

# Orientation Manual



## **VERMONT YOUTH DEVELOPMENT PROGRAM**

Extended Care for Teens & Young Adults

TURNING DREAMS INTO PLANS!

[HTTPS://VTYOUTHDEVELOPMENTPROGRAM.ORG/](https://vtyouthdevelopmentprogram.org/)

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# VERMONT YOUTH DEVELOPMENT PROGRAM

Extended Care for Teens & Young Adults

## Who We Serve:

- Youth ages 14-23 who have experience within the foster care system
- Each year we work with more than 500 young people!

## What We Offer:

- Youth Development Coordinators (YDCs) partner with youth to help them set goals, explore personal interests, connect with natural supports, and transition to adulthood successfully.
- Financial resources provide flexible funding to support interests and goals of youth who are engaged in the program.
- Leadership opportunities empower and inspire youth to advocate for improvements in the child welfare system and beyond.
- Extended foster care financially supports former foster parents and other supportive adults to care for youth beyond the age of 18.



**Housing**

**Education**

**Relationships**

**Enrichment**

**Normalcy**

**Employment**

**Transportation**

**Health**

**Identification**

**Basic Needs**



## Turning Dreams into Plans!



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Vermont Youth Development Program

### Our Agency Partners:

The Youth Development Program is under the administration of The Washington County Youth Service Bureau.







# VERMONT YOUTH DEVELOPMENT PROGRAM

Extended Care for Teens & Young Adults

**Newport - NDO**

Northeast Kingdom Community Action (NEKCA)

**St. Albans - ADO**  
Spectrum Youth  
& Family Services

**Burlington - BDO**  
Spectrum Youth  
& Family Services

**Middlebury - YDO**  
EasterSeals

**Rutland - RDO**  
EasterSeals

**Bennington - TDO**  
Sunrise Family Resource  
Center

**Morrisville - VDO**  
Lamoille  
Restorative  
Center

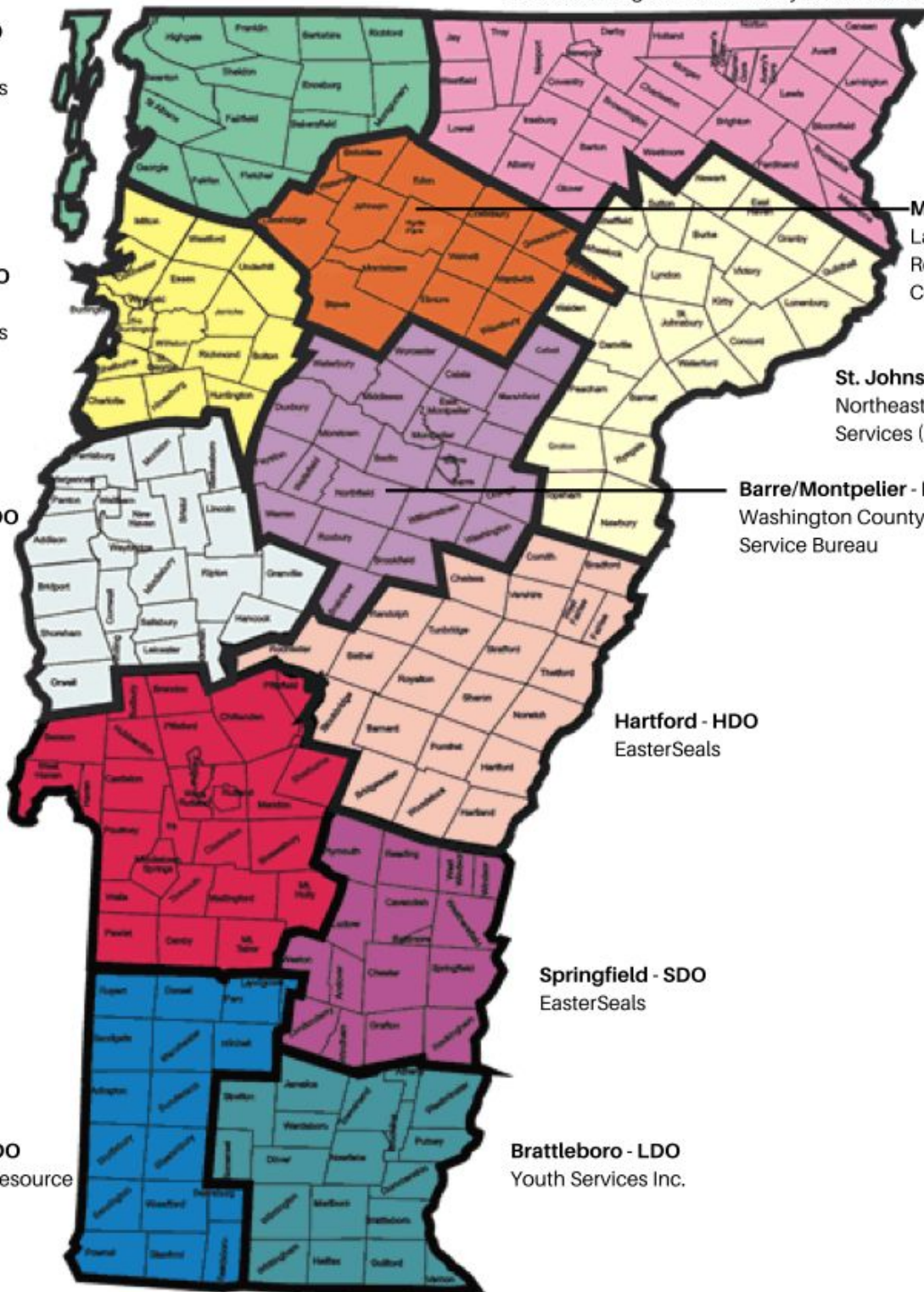
**St. Johnsbury - JDO**  
Northeast Kingdom Youth  
Services (NEKYS)

**Barre/Montpelier - MDO**  
Washington County Youth  
Service Bureau

**Hartford - HDO**  
EasterSeals

**Springfield - SDO**  
EasterSeals

**Brattleboro - LDO**  
Youth Services Inc.



Map by DCF District



# Mission and Value Statement

Our mission is to ensure that youth with foster care experience enter adulthood with the necessary support to build productive and fulfilling lives.

Youth who have experienced foster care are at higher risk for adverse outcomes such as homelessness, unemployment, and lower educational and vocational attainment. The YDP aims to ensure that youth exiting the foster care system in Vermont have the opportunity to rise above risk factors, find resilience, and not only survive, but thrive.

We strive to be the program that partners with youth to help them knock down barriers, uncover interests and skill sets, provide opportunity, and help youth turn dreams into plans!

We believe in providing services and supports that are strengths-based and fully driven by youth-identified goals.

By investing in youth, YDP promotes healthier and better-connected young adults, families, and communities.

# The Hidden Rules of Working with Youth

Brought to you by the young leaders of the Youth Development Program

Get to know us  
one-on-one

Learn how we  
like to interact  
with people

Meet us in places  
where we feel  
comfortable

Make our  
plans with us,  
not for us!

Our files can't  
tell you who we  
are – we're much  
better at doing it  
ourselves

Use communication  
methods that we're  
comfortable with  
(\*cough\* texting)

Be understanding of our  
schedules and help us plan  
meetings around them

Be a model of reliability and  
timeliness – Call us back and be  
on time!

