Permanency Hearing After Final Order Checklist

15 Minutes; up to 25 suggested best practice

Statutory

Prior to the Hearing:

- □ If parental rights terminated, first Permanency Hearing (PH) within 90 days of final order
- □ If parent rights not terminated, first PH within 180 days of final order
- □ 10 days' notice of hearing

At the Hearing:

- □ Identify those present
- Child in attendance
- □ Review DFPS efforts to notify of hearing
- □ Review Permanency Progress Report:
 - Child's safety and well-being
 - Child's needs (medical/special)
 - Child provided opportunity to provide information about possible relative or other caregiver
 - Child's placement, noting evidence as to whether DFPS can place child with relative
 - If in institutional care, efforts to ensure least restrictive environment
 - Primary/alternative permanency goals
 - DFPS reasonable efforts to finalize the permanency plan:
 - due diligence to place for adoption if rights terminated and child eligible; or
 - APPLA, including appointing relative as PMC or returning the child to parent, if appropriate for child
 - For child with APPLA goal:
 - desired permanency outcome; and
 - whether APPLA best permanency plan; if so, compelling reasons why not in child's best interest to:
 - return home,
 - be placed for adoption,
 - be placed with legal guardian, or
 - Be placed with fit and willing relative.
 - whether DFPS has conducted an Independent Living Skills (ILS) assessment for all youth 16 and older in TMC or PMC
 - whether DFPS has conducted an ILS for all youth 14 and older in PMC
 - whether DFPS has addressed the goals identified in the youth's permanency plan

- DFPS Permanency Progress Report filed 10 days before hearing; includes
 - Summary of Medical Care
- □ The court file includes:
 - Notification of Medical Consenter Form 2085-B
 - Education Decision-Maker Form 2085-E
 - for youth 16 years of age or older, whether DFPS has provided documents required by Section 264.121(e)
 - for youth 18 years or older, or has had disabilities of minority removed, whether DFPS has provided youth with documents and information listed in Section 264.121(e-1)
 - If 14 or older, services to assist in transitioning from care to independent living in community
 - Receiving appropriate medical care and provided opportunity to express opinion on medical care
 - If receiving psychotropic medication:
 - provided appropriate non-pharmacological interventions, therapies, or strategies to meet needs; or
 - seen by prescribing physician, physician assistant, or advanced practice nurse at least once every 90 days
 - Education Decision-Maker and education needs and goals identified, major changes in school performance or serious disciplinary events
 - For child in PMC without termination, whether DFPS to provide services to parent for up to 6 months after PH if:
 - child not placed with relative or other individual, including foster parent, seeking PMC; and
 - court determines further efforts at reunification with parent:
 - in best interest of child; and
 - likely to result in child's safe return to parent
 - DFPS identified family or other caring adult with permanent commitment to child
 - If the child is placed in an RTC or QRTP, whether continued placement in an RTC or QRTP is appropriate

Permanency Hearing After Final Order Checklist

Continued

- Review DFPS efforts to ensure the child has regular, ongoing opportunities to engage in ageappropriate normalcy activities, including activities not listed in the child's service plan.
- Address citizenship issues, consulate notified, SIJS
- Ensure those present given opportunity to be heard and if caregiver is present, must be allowed to provide information
- □ If child with relative, inform about Permanency Care Assistance
- □ Confer with child about permanency plan
- □ If AAL has not seen client, form filed

Court Findings

At the End of the Hearing:

Issue court order

□ Set next PH within 180 days

Best Practices

- □ If inadequate notice, consider resetting hearing to secure attendance
- □ Engage parties with direct questions
- □ Engage youth
- □ Ask DFPS direct, child-specific questions about both primary and concurrent goal
- □ Next PH by 90 or 120 instead of 180 days
- □ For youth who will turn 18 while in care:
 - Discuss extended foster care and trial independence
 - Ensure referrals to Texas Workforce Commission

- Ensure delivery of documents *before* leave care
- Youth advised of eligibility for Family Group Decision Making or Circles of Support to discuss future plans
- Youth enrolled in PAL or provided transitional services after 14th birthday
- □ Ask the following questions:
 - What is preventing this child from achieving positive permanency?
 - How is my decision specific to this child and this family?
 - Are there cultural issues we need to understand?

Well-being Issues

Medical Care and Mental Health

□ Summary of medical care:

- Nature of emergency medical care
- All medical and mental health treatment receiving and progress
- Any medication prescribed/progress
- Caregiver compliance with treatment plan

Education and Educational Decisions

- Enrolled in school/in appropriate grade
- □ Remains in current school, if placement change
- □ If placement change, determine:
 - Where child wants to attend school
 - Whether transportation available
 - Whether change coordinated with grading and testing periods
 - Whether records/credits transferred

- Adverse reaction or side effects
- Diagnosis or diagnostic tests
- Activity to avoid that affect effectiveness of treatment
- Other info required
- If 0-3, child assessed for developmental milestones through ECI
- □ If 0-5, child enrolled in Early Head Start, Head Start, or Pre-Kindergarten
- □ Education Decision-Maker Form 2085-E on file
- $\hfill\square$ School supports and disciplinary issues
- Extracurricular activities/normalcy
- □ Evaluated/receiving special ed services
- □ If 14 or older, postsecondary education plan