

## **Section 4 Overview**

This section pertains to the policy and procedures necessary when an out-of-home placement of a child is imminent or has occurred.

## **Chapter 27 Overview**

This chapter pertains to the necessary activities when adoption has become the permanent plan for a child or sibling group.

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## **Memoranda History:**

[CD04-73](#), [CD06-47](#), CD07-52, CD16-11

## **27.1 Mandate And Rationale**

Section 453.014, RSMo, provides that "the Children's Division (CD) may place a minor for adoption." For the purposes of adoption, a minor is defined as any person who has not attained the age of 18 years or any person in the custody of the Children's Division between the ages of birth and 21 years.

In keeping with the philosophical base that every child is entitled to a safe, secure, and permanent home, the Children's Division is obligated to make a diligent search for appropriate adoptive placements for those children for whom adoption has become the permanent plan.

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## **27.2 Children Eligible For Adoption**

Children are eligible for adoption only when all birth, legal and/or putative parents have voluntarily relinquished all their rights or when the court has terminated all parental rights.

Related Subject: Section 4, Chapter 26 Termination of Parental Rights
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### **27.3 Child's Summary for Adoption Placement**

A thorough and accurate pre-placement study of the child is a critical component of the adoption process. The information provided assists potential families and the Adoption Staffing team members in making an informed decision regarding the child. Prior to an Adoption Staffing being scheduled the Child's Summary for Adoption should be provided to the pre-adoptive families selected through the preliminary screening process. The families should then be given ten (10) business days to review the Child's Summary and provide their written responses on the Family Response Form (CD-192). Also, this information may be important to the child if/when he has questions regarding his heritage. The Children's Service Worker may contact a number of resources to complete the pre-placement study including birth parents/relatives, physicians, placement provider, teacher and the child. The Children's Service Worker completing the child's summary is not to include identifying information of the birth parents.

The following outline should be followed when preparing the child's summary for adoption placement.

#### **Adoption Summary**

**Name:** (first name only)  
**DOB:**  
**Race:**  
**Sex:**  
**Religion:**  
**Native American Y/N:**  
**Tribe (if known):**  
**Date:**

**Please refer home studies to:** (Adoption Specialist's Name  
Address  
Address  
Phone #  
Fax #  
E-mail address)

#### **Description:**

**(Describe the child physically and his or her personality. What are his/her likes/dislikes, hobbies, talents, etc. What does he/she say about himself, his talents, likes, etc? What does his/her placement provider say about the child? If possible, obtain quotes from child and/or placement provider. How does the child get along with adults, authority figures, peers, younger children, or older children? Describe how the child looks or acts younger than his/her age, if applicable. Describe the child's ability to make and maintain friendships. List any fears or anxieties the child may have. What does the child consider to be his/her**

religion? Describe how religious beliefs and observances impact the child on a daily basis. What traditions, values and beliefs are important to the child, such as holidays, food, music, etc.? What languages does the child speak and understand, and which is preferred?)

**Daily Routine:**

(Describe the child's daily routine, the degree of flexibility or structure the child needs. Describe how the child takes care of his/her possessions. Describe the child's hygiene, sleep and eating habits. List suggestions the child's current caregiver has about what works best for this child in terms of daily routine.)

**Placement History:**

(Identify when the child came into care, why, at what age and briefly discuss the child's placement history – how many placements has the child had, what type of placements were they and include why the child was moved from one placement to another, changes in child's behavior/demeanor, etc.)

**Background Information of Biological Family:**

(Describe the birth parents; *without* identifying information of the birth parents. What do they look like, do they have any drug history, what is their work/educational history, and how old were they at the time the child was born? List any medical and/or mental health diagnosis of both birth parents and extended birth family – if applicable to this child – and any other pertinent birth family history that is not covered elsewhere in the profile.)

