

**The Virginia Departments of
Social Services and Juvenile Justice**

JOINT GUIDANCE

*Pertaining to the
Memorandum of Agreement between the
Virginia Departments of
Social Services and Juvenile Justice*

*Re: Children in Foster Care Committed to
the Department of Juvenile Justice
(with a projected release date
prior to the child's 18th birthday)*

DECEMBER 2015

TABLE OF CONTENTS

Table of Contents	0
1.1 Introduction.....	3
1.1.1 Background.....	3
1.1.2 DSS/DJJ Memorandum of Agreement.....	3
1.1.3 Purpose.....	3
1.1.4 Scope	3
1.1.5 DSS	4
1.1.6 DJJ.....	5
1.1.7 Continued Efforts to Achieve Permanency for Foster Care Children Who Have Been Committed.....	6
2.1 Procedures: Family Partnership Meetings	8
2.1.1 Using Family Partnership Meetings.....	9
2.1.2 Stages of a Family Partnership Meeting	11
2.2 Procedures: Responsibilities Prior to Commitment	12
2.2.1 LDSS Procedures.....	13
2.2.2 DJJ Procedures	13
2.3 Procedures: Day of Commitment.....	13
2.3.1 LDSS Procedures.....	13
2.3.2 Collaborative Responsibilities.....	14
2.3.3 DJJ Procedures	14
2.4 Procedures: Immediately Following Commitment	14
2.4.1 LDSS Procedures.....	14
2.4.2 DJJ Procedures	16
2.4.3 Collaborative Procedures	16
2.5 Procedures: During Commitment	17
2.5.1 LDSS Procedures.....	17
2.5.2 DJJ Procedures	18
2.5.3 Collaborative Procedures	18
2.6 Procedures during Commitment – Family Partnership Meetings and Release Planning	19
2.6.1 LDSS Procedures.....	19
2.6.2 DJJ Procedures	20

2.6.3	Six (6) month Family Partnership Meeting	20
2.6.4	Ninety (90) Day Family Partnership Meeting	22
2.6.5	Comprehensive Re-entry Case Plan.....	23
2.6.6	Conference Call Conducted Thirty (30) Days Prior to Release	24
2.6.7	Alternative arrangements for child’s custody upon release from commitment.....	25
2.6.8	Special Populations	25
2.6.9	Parole Planning	25
2.7	Procedures: Re-Enrollment Planning	26
2.7.1	Purpose of the re-enrollment process.....	26
2.7.2	The Re-enrollment Plan	27
2.7.3	The Re-enrollment Process.....	27
2.7.4	LDSS Procedures	28
2.8	Procedures: Upon Release	28
2.8.1	LDSS Procedures.....	28
2.8.2	DJJ Procedures	29
Appendices	30
	Appendix A: CSA Guidance for Accessing Services and Funding for DSS/DJJ Children.....	31
	Appendix B: DSS Procedure for Requesting Reimbursement for the Provision of Case Management for DSS/DJJ Children	34
	Appendix C: Facilitating Video Visitation with the JCCs for DSS/DJJ Children	36
	Appendix D: Guidance for Professional Visits to a JCC.....	38
	Appendix E: Sex Offender Safety Plans.....	40
	Appendix F: DSS/DJJ Matrix	41

1.1 INTRODUCTION

1.1.1 BACKGROUND

The Virginia Department of Social Services (DSS) and the Virginia Department of Juvenile Justice (DJJ) have identified a gap in the continuum of services for children in foster care who are committed to DJJ and have worked with stakeholders to identify solutions. Guidance to local departments of social services (LDSS) and DJJ personnel for implementing these practices is provided in this document.

1.1.2 DSS/DJJ MEMORANDUM OF AGREEMENT

DSS and DJJ entered into a memorandum of agreement (DSS/DJJ MOA), effective August 31, 2015, to identify the roles and responsibilities of the LDSSs and DJJ to serve the best interest of children who are committed to DJJ and who were in the custody of LDSS immediately prior to commitment. Specifically, the DSS/DJJ MOA is intended to provide instruction and guidance to the agencies, for the LDSS and DJJ to implement for case supervision and management purposes for this population of children related to the language in § [16.1-293](#) of the *Code of Virginia* which requires LDSS and DJJ to “work cooperatively through the duration of the person’s commitment.”

1.1.3 PURPOSE

DSS and DJJ have identified a gap in the continuum of services for children in foster care who are committed to DJJ and have worked with stakeholders to identify solutions. Guidance on implementing the identified solutions is provided in this document.

This guidance identifies the roles and responsibilities of the LDSS and DJJ to serve the best interests of children who are committed to DJJ who were in the custody of the LDSS immediately prior to commitment.

1.1.4 SCOPE

The DSS/DJJ MOA applies to guidance to the LDSSs and the procedures applicable to DJJ for case management of children prior to, during, and following commitment to DJJ if the children in the custody of the LDSS prior to commitment and will be under the age of eighteen (18) at the time of release from commitment. The DSS/DJJ MOA applies for the duration of commitment to DJJ, regardless of the direct care placement facility, through the child’s release from commitment and during the child’s return to the community. DJJ may contract with outside entities to conduct assessments of or to provide treatment to or supervision of children committed to DJJ as required under the DSS/DJJ MOA.

1.1.5 DSS

The Commonwealth has a state-supervised and locally-administered social services system. DSS is designated by the *Code of Virginia* to provide oversight and guidance to the 120 LDSSs with the provision of social services as defined in § [63.2-100](#) of the *Code of Virginia*.

DSS's mission is for people to help people triumph over poverty, abuse and neglect to shape strong futures for themselves, their families, and communities. Its vision is for a Commonwealth in which individuals and families have access to adequate, affordable, high-quality human/social services that enable them to be the best they can.

Family Engagement

DSS emphasizes the importance of family engagement for social-service involved children. Family engagement is partnering with the family to make well-informed decisions about their child's safety, permanent home, lifelong connections, and well-being. It involves engaging the child's birth parents, prior custodians, and family members, as well as other community members and adults who are significant to the child and family, consistent with the child's best interests. It is based on open communication, mutual respect, and honesty.

Family engagement involves notifying relatives that the child is or will be placed in foster care, searching for extended family and community networks, aggressively pursuing leads, discussing roles and resources the family members and significant adults can provide, engaging them in the child's life, and establishing permanent supports and lifelong connections for the child.

Practice Principles for DSS

Three fundamental principles in Virginia's Children's Services System Practice Model provide the philosophical basis and guide practice for decision making while engaging children and families:

- First, we believe in family and child-driven practice.
 - Children and families will be treated with dignity and respect. The voices of children and parents will be heard, valued, and considered in the decision making regarding safety, permanency, and well-being as well as in service and educational planning and in placement decisions. Each individual's right to self-determination will be respected within the limits of established community standards and laws.
 - Family members are the experts about their own families. It is our responsibility to understand children and families within the context of their own family rules, traditions, history, and culture.
 - Children have a right to connections with their biological family and other caring adults with whom they have developed emotional ties.
 - We engage families in a deliberate manner. Through collaboration with families, we develop and implement creative, individual solutions that build on their strengths to

meet their needs. Engagement is the primary door through which we help children and families make positive changes.

- Second, we believe that all children need and deserve a permanent family.
 - Lifelong family connections are crucial for children and adults. It is our responsibility to promote and preserve kinship, sibling, and community connections for each child. We value past, present, and future relationships that consider the child’s hopes and wishes.
 - Permanency is best achieved through a legal relationship such as parental custody, adoption, kinship care, or guardianship. Placement stability is not permanency.
- Third, we believe in partnering with others to support child and family success in a system that is family-focused, child-centered, and community-based.
 - We take responsibility for open communication, accountability, and transparency at all levels of our system and across all agencies.
 - Community support is crucial for families in raising children.

1.1.6 DJJ

DJJ is the state agency designated by the *Code of Virginia* to provide supervision and treatment to children who have been committed to DJJ by a juvenile and domestic relations district court or a circuit court.

DJJ’s mission is to protect the public by preparing court-involved youth to be successful citizens. DJJ is committed to excellence in public safety by providing effective interventions that improve the lives of youth, strengthening both families and communities within the Commonwealth.

Court Services Units (CSUs)

In the juvenile justice system, there are thirty-four (34) CSUs throughout the Commonwealth. CSUs primarily provide intake, probation, parole, and case management services; conduct social history investigations; and prepare reports for the courts. Two CSUs are locally operated; the remaining are operated by DJJ. All CSUs are required to comply with the regulations found in [Chapter 150 of the Virginia Administrative Code \(6VAC35-150\)](#). All DJJ operated CSUs are also required to comply with procedures issued by DJJ. Locally-operated CSUs generally choose to adopt procedures issued by DJJ but compliance is discretionary.