Treat us like a partner – then we  
can work together

Ask and listen  
instead of assuming

Give us space if  
that's what we're  
asking for

Be positive when you  
talk or write about us

Be yourself  
around us! Have a  
little fun!

Be honest with us,  
**Period.**

Help us find new  
opportunities to push  
ourselves and grow

RESPECT ★ COMMUNICATION ★ RELIABILITY ★ TRUST



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# The Hidden Rules of Working with Youth

Brought to you by the young leaders of the Youth Development Program

- ★ Get to know us one-on-one
- ★ Learn how we like to interact with people
- ★ Meet us in places where we feel comfortable
- ★ Our files can't tell you who we are – we're much better at doing it ourselves
- ★ Make our plans with us, not for us!
- ★ Use communication methods that we're comfortable with (\*cough\* texting)
- ★ Be understanding of our schedules and help us plan meetings around them
- ★ Be a model of reliability and timeliness – Call us back and be on time!
- ★ Treat us like a partner – then we can work together
- ★ Be honest with us, period.
- ★ Be positive when you talk or write about us
- ★ Be yourself around us! Have a little fun!
- ★ Ask and listen instead of assuming
- ★ Give us space if that's what we're asking for
- ★ Help us find new opportunities to push ourselves and grow

RESPECT ★ COMMUNICATION ★ RELIABILITY ★ TRUST



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# Documentation Guidelines

**Verbal Communication:** What we say can have a huge impact on the relationships we have with youth. When talking to youth, make sure you are keeping the following guidelines in mind:

**Use person-first language and externalize challenges.** For instance, choose phrases like youth who dropped out of high school, youth who is struggling with substance use issues, and youth experiencing symptoms of depression, versus high school drop-out, addict, or depressed youth.

**Choose language that does not possess, objectify, separate, patronize, or deny.** Avoid using terms like “my youth,” “my kiddos,” “us vs. them,” “dear/sweetie/honey.”

**Acknowledge youth's right to self-identify** (gender and pronoun preferences, race, religion, disability etc.). Don't assume you know how they identify. Ask the experts themselves (the youth!).

**Respect youth's dignity and autonomy** when speaking with youth. The more you honor youth choice and voice, the more respect you are showing youth.

**Remember that youth are experts of their own experience.** Ask them for their opinions and insight!

**Take a strengths based approach** at all times! People succeed when they are surrounded by people that believe they can succeed. When negative situations arise, reframe them to move the conversation in a positive direction. Don't forget that making mistakes is a normal part of adolescent development, and don't be afraid to remind youth of that.

**Use positive terms** when talking about the future (e.g. when you graduate, once you get through this tough time, when you land that job). This shows youth you believe in them.

**Employ harm reduction** practices to strengthen relationships with youth.

**Every youth's experience is different.** Suspend judgment and approach with curiosity and motivation to understand.

**Honor confidentiality** and privacy when talking about youth.

**Your body language** can say more than your words! Make sure you're aware of the message you're sending

**Written Communication:** What we write about youth is just as important as what we say.

**Youth have a legal right to their file.** Their file is not “yours.” Imagine that youth are seeing everything you write.

**An outsider should be able to read the file and generally understand the work.** Case notes (i.e. Progress Notes and Collateral Contacts) and Voluntary Services Agreements (VSAs)

**All written documentation** should be objective, goal-oriented (using Specific, Measurable, Achievable, Relevant, Time-bound goals), and inclusive of youth voice.

**Objectivity can be achieved by:**

- **Avoiding discussion** that incorporates your feelings or opinions (e.g. “Unfortunately the youth failed to follow through again...” or “The client looked sad.”).
- Avoid feeling words in general** (e.g. “wonderful,” “great,” “unfortunately,” etc.).
- **Avoiding first-person pronouns** (e.g. I, me, my, we, etc.), abbreviations, emoticons, slang, ellipses (...) and exclamation points.
- **Avoiding inappropriate language** that may be disparaging, cynical, or sarcastic.
- **Including professional terms** (such as client, youth, client's mother, service provider, etc.) and objective verbs in the past tense (such as shared, reported, informed, observed, demonstrated, expressed, etc.).

**Make sure you are capturing all conversations** had in regards to clients, including case consultations, supervision, and referrals

**Use the client name that DCF has in their system for all documentation.** A preferred name may be added, but make it clear that it is not the youth's legal name (i.e., put it in quotations).

**Ensure that all documentation has required signatures and dates.**

**Emails:** Emails should be professional, objective, and respectful, and documented in the file when relevant. Avoid disparaging or casual content.

**Releases:** See individual agency policies re: releases, privacy practices, and informed consent.

# Therapeutic Case Management

- Treat people the way you want them to treat you.
- Know that no matter how dysfunctional a person's behavior may seem, they are trying to solve their problems and make their situation better. Believe in their positive intention.
- Be compassionate.
- Have faith in people. Focus on a person's innate skills and abilities to solve their own problems. Focus on their accomplishments toward the goal.
- Know that people are more similar than they are different. You are more like another person than different from them.
- Never judge a book by its cover. Do your best to suspend judgment and focus on helping to solve problems.
- Know that above all else, people simply want you to understand and accept them.
- Be keenly aware of the effect you are having on others. Consider your words, tone, intervention, and suggestions before you present them. Work hard to deliver feedback in a way that people can hear you.
- Have patience with yourself and the people around you.

Adapted from: Martha St. Enterprises, Inc. "The Top Ten Things You Can do to Be Therapeutic (Without Even Needing a License!)" from [www.become-an-effective-psychotherapist.com](http://www.become-an-effective-psychotherapist.com), 2009.

The Center for the Study of Social Policy (CSSP) reviewed numerous research studies and findings on resilience, positive youth development, neuroscience, and trauma to come up with the *Youth Thrive Framework*. They synthesized information on what reduces the impact of negative life experiences and what increases the likelihood of healthy development, healing, and well-being and for *all* youth. Building on that research, the Youth Thrive Framework provides a clear and compelling way to think about what youth need in order to thrive.

The Framework applies to older children, teenagers, and young adults. The heart of the Framework is five **Protective and Promotive Factors** that mitigate risk and promote well-being:

1. **Youth Resilience:** Managing stress and functioning well when faced with stress, challenges, or adversity.
2. **Social Connections:** Having healthy, sustained relationships with people, places, communities, and a force greater than oneself that promote a sense of trust, belonging, and that one matters.
3. **Knowledge of Adolescent Development:** Understanding the unique changes and assets of adolescence and implementing policies and practices that reflect a deep understanding of development.
4. **Concrete Support in Times of Need:** Making sure youth receive quality, equitable, respectful services that meet their basic needs (health care, housing, education, nutrition, income), and teaching youth to ask for help and advocate for themselves.
5. **Cognitive and Social-Emotional Competence:** Acquiring skills and attitudes that are essential for forming an independent, positive identity and having a productive and satisfying adulthood.

# Subcontract Expectations

**Monthly service expectations:** Expected caseload per FTE (Youth Development Coordinator) is 25 youth. Monthly reimbursement rates are based on carrying a minimum of **ten** Medicaid eligible and enrolled clients per FTE. Services provided to a youth shall be accompanied by a Voluntary Services Agreement and progress notes documenting activities conducted on behalf of the youth. Services will also be documented by an entry in the YDP Database and monthly invoice. The Subcontractor shall receive **\$500.00** for each Medicaid eligible and enrolled youth served up to the amount of funding available as described in section C3) Allocation.

