gainful occupation that will enable child to become self supporting. The second parties agree not to remove said child from second parties present location without the consent or approval of first party.

The party of the first part reserves the right to cancel this contract and take possession of said child, at any time, when in the opinion of the first party, the interest of the child would be best served by such action.

The parties of the second part reserve the right to cancel this agreement and to return said child to the first party at any time after notice to the first party of second parties' intention so to do.

IN WITNESS WHEREOF, the County Office of Family and Children of _____ County, Indiana, has caused this agreement to be subscribed by the County Director of the County Office of Family and Children and the second parties have hereunto subscribed their signatures this _____ day of _____, 20____.

THE COUNTY OFFICE OF FAMILY AND CHILDREN OF INDIANA

By _____, Director

FAMILY CASE MANAGER PROCEDURE FOR ADOPTION PLACEMENT

PLACEMENT PREPARATION

STAGE 1

- Have initial staffing with supervisor.
- Determine if a relative, foster parent, or other involved parties are interested in adopting the child (ren).
- Organize case file.
 - Locate birth record, SSN, and TPR documentation; obtain if missing.
 - Locate immunization record and medical history.
 - Make Notes for Social History Summary
- Call Foster Parents, Group Home or Other Current Placement.
 - Set up an appointment to visit the child in their current placement.
 - If the child is old enough and has the mental capability to understand, ask the child how he or she feels about joining another family permanently through adoption.
 - Ask about physical and dental health; ask for immunization record if not in the case file. Complete Indiana Adoption Medical History Registry (Biological parents, grandparents, and other relatives also contribute to this information).
 - Authorize appointments for medical and dental examinations; write report to COFC.
 - Discuss emotional/behavioral condition and progress in therapy, if applicable. (Information from therapists, psychiatrists, school counselors, etc., should be included).
 - Make referral for assessment and/or counseling if need is indicated, including Adoption issues/counseling.
 - Make referral to Child Adoption Preparation classes if offered in the area.
 - Copy relevant case file information and attach to referral form to counseling agency; request monthly written progress reports from the counseling agency.
 - Send letter requesting school records; indicate deadline (30 days).
 - Determine eligibility: AAP eligibility YES ____ NO ____; County Subsidy eligibility YES ____ NO ____; Nonrecurring Adoption Expense YES ____ NO ____; Medicaid YES ____ NO ____.
- If a licensed or approved relative or foster parent wants to adopt the child (ren), the Regional SNAP team does not need to staff for approval unless the COFC disapproves due to abuse or neglect reports or other serious concerns regarding the resource.
- If another involved party is interested and appropriate to adopt the child (ren), the party must complete Adoption Training and the Family Preparation with a licensed child placing agency under contract with the state.
- Have close up picture of child(ren) taken by Sears (SNAP specialist or Adoption Initiative will have form) or by another professional photographer.
- Complete Child Registration for the Internet form (Appendix I), and give form to SNAP specialist who will forward it to the Adoption Initiative. This is to be completed when paperwork to terminate parental rights is initially filed with the court.
- Write Social Summary for the child (ren)(Appendix VV).
- Complete Child Registration for “My Forever Family” Picture Book (Appendix J, State Form 11840/FPP 1440). This is to be completed within 30 days of termination of parental rights being granted.

APPENDIX WW

- Create Adoption Case in ICWIS, and maintain regularly.
- Present Social Summary, close up photo, and Child Registration for “My Forever Family” Book for child (ren) at regional SNAP Team meeting. SNAP specialist will then present child (ren) at SNAP Council meeting and forward to the Adoption Initiative for publication in the next “My Forever Family” Book.

STAGE 2

- Send letter to foster parents, relatives, or group home confirming the above conversation.
- Interview school personnel (teachers, principal, social worker).
- Complete Social Summary.

STAGE 3

- Call foster parents, relatives, or group home about a second visit and about items for a “Life Book”; e.g., photos, awards, art, letters, momentos, etc.
- Visit with child to work on “Life Book”.
- Receive reports or send reminder letter out.
 - School records
 - Physical exam results
 - Dental exam results
 - Psychological assessment
 - Progress reports from therapist(s)
- In addition to the “My Forever Family” Book, the child (ren) may also be featured on “Thursday’s Child” television spots, in “Sunday’s Child” newspaper spots, at regional and statewide adoption fairs, on posters and in National Adoption Picture Books.