**Education:**

(Indicate the child's current placement in school and identify grade level and academic year, i.e. for the school year 2016-2017 the child is in the eighth grade, identify if the child receives special education, if so, be specific as to what kind, what are the child's favorite subjects, what are their educational strengths. What is the child's attitude about school? Is there an IEP in place to address these needs? Obtain a quote from the teacher, if possible. Obtain a quote from the child. Does the child have aspirations to attend higher education or a trade school, what do they want to "be" when they grow up. Include historical information if it's pertinent to current educational status, i.e. due to not attending school on a regular basis in the birth home the child is behind academically. Provide child's academic history, i.e. number of schools attended, and performance. For pre-school aged children, indicate if the child attends child care or a pre-school, and if so, how they interact with their peers and adults, is the child developmentally on target, any concerns expressed by the placement provider and/or physician, etc.)

**Health:**

**(Indicate the status of the child's PHYSICAL, MENTAL and DEVELOPMENTAL health. List all diagnosis/prognosis and all medications currently prescribed. What treatments, including counseling, physical therapy, etc., are being completed now and will be needed in the future. Does the child have any special equipment such as glasses, braces, wheelchair, hearing aid, etc? Will the child be able to live independently as an adult, if not, what living arrangements will be needed? Does the child have asthma, allergies, dental problems, etc? List any past hospitalizations that are PERTINENT to child's current condition. Provide information regarding the child's birth, i.e. was it a normal, full term delivery, was the child born premature, if so, how premature, were there any health problems at the time of birth, what were they, have they been resolved, any long term affects? Indicate the time of birth, length, weight, if they were breast-fed. List any health concerns/diagnosis of birth family members if PERTINENT to the child's current or future development, such as heart problems, high blood pressure, diabetes, HIV, sickle cell anemia, etc. Do NOT indicate child is current on all immunizations, unless they are not and then list why – all CD children SHOULD be current, so there is no need to indicate as such.)**

**Significant Relationships:**

**(Identify, by first name only, ALL of the child's siblings, their current placement, if we are recruiting for them together or separately, current contact between the siblings and what future contact should look like after an adoption occurs. Also include any other person (mentor, foster parent, birth relative, pets) for which the child should maintain contact with after an adoption occurs. Describe the current relationship and how the child feels about each person who they have a significant relationship with. If CD is not recruiting for siblings to be placed together, state why. Remember, siblings cannot be separated for purposes of adoption unless a sibling split has been approved by the Regional Director. Also, review court orders to determine if a Judge/Commissioner has ordered recruitment for the children together and/or separately.)**

**Special Considerations:**

**(How does the child feel about adoption and what does the child say about adoption? What services will the child and family need to make a successful transition into an adoptive family? What type of family does the worker/placement provider/therapist envision for the child and why?**

**Should there be one parent, two parents, and other siblings, older or younger? Always tell why. What type of family does the child envision for himself? List any other special considerations that you as the worker think will make a successful adoption.)**

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**Records Available for Review (once family is selected as the child's adoptive family):**

Psychological: \_\_\_yes \_\_\_no  
Psychiatric: \_\_\_yes \_\_\_no  
Social History: \_\_\_yes \_\_\_no  
School Records: \_\_\_yes \_\_\_no  
Other (identify): \_\_\_yes \_\_\_no

**Legal Status:**

**(Indicate if the child is legally free for adoption, i.e. termination of parental rights has been granted and is not under appeal, and if the child is in the custody of CD or the custody of a relative – do not use the terms “legal status one or legal status three” those are CD internal terms and no one else understands them.)**

**Subsidy:**

Please contact the adoption specialist for more information.

Prepared by:

\_\_\_\_\_  
Children's Service Worker, date

Approved by:

\_\_\_\_\_  
Children's Service Supervisor, date

Reviewed by:

\_\_\_\_\_  
Prospective Adoptive Parent, date

\_\_\_\_\_  
Prospective Adoptive Parent, date

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[CD04-73](#), [CD06-47](#)

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[CD08-77](#), CD16-11

## **27.4 Special Considerations in Adoption Planning**

The following topics require special consideration when adoption becomes the permanent plan for a child.