**Performance-based measures:** The Contractor will monitor Subcontractor performance and mandate compliance with the following required statewide outcome measures. The Contractor will hold Subcontractors responsible if outcome measures are not achieved and will conduct performance reviews as needed.

Measure	Target
# of youth served	25 per FTE per quarter
% of youth with active Voluntary Services Agreement	80%
% of youth with Medicaid insurance	90%
% of youth connected to a supportive adult	90%
% of youth employed or enrolled	85%
% of 16+ year old youth with driver's licenses	35%
% of youth that have stable housing	85%



# Database Instructions

## Monthly Services and Outcomes:

- YDCs must enter one Monthly Services and Outcomes data for each client served each month. For example, if 30 youth are served in December, there should Services and Outcomes data entered for all 30 clients. While some youth will not be Medicaid-billable, the data collected is important for reporting to NYTD and DCF, and also for legislative advocacy and other fundraising purposes.

## Billing Invoices:

- YDCs will generate billing invoices through the database after Monthly Services and Outcomes data is entered.
- Billing invoices must be submitted by the 10<sup>th</sup> of the following month.
- Invoices will auto-populate for youth for whom Monthly Services and Outcomes data has been entered.
- If YDP did not serve youth enough to warrant billing, indicate "no" on the invoice.

## Helpful Hints:

- If you have any trouble with the database (e.g. entry mistakes, error codes, etc.) contact the YDP billing specialist.
- Log out of the database when you are not actively entering data. Data could be lost if the database is left idle.
- Bookmark the database login page ([https://vcrhyp.info/YDP/ydp\\_DstLogin.php](https://vcrhyp.info/YDP/ydp_DstLogin.php)) for easy access.

# MONTHLY SERVICES AND OUTCOMES DATA

## YDP Guidelines for Completion

- ★ Pay close attention to the pop-ups in the database, which are federal definitions of each item and are italicized below. These are MOST important to consider when figuring out how to respond to each data element. The bulleted pointers below are only meant to supplement those definitions.
- ★ Unless otherwise specified in the definition, when scoring services as “yes,” you are indicating that the service was offered during the billing month.
- ★ For all data collected and scored as “yes,” there must be documentation present in the file to affirm those responses.
- ★ YDP may be providing many of these services during meetings with youth; there is no limit to the number of services YDCs check off.
- ★ “State Agency” means state funded agencies, programs, and resources that youth are connected to (e.g. DCF, VocRehab, YDP, foster parents, residential placements).

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### Independent Living Needs Assessment:

Indicate whether the youth received an independent living needs assessment that was paid for or provided by the State agency during the reporting period. An independent living needs assessment is a systematic procedure to identify a youth’s basic skills, emotional and social capabilities, strengths, and needs to match the youth with appropriate independent living services. The assessment may address knowledge of basic living skills, job readiness, money management abilities, decision-making skills, goal setting, task completion, and transitional living needs.

- ☐ **YDCs should be checking “yes” to this every month if there is a current YDP Intake Assessment (updated within the year) on file. Having an up-to-date intake assessment is important for both NYTD and Medicaid billing purposes.**

### Academic Support:

Indicate whether the youth received academic supports during the reporting period. Academic supports are services designed to help a youth complete high school or obtain a General Equivalency Degree (GED). Such services include the following: academic counseling; preparation for a GED, including assistance in applying for or studying for a GED exam; tutoring; help with homework; study skills training; literacy training; and help accessing educational resources. Academic support does not include a youth’s general attendance in high school.

### Post-Secondary Educational Support:

Indicate whether the youth received post-secondary educational support during the reporting period. Post-secondary educational support are services designed to help a youth enter or complete a post-secondary education and include the following: classes for test preparation, such as the SAT; counseling about college; information about financial aid and scholarships; help completing college or loan applications; or tutoring while in college.

**Career Preparation:**

Indicate whether the youth received career preparation services during the reporting period. Career preparation services focus on developing a youth's ability to find, apply for, and retain appropriate employment. Career preparation includes the following types of instruction and support services: vocational and career assessment, including exploration and planning, guidance in setting and assessing vocational and career interests and skills, and help in matching interests and abilities with vocational goals; job seeking and job placement support, including identifying potential employers, writing resumes, completing job applications, developing interview skills, job shadowing, receiving job referrals, using career resource libraries, understanding employee benefits coverage, and securing work permits; retention support, including job coaching; learning how to work with employers and other employees; understanding workplace values such as timeliness and appearance; and understanding authority and customer relationships.

**Employment Programs/Vocational Training:**

Indicate whether the youth attended an employment program or received vocational training during the reporting period. Employment programs and vocational training are designed to build a youth's skills for a specific trade, vocation, or career through classes or on-site training. Employment programs include a youth's participation in an apprenticeship, internship, or summer employment program and do not include summer or after-school jobs secured by the youth alone. Vocational training includes a youth's participation in vocational or trade programs and the receipt of training in occupational classes for such skills as cosmetology, auto mechanics, building trades, nursing, computer science, and other current or emerging employment sectors.

**Budget and Financial Management:**

Indicate whether the youth received budget and financial management assistance during the reporting period. Budget and financial management assistance includes the following types of training and practice: living within a budget; opening and using a checking and savings account; balancing a checkbook; developing consumer awareness and smart shopping skills; accessing information about credit, loans and taxes; and filling out tax forms.

- ☐ Check only when the services of making or discussing a budget are provided (versus the whole six months a VSA and budget are effective)

**Housing Education and Home Management Training:**

Indicate whether the youth received housing education or home management training during the reporting period. Housing education includes assistance or training in locating and maintaining housing, including filling out a rental application and acquiring a lease, handling security deposits and utilities, understanding practices for keeping a healthy and safe home, understanding tenant's rights and responsibilities, and handling landlord complaints. Home management includes instruction in food preparation, laundry, housekeeping, living cooperatively, meal planning, grocery shopping and basic maintenance and repairs.

**Health Education and Risk Prevention:**

Indicate whether the youth received these services during the reporting period. Health education and risk prevention includes providing information about: hygiene, nutrition, fitness and exercise, and first aid; medical and dental care benefits, health care resources and insurance, prenatal care and maintaining personal medical records; sex education, abstinence education, and HIV prevention, including education and information about sexual development and sexuality, pregnancy prevention and family planning, and sexually transmitted diseases and AIDS; substance abuse prevention and intervention, including education and information about the effects and consequences of substance use (alcohol, drugs, tobacco) and substance avoidance and intervention. Health education and risk prevention does not include the youth's actual receipt of direct medical care or substance abuse treatment.

**Family Support/Healthy Marriage Education:**

Indicate whether the youth received family support and healthy marriage services during the reporting period. Family support and healthy marriage education services include education and information about safe and stable families, healthy marriages, spousal communication, parenting, responsible fatherhood, childcare skills, teen parenting, and domestic and family violence prevention.

**Mentoring:**

Indicate whether the youth received mentoring services during the reporting period. Mentoring means that the youth has been matched with a screened and trained adult for a one-on-one relationship that involves the two meeting on a regular basis. Mentoring can be short-term, but it may also support the development of a long-term relationship.

- ☐ A mentor has to be an adult screened and trained to serve as a mentor. Relationships with YDCs or other supportive adults (e.g. teachers) do not qualify as mentoring.

**Supervised Independent Living:**

Indicate whether the youth was living in a supervised independent living setting that was paid or provided by the State agency during the reporting period. A youth in supervised independent living is not supervised 24 hours a day by an adult and often is provided with increased responsibilities, such as paying bills, assuming leases, and working with a landlord, while under the supervision of an adult.