Juvenile Correctional Centers (JCCs)

DJJ also operates two (2) JCCs, one in Chesterfield County¹ and one in Powhatan County.² The JCCs are operated by DJJ and only house delinquent children who have been adjudicated guilty or convicted of an offense(s) on which the court committed them to DJJ.³

¹ Bon Air Juvenile Correctional Center located at 1900 Chatsworth Avenue, Richmond, Virginia 23235.

² Beaumont Juvenile Correctional Center located at 3500 Beaumont Road, Beaumont, Virginia 23014.

Secure Juvenile Detention Centers (JDCs)

JDCs are local or regional secure residential facilities that house delinquent children both pre-dispositionally (prior to their trial/adjudication)⁴ and post-dispositionally (after a disposition/sentence).⁵ There are twenty-four (24) JDCs operating throughout the Commonwealth.

DJJ, in enhancing the continuum of programs for committed persons, contracts with some JDCs for designated units for Community Placement Programs (CPPs). CPPs are highly structured, residential programs where committed persons are placed closer to their home communities in smaller settings to facilitate an easier transition after release from commitment. The target persons for CPPs are males between sixteen (16) and twenty (20) years of age with assigned length of stay of twelve (12) months or less.

DJJ also contracts with some JDCs for Detention Re-entry beds for committed persons, allowing them to transition back to their communities thirty (30) to ninety (90) days before release. Persons in detention re-entry are housed with the rest of the JDC population instead of in a separate unit. The programs facilitate increased visitation with families and allow for the initiation of services for parole planning with the assigned CSU parole officer.

Direct Care

DJJ refers to the entire period of a child's commitment as "direct care;" persons in CPPs and Detention Re-entry remain committed and are in direct care. Persons ordered to a JDC post-dispositionally are not in direct care and are the locality's responsibility.

1.1.7 CONTINUED EFFORTS TO ACHIEVE PERMANENCY FOR FOSTER CARE CHILDREN WHO HAVE BEEN COMMITTED

In the event that a child in foster care is committed, efforts to achieve permanency are not suspended. Regular contact with the child, the prospective future custodian, and DJJ professionals ensures that the LDSS can support appropriate ongoing visitation and services to

³ There are two types of commitments to DJJ, determinate and indeterminate. To be indeterminately committed to DJJ, a person must be eleven (11) years of age or older and adjudicated delinquent or convicted of a felony offense, a Class 1 misdemeanor and a prior felony, or four Class 1 misdemeanors that were not part of a common act, transaction, or scheme. For indeterminately committed person, the projected length of stay (LOS) is calculated by guidelines established by the Board of Juvenile Justice. A child's actual release date is determined by DJJ. To be indeterminately committed, a person must be fourteen (14), have been adjudicated delinquent or convicted of a felony offense and have met other statutory criteria. The court orders the period of commitment and determines the child's actual release date. Children who receive determinate commitments are called "serious offenders."

⁴ Pre-dispositional detention can be ordered by a judge, intake officer, or magistrate.

⁵ Post-dispositional detention may be ordered only by a judge for up to 30 days without programs. Nineteen (19) JDCs operate post-dispositional detention programs where children may be housed for up to six (6) months and twelve (12) months for certain offenses.

the family, relatives, and/or prospective foster or adoptive family as determined by the child's foster care goal and concurrent goal⁶ at the time of commitment.

Visitation

Efforts to maintain contact with the parents or prior custodians, relatives, and/or prospective foster or adoptive family in accordance with the needs of the child shall continue as soon as possible after the child is committed. The service worker shall encourage visitation and arrange with the parent(s), relatives, and/or prospective foster or adoptive family a mutually agreeable plan for visitation and other communication such as phone calls, email, and letters in accordance with the rules of the direct care facility.

Frequent and meaningful visitations:

- Maintain and improve the parent and child relationship which facilitates permanency.
- Are the principal and often only means of maintaining, improving, or developing the child's relationship with parents, relatives or foster or adoptive parents.
- Provide the opportunity for parents or relatives to improve their parenting skills and to demonstrate their ability to care for the child.
- Provide the service worker the opportunity to observe and to evaluate the strengths and weaknesses of the parent and child relationship and the reactions of the child and to gather information about the level of commitment of the parent to assist the service worker in making decisions on the most appropriate permanent plan for the child.

Referral for services

The service worker is responsible for referring the parents and/or relatives to appropriate services identified through conducting a comprehensive child and family assessment. If an assessment has been completed and a service plan was developed prior to the child being committed, services to meet the needs of the parents and/or relatives should continue to be provided. If this has not occurred, then an assessment should be completed and a service plan developed for the child and family.

Services should be provided to the family while the child is in direct care in order to address the issues that resulted in foster care placement and to expedite a timely exit to a permanent family.

Appendix A provides guidance from CSA on the process for accessing CSA service and funding to be utilized for these children.

⁶ Concurrent planning is a sequential, structured approach to case management which requires working towards family reunification while, at the same time, establishing and working towards an alternative permanency plan.

2.1 PROCEDURES: FAMILY PARTNERSHIP MEETINGS

In Virginia several models of teaming are used to engage children and families as partners in shared decision making. One such model is Family Partnership Meetings held by the LDSS when there is change in placement or custody. The meetings take a strength-based approach and use an objective facilitator to facilitate the meeting and identify the strengths of the child and the family. Families, professionals, and other team members have the opportunity to work together in planning, coordinating, and decision making. Team members take responsibility for contributing to the family's outcomes and effective and functional cooperation working toward addressing safety, permanence, and well-being for the child. In Family Partnership Meetings goals are identified for the child and the family and other family members who may be a support or placement option.

The use of teaming in Family Partnership Meetings incorporates a common set of values and goals, including:

- Achieving safety, permanency, and well-being for the child;
- Engaging the family and its natural, informal, and community supports;
- Building upon the strengths of the child and family;
- Identifying the needs of the child and family;
- Sharing decision making; and
- Developing the service plan, ensuring appropriate services and supports are provided, and assessing progress and making adjustments over time.

Values and key principles of effective teaming

Some key principles of effective teaming in Family Partnership Meetings:

- A group of committed persons, both formal and informal supports, come together to form a working team to collaborate with the child and family. Team members have sufficient knowledge, skills, cultural awareness, authority to act, flexibility to respond to specific needs, and the time necessary to work effectively with the child and family.
- The child has a strong voice on who participates with the team, especially the child transitioning from foster care to self-sufficiency, so that significant adults are active in providing permanent, lifelong connections as the child leaves foster care.
- The language, culture, family beliefs, traditions, and customs of the child and family are identified, valued, and addressed in culturally appropriate ways via special accommodations in the engagement, assessment, planning, and service delivery processes.
- The child, parents, family members, and caretakers are active, ongoing participants with the team. They each have a significant role, voice, and influence in shaping decisions made about child and family strengths and needs, goals, supports, and services.

- Everyone on the team has a voice in expressing their perspective on child and family strengths, needs, supports, and services.
- Conflicts are discussed and resolved by focusing on the specific needs of the child and family.
- The child, family, and team collaborate to develop meaningful service plans that address the child's and family's needs and enhance their strengths.
- The team monitors the status, progress, and effectiveness of interventions, making adjustments to the service plan when needed.

The teaming process and its membership evolve over time as the needs of the child and family change.

2.1.1 USING FAMILY PARTNERSHIP MEETINGS

A Family Partnership Meeting is a team approach for partnering with family members and other persons identified as potential supports by the family in decision making throughout the family's involvement with the child welfare system. The team is facilitated by a trained individual who is not the service worker for the child or family. It builds upon the strengths of the child, family, and community to ensure safety, a permanent family, and lifelong connections for the child.

The Family Partnership Meeting should include birth parents, child, other significant players identified by the birth parents and/or child, and neighborhood-based community representatives.

Each Family Partnership Meeting convened at the critical decision points after a child's removal should include all the team members invited to previous meetings and should include the foster and/or adoptive parents of the child, so that the birth-foster parent, legal guardian or foster parent-adoptive parent or birth-foster-adoptive parent relationship can be initiated and/or strengthened and expectations of all parties can be clarified.

Participants and their respective roles in the Family Partnership Meeting are described below:

Facilitator

This individual is trained to lead the group through a solution-focused process. The Family Partnership Meeting is facilitated by a trained individual who is not the service worker for the child or family. The facilitator is responsible for keeping the group focused and moving through the decision making process, allowing family members to actively participate. The facilitator ensures the voices of parents and child are heard.

The facilitator communicates with the service worker who is working with the child or family to identify any potential emotional or physical safety concerns that may impact the quality of the

meeting. When the child is present, the facilitator remains aware of his or her well-being, promotes a safe and protective environment, and translates for the child, when needed.

At the end of the meeting, the facilitator provides a summary report to participants outlining decisions, action steps, and any follow-up needed.

Birth parents, Adoptive parents, or Custodians

The child's parents or custodians are recognized as the experts on their family's needs and strengths. Their presence and involvement is integral to the meeting. Every effort is made to involve the parents or custodians; however, parents or custodians may choose not to participate. If the parents or custodians are not present at the meeting, efforts made to engage them are to be documented in OASIS.