### **27.4.1 Foster Parent Preference and First Consideration for Placement**

According to Missouri Statute 453.070, RSMo (#7): “Any adult person or persons over the age of eighteen, who, as foster parent or parents, have cared for a foster child continuously for a period of nine months or more and bonding has occurred as evidenced by the positive emotional and physical interaction between the foster parent and child, may apply to such authorized agency for the placement of such child with them for the purpose of adoption if the child is eligible for adoption. The agency and court shall give preference and first consideration for adoptive placements to foster parents. However, the final determination of the propriety of the adoption of such foster child shall be within the sole discretion of the court.”

In addition, RSMo 210.566 states: “If a foster child becomes free for adoption and the foster parents desire to adopt the child, they shall inform the caseworker within sixty (60) days of the caseworker’s initial query. If they choose not to pursue adoption, foster parents shall make every effort to support and encourage the child’s placement in a permanent home, including but not limited to providing information on the history and care needs of the child and accommodating transitional visitation.”

The Division implements this requirement when the child is legally available for adoption or when it appears very likely the child will be legally available for adoption by assessing the interest and capacity of the present family to adopt the child. Additionally, it is important to note that neither the Division nor the statute provides a guarantee that the present resource provider family will be approved or granted the right to adopt the child in their care. As in any adoption, only the juvenile court has the final authority to approve the adoption of a specific child by a specific family.

During the staffing process the worker/team making adoption plans for a child should consider the foster parents' capacity to meet the child's long-term needs through adoption prior to considering other adoptive families.

In making the selection of an adoptive family, consideration must be given to all of the child's current and future needs. Since adoption is a lifetime commitment for both the family and the child, attention must be given to assessing the many issues involved in meeting the child's needs and the ability of a prospective adoptive family to meet those needs.

In assessing resource provider families who currently have the child in care, the Division will assess the following factors:

- The length of time the child has been in the family's care
- The attachment of the child to the family and the ability of the child to make new attachments
- The age of the child at placement with the specific family
- The child's medical, educational, emotional, social, cultural identity and the family's demonstration of meeting these needs as a predictor for successful parenting throughout the child's growth to adulthood
- The family's understanding of the purpose and meaning of the adoptive relationship
- The child's desire to be adopted by the specific family
- The child's acceptance as a member of the immediate family and understanding of the child's role in the extended family
- The child's assimilation into the family, including the family's ability to encourage and preserve the child's cultural identity and religious background
- Whether the child has siblings that will need placement with the child
- The need for continued contact (after adoption) with siblings, other relatives/kin and significant others
- The family's acceptance of legal risk
- The child's unique parenting needs

#### **27.4.1.1 Informing the Current Resource Family of Adoption Privileges**

1. When adoption becomes the permanency goal, the worker shall inform the current resource family of:
  - A. The nine month preference statute and placement selection policies
  - B. The required completion of an adoptive family assessment

C. The required filing of the adoption petition within 90 days of the Division's recommendation/approval for the family to adopt the child

D. The Division's willingness and desire that they have full opportunity to express their interest in adoption and to provide assistance in reaching this decision

E. The range of factors that are assessed in determining their capacity to parent the child

F. The availability of an adoption subsidy to assist in meeting the immediate and long-term costs of the child's needs

G. The child's right, after age 18 to file a request with the court granting the adoptee to obtain identifying information about the biological parents or adult biological siblings

H. Their right, legal guardian's, and the child's right, at age 18, to secure non-identifying information regarding the biological parents and siblings via completion of CS-50

I. The child's right to register with the Adoption Information Registry via CD-51a at age 18 if he/she wishes to indicate a desire to be contacted by the biological parents or adult biological siblings

J. The Family Support Team may serve as an Adoption Staffing if the only family being considered is the current placement providers. Use of a formal staffing team is still required if recommended by the Family Support Team or Regional Director.

If the resource provider elects to adopt the child, they will not be a member of the staffing team. When the resource parent chooses not to pursue adoption, they shall make every effort to support and encourage the child's placement in a permanent home, including but not limited to providing information on the history and care needs of the child, accommodating transitional visitation and participating in the Adoption Staffing as a mandatory team member.