- ☐ The supervised independent living setting must be paid by a state agency in its entirety.
- ☐ Transitional living services are likely not independent living; probably not paid for or provided by the state.
- ☐ FUP vouchers do not count towards this.
- ☐ If DCF is paying the youth's rent, then this might be a "yes."



### **Room and Board Financial Assistance:**

Indicate whether the youth received financial assistance for room and board that was paid for or provided by the State agency during the reporting period. Room and board financial assistance is a payment that is paid for or provided by the State agency for room and board, including rent deposits, utilities, and other household start-up expenses.

- ☐ This is a “yes” for Category A and B Agreements; also can check “yes” if youth has a FUP voucher.
- ☐ If a youth is under 18 and currently in custody, this should be a “no.”

### **Education Financial Assistance:**

Indicate whether the youth received education financial assistance during the reporting period that was paid for or provided by the State agency. Education financial assistance is a payment that is paid for or provided by the State agency for education or training, including allowances to purchase textbooks, uniforms, computers, and other educational supplies; tuition assistance; scholarships; payment for educational preparation and support services (i.e., tutoring), and payment for GED and other educational tests. This financial assistance also includes vouchers for tuition or vocational education or tuition waiver programs paid for or provided by the State agency.

- ☐ Includes Chafee scholarships through VSAC.
- ☐ DCF has a grant agreement with VSAC to provide education scholarships. Youth can receive a maximum of \$5k per year. If youth you are working with are receiving this scholarship, you should be tracking this by marking “yes.” The “yes” would continue the whole time a youth is receiving this funding (e.g. a semester versus a month).
- ☐ This also includes Youth Investment Grants for education support.

### **Other Financial Assistance:**

Indicate whether the youth received any other financial assistance that was paid for or provided by the State agency during the reporting period. Other financial assistance includes any other payments made or provided by the State agency to help the youth live independently.

- ☐ Includes YDP/DCF financial support (including youth investment grants) that supports youth to live independently.
- ☐ Must be provided by State agencies.

### **Education Level:**

Educational level means the highest educational level completed by the youth. For example, for a youth currently in 11th grade, “10th grade” is the highest educational level completed. Post-secondary education or training refers to any post-secondary education or training, other than an education pursued at a college or university. College refers to completing at least a semester of study at a college or university. Indicate the current highest educational level completed by the youth.

- ☐ This indicates the highest level that has been completed, not the current level.

**Foster Care Status - Services:**

The youth receiving services is or was in foster care during the reporting period if the youth is or was in the placement and care responsibility of the State.

- ☐ Mark “yes” if a youth is either under 18 and currently in DCF custody, or if a youth is on a Category A Agreement.

**Adjudicated Delinquent:**

A State or Federal court has made the determination that the youth has violated a criminal law. The youth is considered an adjudicated delinquent during the reporting period.

**Federally-Recognized Tribe:**

The youth is enrolled in or eligible for membership in a federally recognized tribe (any Indian tribe, band, nation, or other organized group or community of Indians, including any Alaska Native village or regional or village corporation). The tribe is recognized as eligible for special programs and services provided by the United States to Indians because of their status as Indians pursuant to the Indian Self-Determination and Educational Assistance Act.

**Special Education:**

The youth received special education instruction during the reporting period specifically designed, at no cost to parents, to meet the unique needs of a child with a disability.

**Currently Full-Time Employment:**

Indicate whether the youth is employed full time. A youth is employed full-time if employed at least 35 hours per week, in one or multiple jobs, as of the date of the outcome data collection.

**Currently Part-Time Employment:**

Indicate whether the youth is employed part time. A youth is employed part-time if employed between 1 and 34 hours per week, in one or multiple jobs, as of the date of the outcome data collection.

**Employment Related Skills:**

Indicate whether the youth has obtained employment-related skills. A youth has obtained employment-related skills if the youth completed an apprenticeship, internship, or other on-the-job training, either paid or unpaid, in the past year. The experience must help the youth acquire employment related skills, such as specific trade skills such as carpentry or auto mechanics, or office skills such as word processing or use of office equipment.

- ☐ Remember to read the definition of this one, which states that the youth has completed an apprenticeship, internship, or other on the job training (paid or unpaid) in the past year. This might include culinary school or a program through a technical school. This does not include making a resume or practicing soft skills with a YDC.

**Social Security:**

Indicate whether the youth is receiving Social Security payments. A youth is receiving some of Social Security if receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), either directly or as a dependent beneficiary as of the date of the outcome data collection. SSI payments are made to eligible low-income persons with disabilities. SSDI payments are made to persons with a certain amount of work history who become disabled. A youth may receive SSDI payments through a parent.

**Educational Aid:**

Indicate whether the youth is receiving educational aid. A youth is receiving educational aid if using a scholarship, voucher (including education or training vouchers), grant, stipend, student loan, or other type of educational financial aid to cover educational expenses as of the date of the outcome data collection. Scholarships, grants, and stipends are funds awarded for spending on expenses related to gaining an education. "Student loan" means a government-guaranteed, low-interest loan for students in post-secondary education.

Youth investment grants count as educational aid.

**Educational Aid:**

Indicate whether the youth is receiving educational aid. A youth is receiving educational aid if using a scholarship, voucher (including education or training vouchers), grant, stipend, student loan, or other type of educational financial aid to cover educational expenses as of the date of the outcome data collection. Scholarships, grants, and stipends are funds awarded for spending on expenses related to gaining an education. "Student loan" means a government-guaranteed, low-interest loan for students in post-secondary education.

- ☐ Youth investment grants count as educational aid.

**Public Financial Assistance:**

Indicate whether the youth is receiving public financial assistance. A youth is receiving public financial assistance if receiving ongoing cash welfare payments from the government to cover some of his or her basic needs, as of the date of the outcome data collection. Public financial assistance does not include government payments or subsidies for specific purposes, such as unemployment insurance, child care subsidies, education assistance, food stamps or housing assistance.

- ☐ General Assistance and Reach Up (TANF) funding is included here.

**Public Food Assistance:**

Indicate whether the youth is receiving public food assistance. A youth is receiving public food assistance if receiving food stamps to buy eligible food at authorized stores as of the date of the outcome data collection. This definition includes receiving public food assistance through the Women, Infants, and Children (WIC) program.

- ☐ This includes SNAP/3Squares/food stamps, WIC.

**Public Housing Assistance:**

Indicate whether the youth is receiving housing assistance. A youth is receiving public housing assistance if the youth is living in government-funded public housing, or receiving a government-funded housing voucher to pay for part of his/her housing costs as of the date of the outcome data collection.

- ☐ This includes government-funded public housing or government-funded housing vouchers that pay for all or part of housing costs.
- ☐ When a youth is receiving a FUP voucher, this is a “yes.”

**Other Financial Support:**

Indicate whether the youth is receiving any other financial support. A youth has other financial support if receiving any other periodic and/or significant financial resources or support from another source not otherwise captured in the database. Such support can include payments from a spouse or family member (biological, foster or adoptive), child support that the youth receives for him or herself, or funds from a legal settlement. This definition does not include occasional gifts, such as birthday or graduation checks or small donations of food or personal incidentals, child care subsidies, child support for a youth’s child, or other financial support which does not benefit the youth directly in supporting himself or herself.