Service worker connected to the family

The service worker first talks with his or her supervisor to determine whether a Family Partnership Meeting is needed for the child or family. The service worker is responsible for making the referral for a Family Partnership Meeting. The worker relays all relevant information to the facilitator that includes the purpose of the meeting and any potential physical or emotional safety concerns that may impact the meeting and ensures both the maternal and paternal family and all individuals that are involved with the family are invited to the meeting.

The service worker is prepared to provide information to participants about the meeting purpose and provide any information and previous services received by the family. The service worker is responsible for making a decision if absence of consensus or if safety concerns are evident. The worker assesses any safety issues that may potentially come up and communicates those issues to the facilitator. If it is determined that an individual cannot participate due to safety reasons, the worker talks with the facilitator to determine strategies for participation (e.g., conference call, separate meeting). The service worker prepares the family for the meeting by explaining the family engagement process. The service worker also talks with the family to determine whether child care arrangements have been made for the family during the Family Partnership Meeting.

Child

In deciding whether or not a child should participate, the service worker considers the child's developmental and chronological age and the parents' suggestions and concerns and consults with others that have a working knowledge of the child's capacity, such as a therapist or counselor. There is a presumption that older children will always participate unless there is a sound reason for them to be excluded. It is recommended that children who are nine (9) years of age and older participate in Family Partnership Meetings, unless otherwise determined not to be in the child's best interest.

Extended family and non-relative supports

Both maternal and paternal relatives, as well as non-relative supports, are invited by the child, parents, and/or the service worker as supports, to assist, and/or to be a resource. Their

participation is always supported and encouraged. Extended family members are also asked about other individuals involved with the family who may be a potential support.

Current caregivers (kin, foster)

These individuals are also seen as key team members who assist in providing information regarding the child's adjustment, progress, and needs and who assist with developing ideas and reaching a decision.

Service providers

These are persons currently or previously involved with the family who come to the meeting prepared to discuss current or previous services provided to the child and/or family and any current or future recommended service needs.

Guardian ad litem (GAL) and Court Appointed Special Advocate (CASA) volunteers

These court-appointed representatives responsible for representing the child's best interest are invited to the Family Partnership Meeting. GALs and CASA volunteers often have useful information that can help inform the family engagement process. GALs can also give guidance and set parameters around legal issues that may be discussed during the meeting.

Other public agency staff

This group may include home finding, independent living, family preservation staff, adoption staff, adult services staff, benefits workers, or others available to provide expertise/information depending on the purpose of the meeting and the type of Family Partnership Meeting.

Supervisor

The supervisor of the service worker connected to the family is responsible for being knowledgeable of the case. The supervisor should utilize the meeting as an opportunity to assess the strengths of the service worker and identify areas in need of improvement. The supervisor should serve as the expert about the process for accessing various services within the locality.

2.1.2 STAGES OF A FAMILY PARTNERSHIP MEETING

Below are the six (6) stages of a Family Partnership Meeting and the topics to be discussed and decided in each stage:

Introduction

- Purpose and goal;
- Concept of building on strengths;
- Introduction of participants, roles, and relationship to child/family/case;
- Guidelines for meeting; and
- Questions before beginning.

Identify the Situation

- Define the concern(s); and
- Precipitating event/why are we here?

Assess the Situation

- Determine the magnitude of the situation;
- Safety needs;
- Risk concerns;
- Strengths/supports;
- Services involved presently and utilized in the past;
- Past history/stressors;
- Participants' perception of situation; and
- Service worker's recommendation.

Develop Ideas

- Brainstorming ideas to address concern(s) and provide safety and protection; and
- Three categories of brainstorming ideas:
 - Placement/custody,
 - Action(s) to provide safety, and
 - Services to reduce risk.

Reach a Decision

- Safety and protection in the least intrusive/least restrictive manner;
- Action plan developed; and
- Timely linkage to services, priority services need immediate connection.

Recap/Evaluation/Closing

- Everyone knows who will do what, when?
- Questions?
- Follow-up meeting needed?
- Action plan document is produced and shared with participants.

NOTE: The goal is for the team to reach consensus during the decision-making process. However, the public child welfare agency maintains legal responsibility to make a decision if agreement by the full team cannot be achieved or if safety concerns persist. In pursuing consensus by the team, the facilitator will assist the group in moving toward consensus using this framework.

2.2 PROCEDURES: RESPONSIBILITIES PRIOR TO COMMITMENT

2.2.1 LDSS PROCEDURES

As ordered by the court, the LDSS is the child's legal custodian and shall be present at all delinquency court hearings.

2.2.2 DJJ PROCEDURES

1. When the child is known to the court service unit (CSU) (e.g., on active probation or parole supervision with the CSU), DJJ shall request and collect from the LDSS the following documents and information related to the child, as applicable:
 - Certified birth certificate;
 - Education records;
 - Immunization records;
 - A list of current medications;
 - Mental health, psychological, and psychiatric evaluations;
 - Discharge summaries from hospitals and other residential facilities;
 - Foster care plan;
 - Residential placement history; and
 - A copy of the social security card, if available.
2. The above listed documents and information shall also be requested when:
 - There has not been an adjudication but the CSU plans to recommend commitment to DJJ; or
 - There has been an adjudication (e.g., not innocent), but the court has not entered a disposition (e.g., probation or commitment) and the CSU reasonably anticipates a disposition of commitment to DJJ.
3. DJJ shall share the social history report with the LDSS seventy-two (72) hours before the dispositional hearing.

2.3 PROCEDURES: DAY OF COMMITMENT

2.3.1 LDSS PROCEDURES

The child's status changes from foster care to foster care prevention on the date of commitment unless the child's parent's rights have been terminated pursuant to § [16.1-283](#) of the *Code of Virginia*.

The DSS procedure for processing reimbursement for the provision of case management for these children is provided for in Appendix B.

2.3.2 COLLABORATIVE RESPONSIBILITIES

The parties at the child's disposition hearing including, but not limited to, the LDSS, DJJ, and the GAL, shall identify potential dates and times within the next five (5) business days to hold the Family Partnership Meeting, taking into account the availability of the family members.

2.3.3 DJJ PROCEDURES

DJJ shall request that the court include in the Commitment Order a provision that custody is transferred back to the LDSS upon the child's release from commitment. 2.4 Procedures: Immediately Following Commitment

2.4 PROCEDURES: IMMEDIATELY FOLLOWING COMMITMENT

2.4.1 LDSS PROCEDURES

1. The LDSS shall advise the DJJ as to which adults are involved in the child's care in accordance with the child's permanency goal and concurrent permanency goal. The LDSS shall ensure that DJJ has the most current contact information for these individuals.
2. The LDSS shall recommend which adult family members should receive written reports from DJJ.
3. The LDSS shall coordinate the planning of the Family Partnership Meeting,⁷ to be held no later than five (5) business days after the commitment or after becoming aware of the commitment. The meetings shall be scheduled at the JDCs whenever possible, or, if not possible, the child shall be permitted to participate by telephone or video conferencing.

Appendix C provides the process by which LDSS may utilize DJJ's Video Visitation technology to communicate with the JCCs.

4. The LDSS shall hold a Family Partnership Meeting in accordance with guidance set out in the DSS's [Child and Family Services Manual](#) and section 2.1.
 - During this meeting, goals shall be set for the child and other family members who may be a support during commitment or may be a placement option upon release back to the community.
 - The LDSS shall provide the meeting facilitator. Costs associated with the facilitating of the Family Partnership Meeting may be reimbursed through the CSA. Appendix A provides guidance from CSA on the process for accessing CSA service and funding to be utilized for these children.

⁷ See section 2.1 for an overview of Family Partnership Meetings.

- The LDSS foster care worker, the LDSS foster care prevention worker, and the supervising CSU parole officer shall be required to attend.
- The following individuals shall be invited to attend and participate:
 - The GAL;
 - The attorney for the child;
 - The child;
 - The foster parent, if applicable; and
 - The biological or adoptive parents or the current caregivers at the time of placement into foster care, if appropriate.
- Other individuals who are positive influences on the child may be invited to attend. These individuals include extended family and non-relative supports identified by the LDSS and DJJ; the CASA volunteer; and other public agencies and community partners and programs providing services or treatment for the child.
- The following issues shall be discussed and addressed during the Family Partnership Meeting:
 - Expectations of the child during commitment;
 - Identification of family members or other adults who are positive influences in the child's life;
 - The level of support family members and others are willing to provide the child throughout commitment to DJJ;
 - The contact, communication, and visitation plan (e.g., letter writing, in person visits, video conference visits facilitated by DJJ) during commitment;
 - Whether a request to FAPT is necessary to support the family members' and others' efforts to maintain contact for the duration of the commitment (e.g., CSA request for transport/accommodations);⁸
 - How to support the biological or adoptive parents or the current caregivers in continuing to address the safety and risk factors which contributed to the child being committed to DJJ or coming into foster care;
 - Any DJJ rules or procedures the family needs to know about during commitment; and
 - Potential placement options available once the child is returned to the community.
- In addition to the issues identified in this section, the issues identified in section 2.6.3 shall also be discussed during the Family Partnership Meeting for those children with an LOS of six (6) months or less.