Confirm the family's interest in adoption within seven (7) days of explaining the permanent plan. If the family is not interested or appropriate, seek another adoptive family to achieve permanency. If interested, refer the family for adoptive application and family assessment to adoption specialist.

Record any factors that resulted in the decision that the current resource family is appropriate as an adoptive parent within five (5) working days of decision.

### **27.4.2 Considerations in the Selection of an Adoptive Family**

The Division's goal, in fulfilling its commitment to a child who is available for adoption, is to locate and place the child with a family that can best provide permanency for the child. This goal should be achieved within the shortest possible time from entry into out-of-home care and/or the decision that the child is available for adoption. Meeting the child's needs includes basic respect for his/her emotional, health, educational, and social needs, and integrating the cultural identity and religious background of the child. The Child's Summary for Adoption shall be completed for any child for whom active recruitment is required to locate a prospective adoptive family. Information may be gathered from the current foster/kinship/relative provider or other professional team members if needed. Families selected must demonstrate in various ways their ability to meet these needs and must have an approved adoptive family assessment.

Related Subject: [Section 6, Chapter 3, Resource Family Assessment and Licensing Process](#)

The Division, in expressing its responsibility for protection of the child and expertise in the practice of child placement, must make a decision that a specific family will be most likely to best meet the needs of the child. Adoption is different in the sense that the child arrives as a member of the family in a different manner. Thus, placement selection must be a carefully considered decision. To aid in this, an Adoption Staffing Team is used. This process is mandatory for a child being placed with a new family; however it is an optional process for the selection of the current resource provider family as the adoptive parent, unless required by the Family Support Team or recommended by the Regional Director or designee, and then must be completed.

### **27.4.3 Sibling Preference/Consideration**

The sibling relationship is unique and should be fostered in its own right (Youth Leadership Advisory Team, 2002). The sibling relationship in placement can serve as a source of safety, security and promote a sense of well-being and should be considered a priority when considering permanency through adoption. Siblings should be recruited for placement together unless a determination has been made that placement together is not in the best interest of the children.

When considering permanency through adoption for a sibling group it is important to consider the preservation of sibling relationships and bond and understand that siblings placed together can provide support and healing during a time of transition and change.

### **Role of the Family Support Team in Sibling Placements**

The Family Support Team should continually review placements of siblings and determine whether sibling separation is in the best interest of the child. When making such determinations the Family Support Team should consider the age and developmental needs of each child, their attachment and emotional bond to one another and the effects separation will have on the siblings. Separations may result due to the following:

- A child has special needs for therapeutic services, which may not be available in the proposed sibling placement
- A child has inflicted physical, sexual, or emotional abuse on a sibling
- Court ordered separation
- Half-sibling placed with biological parent/relative
- Large group of siblings are placed with two relatives and contact can be maintained

When a Family Support Team determines that a sibling group cannot reside in the same household, the case may be referred for a sibling bonding assessment to assist the team in understanding the specific needs of the children and allow additional information to be considered before referring the case for a Sibling Separation Administrative Review. If a sibling bonding assessment is completed and recommends that the siblings should remain together every effort should be taken to recruit for an adoptive placement that will accommodate the sibling placement. If the bonding assessment reflects that the siblings may be separated for adoptive placement the case should be referred for a Sibling Separation Administrative Review in order to obtain approval to separate siblings and recruit for adoptive resources for the siblings separately.

### **Sibling Administrative Review**

The Circuit Manager and appropriate regional staff will conduct a Sibling Separation Administrative Review when a Family Support Team has recommended separation of siblings for the purpose of adoption. The Administrative Review Team shall take into consideration the specific needs of each individual child and should review all pertinent information, including therapy reports, the sibling bonding assessment (if completed) and recommendations from the Family Support Team.

If the outcome of the Administrative Review is to deny separation of siblings, recommendations should be made by the Administrative Review Team regarding the placement of siblings together. The Children's Division should continue to

recruit for the siblings as a group. Documentation of the Administrative Review should be placed in the Child's section of the record.