**Current Enrollment & Attendance:**

Indicate whether the youth is enrolled in and attending high school, GED classes, or postsecondary vocational training or college, as of the date of the outcome data collection. A youth is still considered enrolled in and attending school if the youth would otherwise be enrolled in and attending a school that is currently out of session.

**Connection to Adult:**

Indicate whether the youth has such a connection with an adult. A youth has a connection to an adult if, as of the date of the outcome data collection, the youth knows an adult who he or she can go to for advice or guidance when there is a decision to make or a problem to solve, or for companionship when celebrating personal achievements. The adult must be easily accessible to the youth, either by telephone or in person. This can include, but is not limited to adult relatives, parents or foster parents. The definition excludes spouses, partners, boyfriends or girlfriends and current caseworkers.

**Homelessness:**

Indicate whether the youth has experienced homelessness. A youth is considered to have experienced homelessness if the youth had no regular or adequate place to live. This definition includes situations where the youth is living in a car or on the street, or staying in a homeless or other temporary shelter.

- ☐ This may include couch-surfing.



**Substance Abuse Referral:**

Indicate whether the youth had a substance abuse referral. A youth has received a substance abuse referral if the youth was referred for an alcohol or drug abuse assessment or counseling. This definition includes either a self-referral or referral by a social worker, school staff, physician, mental health worker, foster parent, or other adult. Alcohol or drug abuse assessment is a process designed to determine if someone has a problem with alcohol or drug use.

**Incarceration:**

Indicate whether the youth was incarcerated. A youth is considered to have been incarcerated if the youth was confined in a jail, prison, correctional facility, or juvenile or community detention facility in connection with allegedly committing a crime (misdemeanor or felony).

- ☐ Woodside would be included in this definition.

**Pregnancy:**

Indicate whether the youth had a child. A youth is considered to have a child if the youth has given birth herself, or the youth has fathered any children who were born. This refers to biological parenthood.

**Marriage at Child's Birth:**

Indicate whether the youth was married to the child's other parent at the time of the birth of any child. A youth is married at the time of the child's birth if he or she was united in matrimony according to the laws of the State to the child's other parent.

**Medicaid:**

Indicate whether the youth receives Medicaid. A youth is receiving Medicaid if the youth is participating in a Medicaid-funded State program, which is a medical assistance program supported by the Federal and State government.

- ☐ Do not mark yes if Medicaid has lapsed within the reporting period.

**Other Health Insurance Coverage:**

A youth has other health insurance if the youth has a third party pay (other than Medicaid) for all or part of the costs of medical care, mental health care, and/or prescription drugs. This definition includes group coverage offered by employers, schools or associations, an individual health plan, self-employed plans, or inclusion in a parent's insurance plan. This also could include access to free health care through a college, Indian Health Service or other source. Medical or drug discount cards or plans are not insurance.

**Health Insurance (Type: Medical):**

If the youth has indicated that he or she has health insurance coverage other than Medicaid, indicate whether the youth has insurance that pays for all or part of medical health care services.

- ☐ If the response to "Other Health Insurance Coverage" is no, the response to this question is also no.

**Health Insurance (Type: Mental Health):**

If the youth has indicated that he or she has health insurance coverage other than Medicaid, indicate whether the youth has insurance that pays for all or part of mental health care services, such as counseling or therapy.

- ☐ If the response to "Other Health Insurance Coverage" is no, the response to this question is also no.

**Health Insurance (Type: Prescription Drugs):**

If the youth has indicated that he or she has health insurance coverage other than Medicaid, indicate whether the youth has insurance that pays for all or part of prescription drugs.

- ☐ If the response to "Other Health Insurance Coverage" is no, the response to this question is also no.

**Highest Education Certification Received:**

The highest educational level completed by the youth during the reporting period.

**Military Enlisted:****Driver's License:****Adopted:**

Youth has been involved with a legal proceeding that creates a non-biological parent-child relationship; the adopted child is entitled to all privileges belonging to a natural child of the adoptive parents.

**Adopted Year (yyyy):****Adult Probation:**

An adult youth is on probation if a State or Federal court has sentenced them to court supervision.

# Youth Outcomes Survey



Date of survey:	Youth's Name	DOB	MIS#
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**Information to collect from all youth who were in out of home care on their 17<sup>th</sup> birthday regardless of whether a change of placement occurs within 45 days of the youths birthday. 19 and 21 year old follow up surveys have to be completed prior to the end of the reporting year, i.e., March 31, 20XX.**

Data Element	Questions to Youth	Definitions
Current full-time employment	Currently are you employed full-time? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	“Full-time” means working at least 35 hours per week.
Current part-time employment	Currently are you employed part-time? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	“Part-time” means working at least 1-34 hours per week.
Employment Related skills	In the past year, did you complete an apprenticeship, internship, or other on-the-job training, either paid or unpaid? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	This means apprenticeships, internships, or other on-the-job trainings, either paid or unpaid, that helped the youth acquire employment-related skills (which can include specific trade skills such as carpentry or auto mechanics, or office skills such as word processing or use of office equipment).
Social Security	Currently are you receiving social security payments (Supplemental Security Income or SSI, disability, or dependents’ payments)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	These payments from the government to meet basic needs for food, clothing, and shelter of a person with a disability. A youth may be receiving these payments because of a parent or guardian’s disability, rather than his/her own.
Educational Aid	Currently are you receiving educational aid? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	Scholarships, grants, and stipends are funds awarded for spending on expenses related to gaining an education. “Student loan” means a government- guaranteed, low-interest loan for students in post-secondary education. Indicate whether the youth is receiving educational aid with a “yes” or “no” as appropriate. If the youth does not answer this question, indicate “declined.”
Public Financial Assistance	Currently are you receiving public financial assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined <i>(If you decline, you are choosing not to answer)</i>	A youth is receiving public financial assistance if receiving ongoing cash welfare payments from the government to cover some of his or her basic needs, as of the date of the outcome data collection. Public financial assistance does not include government payments or subsidies for specific purposes, such as unemployment insurance, child care subsidies, education assistance, food stamps or housing assistance. Indicate whether the youth is receiving public financial assistance, with “yes” or “no” as appropriate, and “not applicable” for a youth still in foster care. If the youth does not answer this question, indicate “declined.”