⁸ Appendix A provides guidance from CSA on the process for accessing CSA service and funding to be utilized for these children.

2.4.2 DJJ PROCEDURES

1. DJJ shall request and collect from the LDSS the documents enumerated in section 2.2.2, if they have not already been provided, when:
 - The child was not known to the CSU prior to the commitment; or
 - The adjudication and the disposition occur on the same day.
2. DJJ shall provide the LDSS a copy of the social history report upon completion of the report if the social history is completed after the disposition hearing.
3. If the child is unable to attend the Family Partnership Meeting, DJJ shall gather information necessary to conduct the meeting from the child.
4. During the Family Partnership Meeting, the CSU shall provide an overview of the commitment process and the importance of consistent family engagement during commitment.
5. The CSU shall submit the names of any individual identified as an approved visitor (as provided in section 2.4.3 of this agreement) or identified during the Family Partnership Meeting (as provided in section 2.4.1 of this agreement) to the JCC or other direct care placement facility for placement on the facility's approved visitor list.
6. DJJ shall provide any additional information about family members with LDSS.
7. DJJ shall provide the LDSS worker with the procedures and requirements related to visitation of the child in a JCC or other direct care placement facility (e.g., dress code and items allowed within or prohibited from entering the facility). Appendix D provides general guidance for professional visits to JCCs.

2.4.3 COLLABORATIVE PROCEDURES

1. DJJ and the LDSS shall identify the individuals who will be notified of the date, time, and location of the Family Partnership Meeting.
2. The LDSS and DJJ shall identify family members and other individuals who are able to provide the child with support for the duration of the commitment. DJJ shall submit these names as approved visitors with the commitment packet for purposes of visitation. Only the names of individuals shall be submitted on whom both the LDSS and DJJ agree should be authorized to visit. Decisions regarding who is approved for visitation must be made within three (3) business days of the commitment or becoming aware of the commitment.
3. If there is no consensus to include the name of an individual(s) with the commitment packet, the LDSS shall provide the individual's name to the child's assigned counselor/case manager. Requests can be made in person, by telephone, by first class mail, or by electronic

mail. The counselor/case manager shall request a visitor assessment from the assigned CSU probation or parole officer. Following the assessment process, the superintendent may approve a one-time visit or on-going visitation. The LDSS shall be notified of the decision by the counselor/case manager within ten (10) business days of receipt of the request.

2.5 PROCEDURES: DURING COMMITMENT

2.5.1 LDSS PROCEDURES

1. The LDSS shall have monthly contacts with the child.⁹ Face to face, in-person contacts at the JCC or other direct care placement facility shall occur every other month. For the alternating months, the contacts may be conducted using CSU video conference technology. Appendix C provides the process by which LDSS may utilize DJJ's Video Visitation technology to communicate with the JCCs. For guidance on professional visits to the JCCs, please refer to Appendix D.
2. The LDSS shall participate in and provide input for Individualized Education Program (IEP) meetings and shall encourage and assist parents or other person designated as the educational decision maker or standing *in loco parentis* to attend, when appropriate. The LDSS may also assist with finding a surrogate parent for the purpose of participating in the IEP meeting process, when necessary. The LDSS is not authorized to sign the IEP, but may assist with obtaining the required signatures.
3. The LDSS shall be primarily responsible for forwarding information from DJJ to the parent or other person designated as the educational decision-maker or standing *in loco parentis*. LDSS shall notify DJJ of parents or other person designated the educational decision-maker or standing *in loco parentis* who are approved to receive information directly from DJJ.
4. The LDSS may assist the child's support system with transportation to and from the JCC or other direct care placement facility (e.g., for meetings and visitation).

The DSS procedure for processing reimbursement for the provision of case management for these children is provided for in Appendix B.

⁹ Monthly contacts allow consistency with the existing practice for foster care prevention contacts.

2.5.2 DJJ PROCEDURES

1. DJJ shall provide the LDSS written notice of the case-staffing meeting at the child's initial direct care placement facility.¹⁰ DJJ shall schedule the LDSS cases as the first case-staffing meeting of the day.
2. CSU parole officers shall visit the child in-person every ninety (90) days and shall be encouraged to conduct visits jointly with the LDSS. Appendix D provides general guidance for professional visits to JCCs.
3. DJJ shall allow the LDSS visits with children to be confidential unless DJJ determines that a there is a safety or security risk (e.g., the child has threatened aggressive behavior).
4. DJJ shall provide monthly progress reports (either verbally or in writing) to the LDSS and parents or other person standing *in loco parentis*, when appropriate and applicable and consistent with DJJ policies and procedures.
5. DJJ shall communicate with the parents or other person standing *in loco parentis* in accordance with any limitations provided by the LDSS.
6. DJJ shall keep the LDSS apprised of the child's anticipated release date to facilitate the scheduling of Family Partnership Meetings.

2.5.3 COLLABORATIVE PROCEDURES

1. Whenever possible, the supervising CSU parole officer and the LDSS service worker should conduct joint visits with the child at the JCC or other direct care placement facility; however, participation via telephone or CSU video conference technology may be utilized when circumstances require. Appendix C provides the process by which LDSS may utilize DJJ's Video Visitation technology to communicate with the JCCs.
2. The supervising CSU parole officer and the LDSS service worker shall attend the case-staffing meeting at the initial direct care placement facility. However, if they are unable to attend in person, they shall participate by telephone or CSU video conference technology.
3. Notification of any change in the CSU parole officer, foster care prevention worker, or assigned counselor/case manager shall be provided to the other individuals within forty-eight (48) hours of the change.

¹⁰ During a case-staffing meeting, the child's history and evaluation findings (social history, psychological, medical, educational) are reviewed, treatment needs are identified, the length of stay for indeterminately committed children is calculated, and the facility placement is determined.

2.6 PROCEDURES DURING COMMITMENT – FAMILY PARTNERSHIP MEETINGS AND RELEASE PLANNING

2.6.1 LDSS PROCEDURES

1. A Family Partnership Meeting shall be held six (6) months prior to and ninety (90) days prior to the child’s anticipated release date. The LDSS shall take the lead in coordinating the meetings. Meetings shall be located in the community to which the child is anticipated to return, and the child shall be permitted to participate by telephone or CSU video conference technology. Appendix C provides the process by which LDSS may utilize DJJ’s Video Visitation technology to communicate with the JCCs.

Note: When a child’s commitment is six (6) month or less the issues identified within this section along with the issues identified in section 2.4.1 shall be discussed during the Family Partnership Meeting.

- The LDSS and the supervising CSU parole officer shall be required to attend in person. The assigned counselor/case manager may participate by telephone or CSU video conference technology.
 - The following individuals shall be invited to attend and participate:
 - The GAL;
 - The attorney for the child;
 - The child;
 - The foster parent, if applicable; and
 - The biological or adoptive parents or the current caregivers at the time of placement into foster care, if appropriate.
 - Other individuals who are positive influences on the child may be invited to attend. These individuals include extended family and non-relative supports identified by the LDSS and DJJ; the CASA volunteer; and other public agencies, community partners and programs providing services or treatment for the child.
2. LDSS shall file a DC-554, PETITION FOR FOSTER CARE REVIEW HEARING, in accordance with § [16.1-282](#) of the *Code of Virginia* or DC-556, PETITION FOR PERMANENCY PLANNING HEARING, in accordance with § [16.1-282.1](#) of the *Code of Virginia*, as appropriate, to docket the case in the appropriate juvenile and domestic relations district court. The LDSS shall file such petition thirty (30) days prior to the child’s anticipated release date.

2.6.2 DJJ PROCEDURES

1. DJJ shall notify the LDSS when a child has six (6) months remaining until his or her anticipated release date.
2. DJJ shall invite the LDSS to participate in all release planning meetings including, but not limited to, mental health services transition planning meetings and school reenrollment planning meetings, as applicable.

2.6.3 SIX (6) MONTH FAMILY PARTNERSHIP MEETING

1. The following issues shall be discussed and addressed during the six (6) month Family Partnership Meeting:
 - Review the child's behavior and discuss any serious incident reports (SIRs). Issues that will impact the child's LOS should be noted.
 - Review the child's progress with direct care treatment services and note any significant issues that will impact LOS.
 - Identify modified release date, if necessary.
 - Identify and discuss services to be considered for inclusion in the Mental Health Services Transition Plan.
 - Identify and discuss services to be considered in release planning for medical needs.
 - Review progress with visitation, telephone contacts, and written correspondence with the child by family members and non-family supports (not professionals). The following items should be addressed:
 - Discuss frequency of visits;
 - Identify and propose solutions to challenges or barriers to visiting;
 - Discuss the child's feelings/response to visits;
 - Discuss whether visits are positive or negative; and
 - Determine if it is necessary to modify list of family members and non-family supports.
 - Review significant outcomes of collaborative efforts between the direct care placement facility, CSU, and the LDSS and address any issues. Determine the following:
 - Is the child responding favorably?
 - If not, what modifications are necessary?

