

Concerns have been raised about the safety and well-being of a child you know. A court hearing will be held soon to make decisions about the child.

Family Court Hearing

Based on the information presented at the hearing, the judge will decide whether the child can safely live at home with the custodial parent(s). If not, the judge will grant temporary custody to:

- ⇒ A non-custodial parent
- ⇒ A relative
- ⇒ A family friend or other person known to the child and family
- ⇒ The Department for Children and Families - Family Services Division (FSD)



Do you want to be considered as a placement option?

If you do:

1. Act quickly.

Let us know right away that you'd like to be considered.

2. Work with us.

Answer the questions on the attached form, provide any other information that's asked for and let us visit your home if needed.

3. Provide permissions for all required background checks.

All household members age 16 and older must sign the attached form authorizing us to conduct background checks.

4. Decide which placement option(s) you could agree to.

- a. The judge grants you temporary *conditional custody*.
- b. The judge grants temporary custody to FSD and you become licensed to provide foster care.

Some of the differences between the two options are outlined on the back of this brochure.

Vermont Kin as Parents (VKAP)

We strongly advise you to contact VKAP to discuss the differences between conditional custody and foster care and determine the best option for your family.

(802) 871-5104

What happens next?

1. FSD will assess your ability to safely care for the child.

We'll consider all the information that has been collected.

2. FSD will present its recommendation to the court.

This could include recommending:

- a. Either custody or foster care
- b. Further assessment if there are any concerns
- c. Against placement if your household is determined to be unsafe

3. The court will decide where the child will be placed.

After listening to all the parties involved, the judge will make a decision about temporary custody. If custody is granted to someone other than DCF, it may come with some conditions.

CONDITIONAL CUSTODY

You don't need a foster care license.

You're responsible for most decisions made about the child (except those ordered by the court).

If you can no longer care for the child, you must ask the court to change the order.

A Family Services worker will help you achieve the permanency goal and the action steps listed in the case plan.

You're responsible for carrying out the plan for contact between the child and parents (e.g., paying transportation and child care costs).

The child may get a Child-Only Reach Up Grant from DCF's Economic Services Division. This would make the child eligible for Medicaid.

If the child is on public assistance, most or all of any child support paid will go to the State.

If you adopt or are awarded permanent guardianship of the child, you may be eligible for ongoing financial support (e.g., Reach Up or adoption assistance) through DCF.

The child can stay in their school until the disposition hearing. If you live in another town, you'll be responsible for transportation. While educational stability is encouraged, the child may have to change schools.

FOSTER CARE

You do need a foster care license.

DCF is responsible for many of the decisions made about the child.

If you can no longer care for the child, you may ask DCF to find another caregiver.

A Family Services worker will help you achieve the permanency goal and the action steps listed in the case plan.

DCF will help you carry out the plan for family contact (e.g., reimbursing mileage and paying for child care).

You'll get a foster care reimbursement for each child placed with you and they will be eligible for Medicaid.

Any child support paid will go to the State to offset the cost of the child's care.

If you adopt or are awarded permanent guardianship of the child, you may be eligible for ongoing adoption or guardianship assistance through DCF.

The child will stay in their current school unless it's not in their best interests. DCF may be responsible for paying transportation costs if the child attends school in another town. See Family Services Policy 72.



**A Child You Know May
Need Temporary Care**
*Information for
Relatives & Friends*

 **VERMONT**
DEPARTMENT FOR CHILDREN & FAMILIES
FAMILY SERVICES DIVISION

Please let us know if you need an accommodation because of a disability or an interpreter because of limited English.

Form for relatives and friends

Interested in being a placement option for a child

Child's name: _____

Your name & relation to child: _____

Your mailing address: _____

Your phone numbers: _____

A. Information & authorization to conduct background checks.

Provide details below about all household members age 16 and older. Have each person sign below to authorize us to conduct background checks on them. Use extra paper if necessary.

START WITH YOU. PRINT CLEARLY. MAKE SURE EACH PERSON AGE 16+ SIGNS BELOW.

Last name, first name, middle initial

Date of birth

Place of birth

Any maiden & previous names

Social Security number

Towns & states you previously lived or worked in

SIGN HERE to authorize background checks ←

Last name, first name, middle initial

Date of birth

Place of birth

Any maiden & previous names

Social Security number

Towns & states you previously lived or worked in

SIGN HERE to authorize background checks ←

Last name, first name, middle initial

Date of birth

Place of birth

Any maiden & previous names

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Towns & states you previously lived or worked in

SIGN HERE to authorize background checks ←

Last name, first name, middle initial

Date of birth

Place of birth

Any maiden & previous names

Social Security number

Towns & states you previously lived or worked in

SIGN HERE to authorize background checks ←

IMPORTANT: Be sure to complete the other side of this form.

B. Questions about all household members/your home.
If you answer YES to any of the questions below, be prepared to provide us with more details.

Has anyone in your household:

1. Been charged with, or convicted of, a criminal offense (<i>juvenile or adult</i>)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Been assessed/investigated by a child or adult protective services agency?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Had a child in DCF custody or an open case with DCF?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Filed for or been served with a Relief from Abuse Order?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Received mental health services or counseling?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Received substance abuse treatment?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Is anyone in the household:

1. Being supervised by the Department of Corrections or similar agency?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Being treated for a chronic or serious health problem?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Does your home have any obvious safety hazards? This includes, but is not limited to, things such as water hazards, fire hazards, general sanitation concerns and unsecured firearms.	<input type="checkbox"/> YES <input type="checkbox"/> NO
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C. Other people with a connection to this child.
Tell us about other adults you know who may be willing to stay connected to this child, in some way.
(For example: exchange letters, take them on special outings or have them over for the weekend).

Name: _____
Where they live: _____
Phone: _____
Connection to child: _____

Name: _____
Where they live: _____
Phone: _____
Connection to child: _____

For DCF Use Only:			
Type Of Check	Date Checked	Initials	Result
Adult Abuse Registry			
Child Protection Registry			
DCF Records			
VCAS			
VCIC			
Other			