<b>Public Food Assistance</b>	<p>Currently are you receiving public food assistance?</p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is receiving public food assistance if receiving food stamps in any form (i.e. government-sponsored checks, coupons or debit cards) to buy eligible food at authorized stores as of the date of the outcome data collection. This definition includes receiving public food assistance through the Women, Infants, and Children (WIC) program. Indicate whether the youth is receiving some of public food assistance with “yes” or “no,” and “not applicable” for a youth still in foster care. If the youth does not answer this question, indicate “declined.”</p>
<b>Public Housing Assistance</b>	<p>Currently are you receiving any sort of housing assistance from the government, such as living in public housing or receiving a housing voucher?</p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>Public housing is rental housing provided by the government to keep rents affordable for eligible individuals and families, and a housing voucher allows participants to choose their own housing while the government pays part of the housing costs. This does not include payments from the child welfare agency for room and board payments.</p>
<b>Other Financial Support</b>	<p>Currently are you receiving any other financial support?</p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>“A youth has other financial support if receiving any other periodic and/or significant financial resources or support from another source not listed in this section as of the date of outcome data collection. Such support can include payments from a spouse or family member (biological, foster or adoptive), child support that the youth receives for him or herself, or funds from a legal settlement. Indicate whether the youth is receiving any other financial support with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>
<b>Highest Educational Certification Received</b>	<p>What is the highest educational degree or certification that you have received?</p> <p><input type="checkbox"/> High School Diploma/GED  <input type="checkbox"/> Vocational Certificate  <input type="checkbox"/> Vocational License  <input type="checkbox"/> Associates Degree (A.A.)  <input type="checkbox"/> Bachelor's Degree (B.A. or B.S.)  <input type="checkbox"/> Graduate Degree  <input type="checkbox"/> None of the above  <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth has received an education certificate if the youth has a high school diploma or general equivalency degree (GED), vocational certificate, vocational license, associate's degree (e.g., A.A.), bachelor's degree (e.g., B.A. or B.S.), or a higher degree as of the date of the outcome data collection. Indicate the highest degree that the youth has received. If the youth does not answer this question, indicate “declined.”</p>
<b>Current Enrollment and Attendance</b>	<p>Are currently enrolled in or attending an educational institution?</p> <p><input type="checkbox"/> Yes   <input type="checkbox"/> No   <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>Indicate whether the youth is enrolled in and attending high school, GED classes, or postsecondary vocational training or college, as of the date of the outcome data collection. A youth is still considered enrolled in and attending school if the youth would otherwise be enrolled in and attending a school that is currently out of session. Indicate whether the youth is currently enrolled and attending school with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>



<b>Connection to an Adult</b>	<p>Currently do you have a connection to an adult that you can go to for guidance?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth has a connection to an adult if, as of the date of the outcome data collection, the youth knows an adult who he or she can go to for advice or guidance when there is a decision to make or a problem solve, or for companionship when celebrating personal achievements. The adult must be easily accessible to the youth, either by telephone or in person. This can include, but is not limited to adult relatives, parents or foster parents. The definition excludes spouses, partners, boyfriends or girlfriends and current caseworkers. Indicate whether the youth has such a connection with an adult with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>
<b>Homelessness</b>	<p>Have you ever been homeless?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is considered to have experienced homelessness if the youth had no regular or adequate place to live. This definition includes situations where the youth is living in a car or on the street, or staying in a homeless or other temporary shelter. For a 17-year-old youth in the baseline population, the data element relates to a youth’s lifetime experiences. For a 19- or 21-year-old youth in the follow-up population, the data element relates to the youth’s experience in the past two years. Indicate if the youth has been homeless with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>
<b>Substance Abuse Referral</b>	<p>Have you ever received a substance abuse referral?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth has received a substance abuse referral if the youth was referred for an alcohol or drug abuse assessment or counseling. For a 17-year-old youth in the baseline population, the data element relates to a youth’s lifetime experience. For a 19- or 21-year-old youth in the follow-up population, the data element relates to the youth’s experience in the past two years. This definition includes either a self-referral or referral by a social worker, school staff, physician, mental health worker, foster parent, or other adult. Alcohol or drug abuse assessment is a process designed to determine if someone has a problem with alcohol or drug use. Indicate whether the youth had a substance abuse referral with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>
<b>Incarceration</b>	<p>Have you ever been incarcerated?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is considered to have been incarcerated if the youth was confined in a jail, prison, correctional facility, or juvenile or community detention facility in connection with allegedly committing a crime (misdemeanor or felony). For a 17-year-old youth in the baseline population, the data element relates to a youth’s lifetime experience. For a 19- or 21-year-old youth in the follow-up population, the data element relates to the youth’s experience in the past two years. Indicate whether the youth was incarcerated with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>
<b>Children</b>	<p>Have you ever given birth to or fathered any children?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is considered to have a child if the youth has given birth herself, or the youth has fathered any children who were born. For a 17- year-old youth in the baseline population, the data element relates to a youth’s lifetime experience. For a 19- or 21-year-old youth in the follow-up population, the data element refers to children born to the youth in the past two years only. This refers to biological parenthood. Indicate whether the youth had a child with a “yes” or “no.” If the youth does not answer this question, indicate “declined.”</p>

<b>Marriage at Child's Birth</b>	<p>If you responded yes to the previous question, were you married to the child's other parent at the time each child was born?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is married at the time of the child's birth if he or she was united in matrimony according to the laws of the State to the child's other parent. Indicate whether the youth was married to the child's other parent at the time of the birth of any child with a "yes" or "no". If the youth does not answer this question, indicate "declined."</p>
<b>Medicaid</b>	<p>Currently are you on health insurance funded by the state, such as Medicaid, Dr. Dynosaur, VHAP or Catamount Health Insurance?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth is receiving Medicaid if the youth is participating in a Medicaid-funded State program, which is a medical assistance program supported by the Federal and State government under title XIX of the Social Security Act as of the date of outcomes data collection. Indicate whether the youth receives Medicaid with "yes," "no," or "do not know" as appropriate. If the youth does not answer this question, indicate "declined."</p>
<b>Other Health Insurance</b>	<p>Currently do you have health insurance, other than Medicaid [e.g., private insurance]?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know</p> <p><input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>A youth has other health insurance if the youth has a third party pay (other than Medicaid) for all or part of the costs of medical care, mental health care, and/or prescription drugs, as of the date of the outcome data collection. This definition includes group coverage offered by employers, schools or associations, an individual health plan, self-employed plans, or inclusion in a parent's insurance plan. This also could include access to free health care through a college, Indian Health Service or other source. Medical or drug discount cards or plans are not insurance. Indicate "yes," "no," or "do not know," as appropriate for youth participating solely in Medicaid. If the youth does not answer this question, indicate "declined."</p>
<b>Health Insurance Type : Medical</b>	<p>Currently do you have health insurance, other than Medicaid [e.g., private insurance] for medical?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know</p> <p><input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>If the youth has indicated that he or she has health insurance coverage in the question above, indicate whether the youth has insurance that pays for all or part of medical health care services. Indicate "yes," "no," or "do not know" as appropriate. If the youth does not answer this question, indicate "declined."</p>
<b>Health Insurance Type: Mental Health</b>	<p>Currently do you have health insurance, other than Medicaid [e.g., private insurance] for mental health?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know</p> <p><input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>If the youth has indicated that he or she has medical health insurance coverage in the question above, indicate whether the youth has insurance that pays for all or part of the costs for mental health care services, such as counseling or therapy. Indicate "yes," "no," or "do not know" as appropriate, if the youth did not indicate having medical health insurance coverage. If the youth does not answer this question, indicate "declined."</p>
<b>Health Insurance Type: Prescription Drugs</b>	<p>Currently do you have health insurance, other than Medicaid [e.g., private insurance] for prescription drugs?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know</p> <p><input type="checkbox"/> Declined</p> <p><i>(If you decline, you are choosing not to answer)</i></p>	<p>If the youth has indicated that he or she has medical health insurance coverage as described above, indicate whether the youth has insurance coverage that pays for part or all of the costs of some prescription drugs. Indicate "yes," "no," or "do not know" as appropriate, if the youth did not indicate having medical health insurance coverage. If the youth does not answer this question, indicate "declined."</p>

# Participant Locator Form

<b>How do we keep in touch with you?</b>		
<b>Youth Name:</b>		
<b>Address:</b>		
<b>Email:</b>		
<b>Social Networks:</b>		
<b>Phone Numbers:</b>	<b>Home:</b>	
	<b>Cell:</b>	
	<b>Work:</b>	