- Ensure that the LDSS has received copies of all documents provided to the CSU (e.g., quarterly reports) by the direct care placement facility staff.
- Ensure that CSU and direct care placement facility staff have received copies of all documents provided by the LDSS.
- Review re-entry services and placement options to include but not limited to:
 - Family members;
 - Work and Education Release Program;
 - Community Step-down Programs (Community Placement Program, Detention Reentry, etc.);
 - Foster care placement services in accordance with § [63.2-900](#) of the *Code of Virginia*;
 - Foster care services in accordance with § [63.2-905](#) of the *Code of Virginia*;
 - Independent living services in accordance with § [63.2-100](#) of the *Code of Virginia*;
 - Department of Aging and Rehabilitation Services (determine if an assessment is needed); and
 - Any other services or placement options.
- Discuss the status of identifying service provider(s), obtaining services, securing placements, and determine who, the LDSS or DJJ or other designated professional, will be seeking what services and funding.
- Discuss educational, vocational, and employment plans, as applicable. The discussion shall include the following:
 - Current grade and educational status;
 - Review IEP, as applicable;
 - Identify school district/school upon return to community;
 - Community college;
 - Vocational training; and
 - Transportation.
- Review the family's and/or the foster parent's progress and needs. Discuss the following:
 - Involvement in community-based therapy (e.g., therapy for victim of sexual assault/assault); and
 - Determine if additional family support is needed for the child to return home.
- Determine who will transport the child upon release from commitment to the designated placement.
- Review the Comprehensive Re-entry Case Plan (CRCP). Discuss and modify the plan based on Family Partnership Meeting discussions.

- Review parole expectations and communicate any court requirements (e.g., restitution, no contact orders, sex offender registration).
- Discuss parent's or other person standing *in loco parentis* expectations regarding the child returning to the community, if applicable. Task parent or legal guardian with identifying a list of household expectations and rules.
- Discuss child's expectations regarding returning to the community.
- Review all deadlines and timelines (e.g., court hearings, including a foster care FAPT; and Community Policy and Management Team (CPMT) meetings).
- Identify specific tasks and ensure that each task is assigned to a person with a completion due date (to be completed or provide an update via email to each identified party).
- Obtain signatures and disseminate any paperwork that is needed for the above matters.

2.6.4 NINETY (90) DAY FAMILY PARTNERSHIP MEETING

1. The following issues shall be discussed and addressed during the ninety (90) day Family Partnership Meeting:

- Review the child's behavior and discuss any SIRs. Note issues that would affect the child's LOS.
- Review the child's progress with direct care treatment services and note any significant issues that would affect LOS.
- Identify modified release date, if necessary.
- Address any changes in required Mental Health Services Transition Plan.
- Address any change to required medical services.
- Develop a safety plan for children committed to DJJ for sex offenses, if applicable; determine if pre-release counseling services are appropriate. The guideline for sex offender safety plans is provided for in Appendix E.
- Further investigate and/or solidify placement option and identify proposed service provider(s); review expectations and agreements for the CSU parole officer, the LDSS, direct care placement facility, and involved primary family members.
- Review rules of placement with child:
 - If a private residential placement has been secured, review facility rules.

- If the child is to be placed with parent, other person standing *in loco parentis*, or foster parent review household expectations and rules.
- Discuss status of obtaining services and identifying service provider(s), and who, the LDSS or DJJ or other designated professional, will be responsible for seeking which services.
- Require identified service vendors to provide clear parameters as to how re-entry services will be managed and the level of detail and frequency with which progress reports will be sent to DJJ, the LDSS, and parent or legal guardian, as applicable.
- Review educational status and communicate any changes.
- Review vocational plans.
- Discuss required interviews for placements and services (e.g., independent living services, residential placements, and college campus visits), timelines, and transportation.
- Confirm plans for transportation of the child upon release from commitment to placement or family.
- Review all deadlines and timelines (e.g., court hearings, including a foster care review hearing or permanency planning hearing; major offender reviews; release dates; FAPT; and CPMT meetings).
- Obtain signatures and disseminate any paperwork that is needed for the above matters.
- If applicable, review the status of reunification with the family or the new placement with a family member and what assistance (stipend, etc.) will be provided to child or family.
- Schedule a conference call thirty (30) days prior to scheduled release with the assigned counselor/case manager, child, professionals, and family/nonfamily members to conduct a status update of release and release planning and to confirm funding approved for services and placement.

2.6.5 COMPREHENSIVE RE-ENTRY CASE PLAN

DJJ shall notify the LDSS and identified family members of the meeting to further develop the Comprehensive Re-entry Case Plan within sixty (60) days of notification of release from the JCC.

2.6.6 CONFERENCE CALL CONDUCTED THIRTY (30) DAYS PRIOR TO RELEASE

1. A conference call shall be conducted thirty (30) days prior to the child's scheduled release date to review the re-entry plan and the child's progress with services.
2. The following individuals shall participate in the conference call:
 - Assigned counselor/case manager;
 - CSU parole officer;
 - LDSS service worker;
 - Child;
 - Professionals as indicated appropriate in the re-entry plan; and
 - The biological or adoptive parents or the current caregivers at the time of placement into foster care, if appropriate.
3. The following items shall be reviewed and confirmed:
 - Placement;
 - Preliminary School Reenrollment Plan;
 - Approval of funding for services and placement and identified vendor(s);
 - Transportation;
 - LDSS intends to file a DC-554, PETITION FOR FOSTER CARE REVIEW HEARING, or a DC-556, PETITION FOR PERMANENCY PLANNING HEARING, in accordance with section 2.6.1.
 - A thirty (30) day supply of psychotropic medication prescribed by the DJJ psychiatrist or a psychiatrist contracted by DJJ, along with a refill prescription for thirty (30) days, shall be provided upon release, if applicable;
 - A minimum of a two (2) week supply of non-psychotropic medication prescribed by the DJJ physician or a physician contracted by DJJ for chronic diseases or other medical disorders along with a refill prescription for thirty (30) days shall be provided upon release, if applicable; and
 - DJJ shall contact a community psychiatrist and/or physician in an effort to secure all active medications requiring a prescription from a specialist, to ensure continuity in medical care following the child's release, if applicable.

2.6.7 ALTERNATIVE ARRANGEMENTS FOR CHILD'S CUSTODY UPON RELEASE FROM COMMITMENT

In the event that the child was in the custody of the LDSS immediately prior to his commitment to DJJ and has not attained the age of 18 years, the LDSS shall resume custody upon the child's release. DJJ will consult with LDSS ninety (90) days prior to the child's release from commitment on parole supervision concerning return of the child to the locality and the placement of the child (§ 16.1-293).

When the LDSS determines that there is an appropriate alternative arrangement for custody available, the LDSS should hold a Family Partnership Meeting within two (2) weeks of the notification of the child's release. A transition plan must be developed with input from DJJ, the child's parents, the child, and the person who may take custody of the child.

A petition must be filed in order to bring the matter before the court to address the child's custody upon release. The potential alternative custodian should file a petition for custody in order to bring the matter before the court of competent jurisdiction. The LDSS must work as closely with the court as possible so the custody hearing may be as soon as possible after the child's release from DJJ.

An order transferring custody to an appropriate alternative custodian may be issued by the court on the date of the release. If the court transfers custody of the child from the LDSS to the child's prior family or to a relative subject to § 16.1-282 D1 or § 16.1-282.1 A1, the LDSS shall provide at least six (6) months of foster care prevention services based on the identified needs of the child and the custodian.

2.6.8 SPECIAL POPULATIONS

1. Serious offenders are those children committed to DJJ for a determinate period of time and may be released only pursuant to an order of the committing court. Such release occurs either because the duration of the commitment has been completed, or it has been ordered at a judicial review. Judicial reviews are statutorily required at the two (2) year anniversary of commitment and annually thereafter.
2. Family Partnership Meetings shall occur, in accordance with sections 2.6.2 and 2.6.4, six (6) months and ninety (90) days prior to the twenty-four (24) month anniversary and the annual review date in addition to any other identified release dates.
3. A conference call shall be conducted in accordance with section 2.6.4 thirty (30) days prior to the twenty-four (24) month anniversary and the annual review date.

2.6.9 PAROLE PLANNING

1. DJJ shall invite the LDSS and identified family members to participate in all case review and release planning meetings (e.g., mental health services transition planning). The LDSS and

identified family members shall be provided with the scheduled date, time, and location of these meetings.

2. The CSU shall advise the LDSS and the identified family members of the scheduled date, time, and location of the meeting scheduled for the supervising parole officer to review the rules of parole with the child.
3. The CSU shall provide the child, LDSS, and family with a copy of the rules of parole.