If the outcome of the Administrative Review is to approve the separation of siblings, the Children's Division may recruit for separate adoptive resources for the children. Documentation of the Administrative Review should be placed in the Child's section of the record.

#### 27.4.4 Special Needs Children

Section 453, RSMo, defines a special needs child as any child in the custody of the Children's Division, Division of Youth Services, Department of Mental Health or a Missouri licensed child-placing agency and who meets one of the following conditions:

- Minority parentage
- Handicapping condition - mental, physical or emotional
- Member of a sibling group - two or more brothers and/or sisters placed in the same adoptive home
- Guarded prognosis - possible future problems related to the child's condition or status at the time of adoptive placement
- Is over five years of age, without any of the above characteristics

Children who meet the criteria for special needs may qualify for adoption subsidy.

Related Subject: Section 4, Chapter 30 Subsidizing an Adoption/Legal Guardianship
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#### 27.4.5 Legal Risk Placements

Children in the custody of the Children's Division, with a goal of adoption, yet not legally free for adoption, pose a legal risk to their potential adoptive parents. Circumstances which lead to a legal risk include, but are not necessarily limited to, the following:

- The plan is adoption, but parental rights for one or all of the parents have not been terminated.
- Parental rights have been terminated by the court of jurisdiction and parent(s) have appealed the decision to an appellate court.

Related Subject: Section 4, Chapter 26 Termination of Parental Rights

- Plan for publication is in process but not yet accomplished.
- Parents have signed voluntary consents to adoption but the court has not legally terminated parental rights.

The family accepting the child(ren) as a legal risk placement must understand that the goal of adoption may not be obtained and/or the child(ren) may be returned to the home of the parents.

Whatever the circumstances, it is imperative the prospective adoptive parents be provided the Legal Risk Statement, CD-191, describing clearly the legal risk involved with the child, which would need to be resolved prior to the adoption becoming finalized. The prospective adoptive parents shall be required to sign and date the Legal Risk Statement, CD-191.

If parental rights have not been terminated, the prospective adoptive parents must be licensed as foster parents. Both the child and parents are eligible for foster care services.

#### **27.4.6 Cross Cultural/Cross Racial Adoptive Placements**

We know that our cultural diversity influences our view of the world as well as the world's perception of who we are. We also know that some differences among people are easily seen while others are subtle. In order to ensure consistency in the child's day-to-day life, to support the development of a positive self-image, increase feelings of security and reduce feelings of isolation, a child should be placed in a home that respects the child's cultural identity and can best meet the individualized needs of the child.

In making the selection of an adoptive family, consideration must be given to all the child's current and future needs. Since adoption is a lifetime commitment for both the family and the child, attention must be given to assessing the many issues involved in meeting the child's needs and the ability of a prospective family to meet those needs.

Once this match has occurred, the placement, if not with the present foster family, should be made as soon as possible. The child's record must clearly document the staffings, administrative reviews and Children's Service Worker's efforts to find an appropriately matched adoptive home for the child as well as documentation as to the reasons a particular home was selected.

*Public Law 104-188, Section 1808, 110 Stat. 1903-1904 states:*

“(18) not later than January 1, 1997, provides that **neither** the State nor any other entity in the State that receives funds from the Federal Government and is involved in adoption or foster care placements may:

“(A) deny to 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

“(B) 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.”

*Missouri Statute, Section 453.005.3 RSMo states:*

The race or ethnicity of the adoptive child, the child's biological parents, or the prospective adoptive parents shall not be a consideration when determining the best interests of the child, the welfare of a child, the suitability and assessment of prospective adoptive parents, or the home of the prospective adoptive parents in adoptive placements.

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## **27.5 Physical/Psychological Evaluation Prior To Placing A Child For Adoption**

Within the preceding six (6) months of a child's placement, a child shall have had:

1. Comprehensive medical examination;
2. Dental examination (for children three (3) or older); and
3. Psychological examination/evaluation beginning at least at the age of five (5). A psychological evaluation shall be conducted on children younger than five (5) if warranted by background information or developmental concerns.

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