<b>Significant others (parents, relatives, friends, natural supports who always know how to reach you)</b>			
<b>1. Name:</b>		<b>2. Name:</b>	
<b>Relationship:</b>		<b>Relationship:</b>	
<b>Address:</b>		<b>Address:</b>	
<b>Email:</b>		<b>Email:</b>	
<b>Phone Numbers:</b>		<b>Phone Numbers:</b>	
<b>Home:</b>		<b>Home:</b>	
<b>Cell:</b>		<b>Cell:</b>	
<b>Work:</b>		<b>Work:</b>	
<b>3. Name:</b>		<b>4. Name:</b>	
<b>Relationship:</b>		<b>Relationship:</b>	
<b>Address:</b>		<b>Address:</b>	
<b>Email:</b>		<b>Email:</b>	
<b>Phone Numbers:</b>		<b>Phone Numbers:</b>	
<b>Home:</b>		<b>Home:</b>	
<b>Cell:</b>		<b>Cell:</b>	
<b>Work:</b>		<b>Work:</b>	

**Signatures:** By signing this, I give YDP permission to contact the people I have listed here for the purpose of getting in touch with me for activities related to the Youth Development Program. I understand that they will ask for me and that I gave them permission to call. They will leave messages for me if needed. They will not release any personal information about me other than I agreed to work with YDP. This information may be used to contact me as part of a study for foster care outcomes over time, also known as the National Youth in Transition Database (NYTD).

<b>Signature of YDP Participant:</b>	<b>Date:</b>
<b>Signature of Guardian (as needed):</b>	<b>Date:</b>

# Required Documentation

## Referrals:

- All youth ages 14-23 who are or have been in DCF custody may be referred for services. Youth may be referred by DCF-FSD social worker, may self-refer, may be referred by another youth service agency, or may be transferred from the Youth Development Program in one district to the YDP in another district.
- DCF/FSD will provide a list of all eligible youth to be reviewed on a quarterly basis.
- YDP staff meets regularly with DCF-FSD point person to identify youth eligible for services and pending referrals. Youth strengths, needs, recommended services, and expected outcomes along with other relevant information related to program participation is discussed.
- A copy of the referral is retained and information is entered into the program tracking system.

## Intake Assessments:

- Youth will be fully informed about available services, rights, and responsibilities.
- Intake Assessments must be updated annually for all youth actively engaged in the program.

## Locator Forms:

- These forms are embedded in the Intake Assessment and Discharge Summary.
- Locator Forms provide us with permission to follow up with listed supports for the purpose of collecting a NYTD survey in the future.

## Progress Notes:

- Progress notes must demonstrate YDC intervention.
- If a youth is billed for, there must be a progress note on file for that month.
- Progress Notes should include relevant client updates, tasks accomplished, any recommendations suggested or discussed, and program expectations explained. Steps taken and next steps should be present for both youth and YDC.
- Progress Notes should be written within one week of client content and organized in chronological order within the youth's file.
- Progress Notes should always link back to youth goals outlined in the VSA

## Collateral Contacts:

- Collateral Contacts are meant for contacts outside of client meetings that need to be documented (i.e., emails, phone calls, texts, brief interactions with youth, team meetings). For anyone doing direct service work, the best practice guideline is to document all contact/discussions regarding the client.
- Emails and text records can take the place of the Collateral Contacts template.
- Collateral Contacts alone do NOT meet billing requirements. A progress note is still required if a youth is billed for during a month of service.
- Collateral Contacts should be written within one week of client content and organized in chronological order within the youth's file.

## Discharge Summary:

- Discharge is a planned process based on progress towards goals and changes in circumstances.

## Voluntary Services Agreement (VSA):

- A youth must have an active VSA in order to be billed for.
- See VSA section for more details.

# Referral



<b>Youth Name:</b>	<b>Date of Referral:</b>
<b>D.O.B.:</b>	<b>DCF Family #:</b>
<b>S.S.N.:</b>	<b>Medicaid UID:</b>
<b>Address:</b>	
<b>Phone/Contact #:</b>	<b>Email address:</b>
<b>Referral Source:</b>	<b>Phone/email:</b>
<b>DCF Case Worker:</b>	<b>DCF District:</b>
<b>Date of DCF Custody:</b>	<b>DCF Discharge Date:</b>

## Reason For Referral

- |  |  |
|--|--|
| <input type="checkbox"/> Life Skills Assessment<br><input type="checkbox"/> Identification and Development of Permanent Connections<br><input type="checkbox"/> Individual Life Skills Instruction<br><input type="checkbox"/> Life Skills Group<br><input type="checkbox"/> Extended Care | <input type="checkbox"/> Family Support<br><input type="checkbox"/> Applying to College/Financial Aid<br><input type="checkbox"/> Community referrals<br><input type="checkbox"/> Case Management<br><input type="checkbox"/> Other: _____ |
|--|--|

## Housing

**Youth's current living situation:**

**Short-term and long-term housing related goals:**

## Education

<b>Currently enrolled?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>School name and address:</b>	
<b>GED/HS Diploma:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>IEP/504 Plan:</b>	
<b>Education surrogate:</b>	
<b>Guidance counselor/advisor:</b>	
<b>VSAC:</b>	
<b>Short-term and long-term education related goals:</b>	



Employment	
Currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where?	
Supervisor:	
Since:	
Hours per week:	
Short-term and long-term employment related goals:	

Medical Information:	
Health Insurance:	
Special health needs:	
Mental health diagnosis:	
Current medication:	
Prescribing doctor:	
Phone:	
Counselor/therapist:	
Dental care:	
Pregnant or parenting:	
Legal	
Past or present involvement with law enforcement, probation, or court diversion:	
Probation Officer and Phone #:	

Transportation	
Driver's license/permit:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Vehicle:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Driver's education:	

Future plans/interests/skills/strengths:

Any known **challenges, significant information, or barriers** to youth participation in the program:

Please describe your **expectations for Youth Development Program involvement** and activities.

# Intake Assessment: Demographics, Family, Spiritual & Cultural Connections, Enrichment, Housing



## YOUTH DEVELOPMENT PROGRAM Intake Assessment

Date:

Youth Development Coordinator:

**Demographic Information:**

Youth name:			
Date of birth:		SSN and/or Medicaid UID:	
Physical/mailling address:			
Phone numbers:			
E-mail address:			
DCF Social Worker		DCF custody dates:	

Youth identified gender:		Federally recognized tribe:	
Youth identified race:		Hispanic or Latino ethnicity:	
Marital status:		Do you have any children?	
Have you ever been adopted?		If so, when?	

**Family Information:** (note: family is defined as people youth considers to be family)

Name	Relationship	Support Provided

**Spiritual and Cultural Connections or Affiliations:**

**Recreational/Enrichment Activities and Interests:**

**Housing:**

Current living situation:	
Have you been without a regular place to stay at any time during the past year?	
Short-term and long-term housing related goals:	

# Intake Assessment: Education, Employment, Financial, Transportation, Medical



## YOUTH DEVELOPMENT PROGRAM Intake Assessment

### Education:

Currently enrolled?		School name and address:
Expected graduation/grade/HS diploma:		
IEP/504 Plan:		
Academic Support (Tutor, Guidance Counselor, VSAC Outreach, Advisor):		
Have you been suspended or expelled at any point?		
Short-term and long-term education related goals:		

### Employment:

Currently employed?		Location:	
Dates of employment:		Hours per week:	
Past work experience:			
Career preparation services:			
Vocational training:			
Military enlisted:			
Short-term and long-term employment related goals:			

### Financial

Do you have a bank account?	
Do you have a budget?	
Do you currently receive any financial assistance?	
Do you receive Social Security payments?	
Do you have any debt?	
Do you have your credit report?	
Are there issues that need to be resolved?	