2.7 PROCEDURES: RE-ENROLLMENT PLANNING

Nationally approximately 20,000 children age out of the foster care annually. Typically these children have much poorer educational outcomes than their peers. One study found 24.4% of former foster children had no high school diploma or GED, compared to the general population rate at 7.3%.¹¹ The study also reported 81.2% of males had been arrested, while this number from the general population was 17.4%.

Children in foster care can also be very mobile, which can negatively impact their educational attainment. The more changes in school placement a child experiences, the greater the likelihood that there will be gaps in knowledge and missing or incomplete class credit towards high school graduation.

When a child in foster care is committed to a juvenile justice system, there will necessarily be two changes in his or her educational placement: one upon entry into the direct care facility and one upon exit. In order to minimize the impact of these changes as much as possible for the foster care children, the local public school, DJJ personnel, and LDSS service workers will need to work together to complete the re-enrollment process and fill out the necessary forms.

2.7.1 PURPOSE OF THE RE-ENROLLMENT PROCESS

The Board of Education has established [regulations](#)¹² governing the re-enrollment process for individuals committed to DJJ who are enrolled in school at the time of release. The regulations are intended to achieve the following goals:

- Provide timely transfer of information;
- Provide the children (students) with timely enrollment in educational programs upon release;
- Enhance communication and coordination of services to meet the educational needs of children returning to the public school setting; and

¹¹ Courtney, M.E., Dworsky, A., Lee, J.S., Raap, M. (2010). *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Ages 23 and 24*. Chaplin Hall at the University of Chicago. Available at: https://www.chapinhall.org/sites/default/files/Midwest_Study_Age_23_24.pdf .

¹² The regulations are required by § [22.1-17.1](#) of the *Code of Virginia*.

- Create a positive experience for the child as he or she seeks to continue his or her education.

2.7.2 THE RE-ENROLLMENT PLAN

A re-enrollment plan shall be completed for every child who is released from DJJ custody for more than thirty (30) days who is of school attendance age or eligible for special education services

The re-enrollment plan shall include, but not be limited to:

- Child's educational history prior to commitment;
- Child's educational history while in custody of DJJ;
- Child's current status;
- Anticipated dates and timelines for scheduled release;
- Identification of school placement upon release;
- Recommendations for education program and child supports following re-enrollment; and
- Contact info for representatives of DJJ, the school, and the re-enrollment coordinator.

2.7.3 THE RE-ENROLLMENT PROCESS

The transition team (the local public school, the DJJ facility and LDSS workers) should assemble and prepare documents and the scholastic record which support the development of the re-enrollment plan.

Note: A Best Interest Determination (BID) meeting is **not** required if the child is returning to the same geographical location as the school/school division which he or she was attending prior to commitment. However, if the foster care child will be placed in a setting which is not in the same school district as his or her placement prior to commitment, a BID meeting which includes LDSS staff, staff from the previous school, the school for the new placement, and the DJJ facility educational staff, must be conducted to determine whether the child can return to the previous school or if it is in his or her best interest to begin attending school in the new location.

Once a determination has been made about where the child will be attending school, then the next steps of the process can be undertaken.

- The LDSS worker informs the school division of the child's pending release.
- At least 25 days before pending release, the re-enrollment plan is sent to the school division.

- Within ten (10) days of receipt of the materials, the school division should convene the re-enrollment team to review and develop the final plan. Parents and others who have knowledge of the child should be invited to the meeting.
- The plan shall make it possible for the child to enroll and receive instruction in the school district within two (2) days of his or her release.
- After notice of a child's scheduled release, the child may not be suspended or expelled from school programs for the actions for which he/she was committed.

2.7.4 LDSS PROCEDURES

The LDSS shall work collaboratively with the local school division in which the child will be enrolled to ensure a seamless transition for the timely receipt of education. To effectuate this end, the LDSS should be familiar with § [22.1-277.2](#) of the *Code of Virginia* which addresses placement of students in alternative education. Additionally, LDSS should be familiar with the documents and forms used in the re-enrollment process.

Upon being advised by DJJ that a child is being released, the LDSS shall:

- Contact the school division representative (guidance counselor or foster care liaison) and other team members.
- Ensure that all identified participants have been invited to the meeting.
- Understand the roles and responsibilities of all the team members and other professionals involved in the re-enrollment process.
- Verify that the child is receiving weekly counseling sessions as requested, if applicable.
- Verify that records has been requested and sent to the identified school division.
- Monitor the child's educational progress and school attendance.
- Monitor the child's overall transition back to the school.

All documents and forms can be found on the Virginia Department of Education:
http://www.doe.virginia.gov/support/student_family/re-enrollment/

2.8 PROCEDURES: UPON RELEASE

2.8.1 LDSS PROCEDURES

1. Upon the child's release from commitment to DJJ back to foster care, LDSS shall:

- Transport the child to the CSU to meet with the parole officer and to review and sign the rules of parole;
- Ensure the child is re-enrolled in school;

- Ensure the child is re-enrolled in Medicaid;
 - Monitor the placement;
 - Work on the child's permanency goal;
 - Report noncompliance with treatment and services to DJJ as soon as possible, but no later than forty-eight (48) hours; and
 - Ensure that a DC-554, PETITION FOR FOSTER CARE REVIEW HEARING, or a DC-556, PETITION FOR PERMANENCY PLANNING HEARING, has been filed timely with the court.
2. If at the initial hearing, whether a Foster Care Review hearing or a Permanency Planning hearing held by the court after the child is released from commitment from DJJ, the court transfers custody of the child from the LDSS to the child's prior family or to a relative subject to § [16.1-282](#) D1 or § [16.1-282.1](#) A1, the LDSS shall provide at least six (6) months of foster care prevention services based on the identified needs of the child and the custodian.

2.8.2 DJJ PROCEDURES

1. Upon the child's release from the commitment, DJJ shall:
- Provide a thirty (30) day supply of psychotropic medication prescribed by the DJJ psychiatrist or a psychiatrist contracted by DJJ, along with a refill prescription for thirty (30) days, if applicable;
 - Provide a minimum of a two (2) week supply of non-psychotropic medication prescribed by the DJJ physician or a physician contracted by DJJ for chronic diseases or other medical disorders along with a refill prescription for thirty (30) days, if applicable;
 - Contact a community psychiatrist and/or physician in an effort to secure all active medications requiring a prescription from a specialist, to ensure continuity in medical care following the child's release;
 - Meet with the child and LDSS to review and discuss the re-entry plan and review and sign the rules of parole, as applicable;
 - Assist with school re-enrollment, as necessary and applicable;
 - Work with child to develop employable skills;
 - Report noncompliance with treatment and services to LDSS, as soon as practicable, but no later than forty-eight (48) hours; and
 - Provide parole supervision, as applicable.

APPENDICES

Appendix A: CSA Guidance for Accessing Services and Funding for DSS/DJJ Children

Appendix B: DSS Procedure for Requesting Reimbursement for DSS/DJJ Children

Appendix C: Facilitating Video Visitation with the JCCs for DSS/DJJ Children

Appendix D: Guidance for Professional Visits to JCCs

Appendix E: Sex Offender Safety Plans

Appendix F: DSS/DJJ Matrix

APPENDIX A: CSA GUIDANCE FOR ACCESSING SERVICES AND FUNDING FOR DSS/DJJ CHILDREN

Children’s Services Act (CSA) Guidance *pertaining to the:*

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

I. Introduction

The Virginia Departments of Social Services (DSS) and Juvenile Justice (DJJ) have entered into a Memorandum of Agreement (DSS/DJJ MOA) regarding the clarification of agency roles and responsibilities and the provision of services to children under the age of 18 who are committed to DJJ while in foster care placement. The agreement resolves long-standing issues of case management responsibility for children, outlines the process by which service planning will take place, and defines the expectations for local court services unit (CSU), DJJ facility staff, and local department of social services (LDSS) staff.

II. Expectations

The agreement requires that the LDSS and DJJ staff work jointly to determine the most appropriate plan to achieve the identified best outcomes for the child. Although the Office of Children’s Services and the State Executive Council (SEC) which provides oversight to CSA are not parties to the specific agreement, the expectation is that the CSA service and funding process will be utilized for these children as with every other CSA-eligible child and family.

III. Eligibility

Children in the custody of the LDSS and placed in foster care are eligible for services under the CSA (§ [63.2-905](#), § [2.2-5212](#)). The *Code of Virginia* assures that “such sums of funding as shall be sufficient” shall be appropriated by state and local governments to meet the relevant federal mandates, making these children “mandated” for CSA services. (§ [2.2-5211](#))

1. The Code also provides that children who are receiving services to eliminate the need for foster care placement are eligible and “mandated” for CSA funded services. (§ [63.2-905](#), § [2.2-5211](#), § [2.2-5212](#))
2. The children who fall under the DSS/DJJ MOA are eligible and mandated for CSA while in foster care, and once committed to DJJ, are eligible and mandated for CSA under foster care prevention as planning, services, and interventions will be made during the time of the

child's commitment to locate an alternate caregiver to prevent the child's return to long-term DSS custody and foster care placement.

