

Chapter:	Placing Children and Youth	
Subject:	Kinship Care	Page 1 of 3
Approved:	James Morse, Commissioner	Effective: 7/1/04 FINAL
Supersedes:	Social Service Policy No. 91	Dated: 9/17/03

Purpose

This policy emphasizes the importance of identifying families and individuals related to the child, or who have significant “family-like” relationships to the child, who may be appropriate to play a continuing positive role in the life of the child as a placement resource.

Policy

Staff are encouraged to place children with kinship families when appropriate and when the placement supports the safety, permanence and well being of the child or youth.

- Kin are required to become licensed resource families following standard procedures
- Training requirements for kin resource families are the same as for other resource families.
- Kin will be reimbursed and have access to the same supports, including respite care, as any licensed resource family.

Definitions

Kinship Care: The placement of a child in custody in a licensed resource family in which one of the responsible caretakers is a relative by blood, marriage or adoption or is a non-relative who has such significant ties to the child that they may be regarded as kin.

The Value of Kinship Care

The connection to family, kin and community is essential to child wellbeing. The strengths and resources of kin can provide many benefits to the child, family, community and the division. Ensuring access to these benefits requires thoughtful and appropriate integration of kin into the work of the division. Kinship Care can:

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- Enable children to live with persons they know and trust;
- Reinforce children's personal and cultural identity;
- Encourage families to cultivate and rely on their own resources and strengths;
- Enable families to participate as responsible and essential members of the child and family's support team;
- Demonstrate the division's commitment to "protect children and strengthen families in partnership with families and communities."
- Support the division by expanding its available resources for children and families.

Identification of Potential Kin Resources

Staff will take active steps to identify a family's kinship resources and supports, including potential kinship caregivers, by asking the following persons for names and identifying information about kin. The results will be documented in case notes.

- The child's parent(s) or guardian;
- The child's non-custodial parent; and
- The child, when appropriate

Staff should ask other persons who know the child about potential kinship care providers. This may include doctors, school personnel, neighbors, service providers, and other community members. Identification will occur:

- Within 15 days of a child's initial removal from home and;
- Prior to a planned move to an unrelated resource family; and,
- When the case plan is changed to adoption, or a concurrent plan is in place and the child is not currently living with a resource family who has signed a Statement of Intent to Adopt (FS-A-368).

Guidelines for Assessing Placement with Kin

All kinship care providers will be licensed just as any other resource family. In addition to the family assessment any potential resource family receives, assessment of kinship care providers should include:

- The quality of the relationship with the child;

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- Ability to protect the child from abusive parents and/or the child from his or her own risk behaviors;
- Attitude towards substantiations and/or findings that have been made;
- Have kin been involved with the family dynamics that have led to the removal of the child?
- Role in resolving or intervening in the present situation;
- Willingness to work with division staff and the child's treatment team: Are they willing to work towards the case plan goal, comply with division requests, and accept necessary services?
- Adequacy of personal supports to ensure their ability to care for and meet the child's special needs;
- In cases in which domestic violence has been identified, how placement with kin supports the ability of the primary parents to fulfill the case plan and/or have safe contact with the child.