STAGE 4

- The FCM, SNAP Specialist and Adoption Initiative will all keep records on all inquires regarding the featured child (ren).
- Photocopy Social Summary of child (ren) for prospective adoptive families inquiring about the child (ren) .
- Request a completed Family Preparation from each family wishing to be considered an adoption resource for the child (ren).
- Read all the Family Preparations, and screen out a maximum of three (3) or four (4) families to interview as possible parents for the child (ren).
- The SNAP specialist will arrange a meeting at which several team members and people involved in the case for the child (ren) interview each possible family separately.
- During the interviews, inform each family regarding the strengths and needs of the child (ren). Ask careful questions, and take notes.
- All participating in the interview process except the possible families should vote on the family who might best meet the strengths and needs of the child(ren).

APPENDIX WW

- [] Notify family selected by the Team and their agency (if other than COFC) by phone or letter with instructions to contact the family case manager.
- [] Call foster parents about Team outcome, and begin discussion on the logistics of the first official visit.
- [] Have telephone conversation with pre-adoptive family.
 - Congratulations
 - Special needs of child and Team recommendations
 - Tentative visit timetable
 - Foster parent and sibling contact, plus addresses and phone numbers (with permission)
 - Logistics arrangements on first official visit
 - Tips/ideas for making a good first visit; e.g., photographs of home and family, house gift for foster parents, homemade goodies for children, toys for children
 - Brief mention of subsidy
 - Describe role of COFC, plus Case Plan
- [] Send letter confirming telephone conversation with pre-adoptive family and map (if needed).
- [] Have telephone conversation with pre-adoptive family's adoption agency (if other than COFC).
 - Special needs of children and Team recommendations
 - Adoption preparation and counseling arrangements
 - If supervision by the licensed child placing agency is requested by COFC, monthly written reports will be made to the COFC
 - Interstate compact, if applicable
- [] Complete Withdrawing Child From the Internet form (Appendix K) and a Change Notice for "My Forever Family" Picture Book (Appendix L, State Form 9703/FPP 1443).
- [] Write a new case plan with pre-adoptive parents, foster parents, CASA, etc.
 - Give to supervisor for approval
 - Get signatures of all parties
 - Make enough copies (court, case file, pre-adoptive parents, foster parents, licensed child placing agency, CASA, etc.)

STAGE 5

- [] First official visit (day or evening but not overnight). Family case manager must be present for initial introductions of child and foster parents to pre-adoptive parents.
 - Office briefing on child's medical and social background, needs and areas of concern; commitment and communication; sharing of reports, documents (especially Indiana Adoption Medical History Registry, birth family, family's goodbye letter)
 - Question and answer opportunity
 - Type of counseling needed, specified to pre-adoptive parents, if applicable
 - Subsidy information
 - Case Plan discussion
 - Visitation with child

APPENDIX WW

- Check on impact of first official visit.
 - Child
 - Pre-adoptive family
 - Foster family
 - Counselor
- Initial ICPC work, if applicable.
- Distribute Medical Treatment Authorization Form.
 - To pre-adoptive parent (give them Medicaid card at each visit)
- Apply for AAP/Adoption Subsidy (see Manual Section 8 and account clerk for instructions).
 - Application forms to pre-adoptive family with cover letter
 - Forms returned
 - Application completed by family case manager and AAP/ Adoption Subsidy files sent to Central Office Eligibility Unit for final processing.
- Official visit no. 2
- Check on impact of second official visit
 - Foster parents
 - Child
 - Pre-adoptive family
- Additional pre-placement visits may or may not be needed.

PLACEMENT

STAGE 1

- Complete change of Placement Form.
- Have goodbye visit at foster parents' home (take photographs, transfer Medicaid card).
- Do post ICPC work, if applicable.
- Visit or call child and pre-adoptive family 5-10 days after placement.
- Give nonrecurring adoption expense application form to pre-adoptive family.

STAGE 2

- Do Supervisory Report #1 (after 90 days of placement); file it with the Court.
- Receive progress report or send reminder letter out.
- Gather all parties to case and write new case plan, if necessary.

STAGE 3

- Do Supervisory Report #2 (after 180 days of placement); file with the Court.
- Receive progress reports or send reminder letters out.

FINALIZATION STAGE

- Ask pre-adoptive parents to file a Petition for Adoption (they will need an Attorney), and send a copy to COFC.
- Determine if AAP/ Adoption Subsidy is in effect yet?
- Complete Non-Recurring Adoption Expense (NRAE) Program
 - Application forms to adoptive parents (See accounting clerk or Manual Section 8)
 - Certify returned application.
 - File with COFC.
- Complete Court Requirements of COFC.
 - Report to the Court with recommendations.
 - Consent to Adopt form signed by director.
- Obtain final decree of adoption.
- Request dismissal of wardship; attach Decree of Adoption.
- Close CHINS court case and ICWIS CHINS case, noting wardship and subsidy status.