3. The *Code of Virginia* requires that upon release of commitment, the court will take action to return custody of the child to the LDSS. However, the intent of the DSS/DJJ MOA is to provide a mechanism to locate, identify and work with either a parent (if appropriate) or an alternate caregiver with whom the child may be immediately placed following release. The LDSS will work with the court to transfer custody to the identified parent or alternate custodian as soon as soon as possible.
4. Upon placement and/or custody transfer to the parent or alternate custodian, the child will remain eligible and mandated for CSA for a period of not less than six (6) months to ensure services are provided to prevent the child's return to foster care placement.

IV. Family Planning and Assessment Teams; Services; Case Closure

As with any foster care prevention case receiving CSA-funded services, the following steps will be taken:

1. All CSA requirements (e.g., utilization review, administration of the CANS assessment, review by FAPT or alternate Multi-Disciplinary Team (MDT)) will be met.
2. The Individual Family Services Plan (IFSP) shall identify the goal of foster care prevention, strategies and services to be provided to the child and any potential placement resources, including family members, during the child's commitment and after placement with the parent or other alternate custodian.
3. The DSS/DJJ MOA requires the LDSS and DJJ hold jointly-convened Family Partnership Meetings at specific intervals. CSA funds may be used to support the costs of Family Partnership Meetings, including costs associated with facilitation.
4. Policy of the State Executive Council permits the use of Family Partnership Meetings to serve as an alternative Multidisciplinary Team for FAPT if specific provisions are met. Guidelines on the use of Family Partnership Meetings for this purpose may be found at [Guidance for CPMTs Family Engagement.pdf](#).
5. Community Policy and Management Teams (CPMTs) shall authorize funding for services provided under the DSS/DJJ MOA as are provided for any other children and family receiving foster care prevention services.
6. CSA shall continue to hold FAPT/MDT reviews and support service provision until the LDSS closes its case. DSS guidance requires that these cases will remain open for a period of no less than six (6) months following the child's release from DJJ commitment.
7. If no placement resource (including return home) or alternate custodian is identified during the child's commitment, and the child is returned to LDSS foster care placement, the child

will be eligible and mandated for CSA as a foster child until the age of 18. The child will then be eligible and mandated for Independent Living services until the age of 21. (§ [63.2-905.1](#); § [2.2-5211](#), § [2.2-5212](#)).

Questions related to the use of CSA for children and families served under the DSS/DJJ MOA may be directed to Carol Wilson with the Virginia Office of Children's Services at carol.wilson@csa.virginia.gov or (804) 662-9817.

APPENDIX B: DSS PROCEDURE FOR REQUESTING REIMBURSEMENT FOR THE PROVISION OF CASE MANAGEMENT FOR DSS/DJJ CHILDREN

Virginia Department of Social Services Guidance *pertaining to the:*

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

I. Introduction

The Virginia Department of Social Services (DSS) is committed to providing reimbursement for case management services provided when local departments of social services (LDSSs) have foster care children who become subject to the Departments of Social Services and Juvenile Justice' Memorandum of Agreement (DSS/DJJ MOA). The equivalent of the Medicaid case management rate, currently \$326.50 per month, plus travel expense, will be reimbursed to the LDSS through Budget Line (BL) 866, Cost Code 86607 on a quarterly basis. Instructions for requesting reimbursement are:

II. Procedure

The following procedures shall be followed when requesting reimbursement under the DSS/DJJ MOA:

1. When the LDSS becomes aware that commitment is being recommended for a child in foster care who may be subject to the terms of the DSS/DJJ MOA (in foster care immediately prior to commitment) because with an anticipated release from commitment prior to the child's eighteenth (18th) birthday, an email including this information is sent to the Regional Permanency Consultant.
2. In the event that a commitment occurs unexpectedly for a child who is subject to the DSS/DJJ MOA, an email including information about the child and the circumstances of the commitment is sent to the Regional Permanency Consultant at the time of commitment.
3. For all children who are subject to the terms of the DSS/DJJ MOA are committed to DJJ, an email is sent to Em Parente, DSS Foster Care Program Manager, at em.parente@dss.virginia.gov. The email is to include the child's name, commitment date, and estimated length of commitment.
4. Reimbursement requests may be processed on a monthly or quarterly basis, as preferred, but shall be processed on a minimum of a quarterly basis. On a quarterly basis, the LDSS should enter a Budget Request System (BRS) request in BL 866 for **\$386.39** per month which is \$326.50 plus the 15.5% local match. The system will automatically capture the 84.5% of the total amount to be reimbursed. This amount is available for each month the child is in commitment and case management services as described in the DSS/DJJ MOA are provided.

5. Mileage for the LDSS worker to visit the child in a direct care placement facility is also a reimbursement eligible expense. A worksheet for calculating the amount of reimbursement to request (which includes mileage at the state plus the 15.5 % local match) has been provided on the DSS Intranet Site (SPARK) at Family Services/Foster Care/Foster Care Guidance and Procedures/ DSS-DJJ MOA.
6. It is permissible to combine the case management amount and the mileage amount in one BRS. The justification should clearly explain the rationale for the amount requested and/or an email with supporting information can be sent to Em Parente, the DSS Foster Care Program Manager, to provide the justification.
7. The BRS will be reviewed and approved by the DSS Foster Care Program Manager. Once the amount is available in BL 866, the LDSS shall transfer the funds from to BL 855 to offset staffing expenses. LDSS shall include cross-reference numbers on both requests.
8. Case management activities are to be reported in the prevention case which is opened by the LDSS as described in the DSS/DJJ MOA.

Any questions about this procedure can be directed to Em Parente, DSS Foster Care Program Manager, at em.parente@dss.virginia.gov or 804-726-7538.

APPENDIX C: FACILITATING VIDEO VISITATION WITH THE JCCs FOR DSS/DJJ CHILDREN

Virginia Department of Juvenile Justice Guidance *pertaining to the:*

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

The table below provides the steps and responsibilities for facility video visitation with the juvenile correctional centers (JCCs) utilizing the court services units (CSUs) video technology:

DSS	CSU	JCC/Direct Care Facility
Notify assigned probation or parole officer (PO) of video meeting at least 10 days prior to scheduled date	Email JCC counselor/community coordinator to coordinate meeting date w/JCC	Document scheduled date and coordinate location, availability of youth. Email confirmation of location, date and time to PO
	Email confirmation to DSS and JCC	
Confirm reminder notification	48 hours prior to meeting send reminder notification to all parties (JCC, DSS)	Confirm reminder notification
Arrive at designated location at least 10 minutes prior to meeting	PO/designated staff onsite to assist with VIA3 connection 10 minutes prior to meeting	Have youth available in designated area at least 10 minutes prior to scheduled meeting
	Initiate contact with JCC	Accept VIA3 call
	Leave room to allow DSS privacy, if requested	Provide headphones to allow youth privacy. Leave the room but maintain sight supervision as directed by

		SOP
	Contact Tyrone Jackson (tyrone.jackson@djj.virginia.gov ; 804.769.4944) if technical difficulties are encountered	
Document meeting in OASIS	Document meeting in BADGE	Document meeting in log book

APPENDIX D: GUIDANCE FOR PROFESSIONAL VISITS TO A JCC

Virginia Department of Juvenile Justice Guidance *pertaining to the:*

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

I. Introduction

The Virginia Department of Juvenile Justice (DJJ) is committed to fostering consistent communication and contact between children in direct care facilities, their families, their support systems, and their service providers. These relationships are vital to assist children in maintaining strong family and community ties during their commitment and enhancing successful re-entry efforts upon release. This document describes the visitation requirements for professional visitors during a child's placement in a juvenile correctional center (JCC).

II. Professional Visitors

Officers of the court, law enforcement personnel, legal counsel, service workers, and other individuals working in a professional capacity with a child, and their staff may visit with children by making arrangements with the child's assigned counselor. Government issued photo identification is required. Except in unusual circumstances, the professional requesting the meeting shall be encouraged to conduct the meeting when most convenient for the child and the needs of the facility. All appointments shall be made through the child's counselor, as practicable, who shall ensure the presence of the child at the scheduled appointment.

Beaumont Juvenile Correctional Center:

Address: 3500 Beaumont Road, Beaumont, Virginia 23014
Main Phone: (804) 556-3316
Fax: (804) 556-7220
Hours: 8:00 A.M. - 5:00 P.M.

Bon Air Juvenile Correctional Center:

Address: 1900 Chatsworth Avenue, Richmond, Virginia 23235
Main Phone: (804) 323-2550
Fax: (804) 323-2440
Hours: 8:00 A.M. - 5:00 P.M.

III. Search Prior to Admission

Visitors will be searched by security staff of the same gender as the visitor. Visitors refusing to be searched by electronic scanning and/or pat-down frisk will be denied entry.

IV. Permitted Items

Professional visitors will be permitted to bring in items needed to conduct a professional visit (e.g. client file, documents, writing instrument, etc.). A briefcase is permitted, however it will be subject to search. Laptops will only be permitted if there is a specific reason for needing it and the counselor has been notified in advance to obtain prior approval from the superintendent or designee.

Car keys and identification will be turned in at the reception area and the visitor will be given a chit in return. Prior to leaving the facility, the visitor will be required to turn the chit back in at the reception desk in order to have their keys and identification returned.

V. Prohibited Items

The following items are prohibited. This list is not exhaustive: cell phones, keys, purses/handbags, money, duffle bags, etc. shall not be permitted into the facility and will need to remain locked in the visitor's vehicle. During inclement weather, umbrellas may be left in the designated front entrance area.

Pursuant to *Code of Virginia* §§ [18.2-474](#) and [18.2-474.1](#), it is a crime to deliver articles and illegal items to children in direct care facilities without securing permission from the appropriate authority.

VI. Dress Code

Dress Code: Visitors shall wear appropriate casual clothing. The JCC reserves the right to refuse admittance to inappropriately dressed visitors.

- No bare feet. Footwear is required at all times. Any kind of footwear is acceptable, as long as the bottom of the foot is covered.
- Clothing shall be appropriate for a correctional environment. Clothing that advocates or promotes drugs, alcohol, tobacco products, guns, violence, profanity, sexual promiscuity, antisocial/illegal acts, and negative racial, ethnic, or religious slurs will not be allowed.
- Halter-tops, tank-tops, spaghetti-strap tops, muscle shirts, jogging shorts, biker shorts, spandex shorts, swim trunks, and tight-fitting or revealing clothing will not be allowed.
- Shorts must cover more than one half of the thigh.
- Visitors wearing dresses or skirts in excess of 2 inches above the knee will not be allowed to enter the JCC.
- Excessive and flashy jewelry that may cause a security risk shall not be permitted. Undergarments, including a bra for female visitors, are required and shall not be visible.

Determination of "Inappropriate Dress": Any visitor whose dress is considered inappropriate by the JCC visitation staff will be referred to the administrator who will make the final decision on admittance to the visitation room. The facility may offer alternative coverings (e.g., lab coat, etc.) to visitors not dressed appropriately. Any visitor refusing to wear the alternative covering will be denied access to visitation.

APPENDIX E: SEX OFFENDER SAFETY PLANS

Virginia Department of Juvenile Justice Guidance *pertaining to the:*

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

The purpose of a Sex Offender Safety Plan is to ensure that a child transitioning from a juvenile correctional center's sex offender treatment program is placed in an environment that will limit the risk to the community and allow, if needed, further treatment.

Sex Offender Safety Plans are treatment provider driven. The plans can vary widely depending on factors that may be unique to an individual's case. The treatment provider will address in detail specific areas in the plan as required. However, as a part of discharge planning, the treatment provider, in conjunction with the parole officer, counselor and other service providers should address the following areas:

1. Risk for re-offending
2. Proposed residence of the offender
3. Victim's relationship to offender (If related, status of reunification, if possible)
4. Victim's status as it relates to treatment (Is the victim involved in treatment?)
5. Victim's physical location
6. Review any court orders that may prohibit contact with certain age groups or individuals
7. An outline of follow-up and/ or relapse treatment
8. Identified community treatment provider

Once the offender's place of residence has been identified, the parole officer must visit the site and assess its appropriateness. Depending on the offender's history, sex-offender registration requirements (§§ [9.1-901](#) and [9.1-202](#) of the *Code of Virginia*) and risk of re-offending, attention should be paid to the following areas and noted in BADGE:

1. Proximity of the victim to the offender
2. The number and ages of children living in the proposed residence, if any
3. Level of supervision by the adults in the residence (work schedules)
4. Description of the offender's exact living accommodations
5. A description of the surrounding area with particular attention the location of children in the area, schools, playground, parks, and daycare centers.

The plan must be reviewed with the offender, parents/legal guardians and documented in BADGE case notes.

APPENDIX F: DSS/DJJ MATRIX

Virginia Departments of Juvenile Justice and Social Services Guidance pertaining to the:

Memorandum of Agreement between the Virginia Department of Social Services and the Virginia Department of Juvenile Justice re: Children in Foster Care Committed to the Department of Juvenile Justice

The purpose of this matrix is to outline newly developed roles and responsibilities DJJ and LDSS professionals for the period of commitment and release into the community. This will provide a tool for workers from DJJ and LDSSs to be able to quickly reference their next step, in the process.

PHASE/ TIME FRAME	RESPONSIBLE PARTY	RESPONSIBILITIES
Within 10 business days of the disposition date	DSS	<ul style="list-style-type: none"> Attend all delinquency court hearings. Provide all requested documentation to DJJ
As soon as possible	DJJ	<ul style="list-style-type: none"> Advise service worker that DJJ is recommending commitment Request and collect necessary documentation from LDSS
No later than 72 hours before dispositional hearing	DJJ	<ul style="list-style-type: none"> Share the social history report with DSS
Day of Commitment	DSS	Change the children case type from foster care to foster care prevention
	Both Agencies	Identify potential dates and times to hold the first Family Partnership Meeting

PHASE/ TIME FRAME	RESPONSIBLE PARTY	RESPONSIBILITIES
Within 5 days of Commitment	DSS	<ul style="list-style-type: none"> • Coordinate the scheduling Family Partnership Meeting, invite identified participants and request/provide facilitator
	DJJ	<ul style="list-style-type: none"> • Request and collect from LDSS any document not yet obtained. • Provide DSS a copy of the social history report if not previously provided • Participate in Family Partnership Meeting • Submit the names of any individuals identified as approved visitor to the JCC or direct care placement facility. • Provide visitation procedures and requirements to DSS.
	Both Agencies	<ul style="list-style-type: none"> • Coordinate dates, identify participants and attend Family Partnership Meeting* • Identify individuals who are able to provide the child with support
Monthly	DSS	<ul style="list-style-type: none"> • Conduct monthly confidential monthly meetings with child, in-person, telephone or video conference. • Participate and provide input for Individualized Education Program meetings • Forward documentation to parent/legal guardian

PHASE/ TIME FRAME	RESPONSIBLE PARTY	RESPONSIBILITIES
Every 90 days	DJJ	<ul style="list-style-type: none"> • Conduct in-person meeting with child at commitment facility every 90 days • Provide DSS with notice of JCC case-staffing meetings • Assist DSS with monthly contacts • Provide DSS with all written reports and information (including verbal and written progress reports) • Monitor changes in child’s release date and notify DSS of changes
	Both Agencies	<ul style="list-style-type: none"> • Attend case-staffing meetings,* coordinate monthly contacts with child • Notify of any changes regarding case • Communicate with parent/legal guardian (if applicable and within DSS limitations)
6 months prior to child’s anticipated release date	DSS	<ul style="list-style-type: none"> • Schedule Family Partnership Meeting, invite identified participants and provide facilitator
	DJJ	<ul style="list-style-type: none"> • Notify DSS of anticipated release date • Invite DSS to participate in all release planning meetings • Develop Comprehensive Re-Entry Case Plan(CRCP) • Participate in Family Partnership Meeting and make referrals for Re-Entry Services
	Both Agencies	<ul style="list-style-type: none"> • Coordinate dates, identify participants and attend Family Partnership Meeting and release planning meeting*

PHASE/ TIME FRAME	RESPONSIBLE PARTY	RESPONSIBILITIES
90 days prior to child's anticipated release date	DSS	Schedule Family Partnership Meeting, invite identified participants and provide facilitator
	DJJ	Notify DSS of release dates, and release planning meeting
	Both Agencies	Coordinate dates, identify participants and attend Family Partnership Meeting and release planning meeting*
30 days prior to children scheduled release date	DSS	Participate in conference call, release planning meetings and schedule and file appropriate petitions with the court
	DJJ	Schedule conference call and notify DSS and other identified participants of call and release planning meetings
	Both Agencies	Coordinate conference call and participate in release planning meeting*
Day of release	DSS	<ul style="list-style-type: none"> • Transport the child from the direct care facility • Meet with PO and go over the rules of parole and CRCP • Re-enroll the child in school and Medicaid • Change case type from prevention to foster care
	DJJ	<ul style="list-style-type: none"> • Attend court hearing • Review rules and case plan with the child, DSS and other identified parties

PHASE/ TIME FRAME	RESPONSIBLE PARTY	RESPONSIBILITIES
		<ul style="list-style-type: none"> • Provide medication and prescriptions, as appropriate • Contact behavioral health in the community to ensure continuity of care
	Both Agencies	<ul style="list-style-type: none"> • Attend court hearing, meet to review rules of parole and CRCP