### Transportation:

Driver's permit /license:	
Driver's education:	
Vehicle:	

### Medical Information:

Health insurance:	
Doctor and last routine visit:	
Dentist and last routine visit:	
Special health needs:	
Currently in mental health/substance abuse treatment? Or in the past? If so, counselor/therapist:	
Past mental health diagnosis:	
Current mental health symptoms:	
Current medication:	
Have you used substances/alcohol within the past 30 days? Please describe.	
Have you used substances/alcohol in the past? Please describe.	

# Intake Assessment: Legal, Current Situation, Interests, Skills, Strengths, Challenges



## YOUTH DEVELOPMENT PROGRAM Intake Assessment

**Legal:**

Past or present involvement with law enforcement, probation, court diversion, or incarceration:	
Probation Officer:	

**Current Situation:**

Please describe your expectations for YDP involvement and activities. What are you hoping to address or accomplish?

**Please describe your future plans, interests, and skills:**

**What are your major resources and strengths?**

**Do you anticipate any challenges or barriers to participating in the program?**





# Intake Assessment- Participant Locator Form



**How do we keep in touch with you?**

<b>Youth Name:</b>		
<b>Address:</b>		
<b>Email:</b>		
<b>Social Networks:</b>		
<b>Phone Numbers:</b>	<b>Home:</b>	
	<b>Cell:</b>	
	<b>Work:</b>	

**Significant others (parents, relatives, friends, natural supports who always know how to reach you)**

<b>1. Name:</b>		<b>2. Name:</b>	
<b>Relationship:</b>		<b>Relationship:</b>	
<b>Address:</b>		<b>Address:</b>	
<b>Email:</b>		<b>Email:</b>	
<b>Phone Numbers:</b>		<b>Phone Numbers:</b>	
<b>Home:</b>		<b>Home:</b>	
<b>Cell:</b>		<b>Cell:</b>	
<b>Work:</b>		<b>Work:</b>	
<b>3. Name:</b>		<b>4. Name:</b>	
<b>Relationship:</b>		<b>Relationship:</b>	
<b>Address:</b>		<b>Address:</b>	
<b>Email:</b>		<b>Email:</b>	
<b>Phone Numbers:</b>		<b>Phone Numbers:</b>	
<b>Home:</b>		<b>Home:</b>	
<b>Cell:</b>		<b>Cell:</b>	
<b>Work:</b>		<b>Work:</b>	

**Signatures:** By signing this, I give YDP permission to contact the people I have listed here for the purpose of getting in touch with me for activities related to the Youth Development Program. I understand that they will ask for me and that I gave them permission to call. They will leave messages for me if needed. They will not release any personal information about me other than I agreed to work with YDP. This information may be used to contact me as part of a study for foster care outcomes over time, also known as the National Youth in Transition Database (NYTD).

**Signature of YDP Participant:**

**Date:**

**Signature of Guardian (as needed):**

**Date:**

# Progress Notes



## Youth Development Program PROGRESS NOTE

YOUTH NAME	
YDC	
DATE(S) OF CONTACT	
MEETING LOCATION	
TIME SPENT	

SUMMARY OF MEETING(S)
-----------------------

### YDC INTERVENTIONS PROVIDED *(Check all that Apply)*

☐ MI techniques (Open-ended questions, Affirmations, Reflections, Summaries)

☐ Assistance with goal navigation and identifying next steps

☐ Plan of Care development

☐ Support with problem-solving and/or conflict resolution

☐ Completion of funding request

☐ Help developing relationships with others

☐ Coordination of care

☐ Life skills development

☐ Harm-reduction

☐ Other:

	GOAL	STEPS TAKEN	NEXT STEPS
TRANSPORTATION			
EDUCATION			
EMPLOYMENT			
HOUSING			
BUDGETING			
RELATIONSHIPS			
HEALTH			
PARENTING			
LEGAL			
OTHER			

YDC Signature:	
----------------	--

# Collateral Contacts

YOUTH DEVELOPMENT PROGRAM  
COLLATERAL CONTACTS

Youth:	
YDP:	
Date:	
Contact with: (agency, natural support, community)	
Summary of contact:	

# Discharge Summary

Youth Name:	DOB:
YDP:	Medicaid UID# or SSN:
Date of Enrollment:	Date of Discharge:

Reason for discharge	
Summary of services	
Goals and progress	
Aftercare	
Recommendations	Referrals

YDP Signature:	Date:
----------------	-------

# File Review Rubric



	In Full Compliance	In Compliance, with Follow Up Needed	Not in Compliance, Corrective Action Required
<b>Statewide Forms and Other Documentation</b>	All files include a Referral and valid releases. An up to date Intake Assessment and Locator Form are present in all files. All documents have been signed by appropriate parties. DCF case plans are present when appropriate. File contents are well organized and reflective of YDP Database entries.	Most files include a Referral and valid releases. An up to date Intake Assessment and Locator Form are present in most files. Most documents have been signed by appropriate parties. DCF case plans are present when appropriate. File contents are mostly well organized and reflective of YDP Database entries.	Most files are missing a Referral and valid releases. Up to date Intake Assessments and Locator Forms are not present in the files. Many documents have not been signed by appropriate parties. DCF case plans appear to be missing. File contents are mostly disorganized and are not reflective of YDP Database entries.
<b>Voluntary Service Agreements</b>	All active VSAs for the review period are included in the file and signed by appropriate parties. All VSAs include youth-identified goals, strategies, and timelines. All supporting documentation is present in the file. All receipts and records of disbursed funds are present.	Most active VSAs for the review period are included in the file and signed by appropriate parties. Most VSAs include youth-identified goals, strategies, and timelines. Most supporting documentation is present in the file. Most receipts and records of disbursed funds are present.	Most files are missing active VSAs for the review period. Many VSAs exclude youth-identified goals, strategies, and timelines. Some or most supporting documentation is missing from the file. Most or all receipts and records of disbursed funds are missing.
<b>Progress Notes and Collateral Contacts</b>	All progress notes are present in the file for all youth served. Progress notes list youth goals, as well as steps taken and next steps for both YDC and youth. Progress notes clearly identify YDC intervention and youth progress since previous meeting. Collateral contacts are present when appropriate.	Most progress notes are present in the file and list youth goals, as well as steps taken and next steps for both YDC and youth. Most progress notes identify YDC intervention and youth progress since previous meeting. Most collateral contacts are present when appropriate.	Most files are missing progress notes. Progress notes do not consistently list youth goals, steps taken or next steps for YDC or youth. Progress notes do not clearly identify YDC intervention or youth progress since previous meeting. Collateral contacts appear to be missing from the file.
<b>Use of Best Practice Approach</b>	All file documentation is objective, professionally written, and reflective of youth voice. All files demonstrate that youth are being connected to community resources and natural supports. Evidence of permanency supports exists (as evidenced by YDC efforts to connect youth to networks of natural support) in all youth files reviewed.	Most file documentation is objective, professionally written, and reflective of youth voice. Most files demonstrate that youth are being connected to community resources and natural supports. Evidence of permanency supports exists (as evidenced by YDC efforts to connect youth to networks of natural support) in most youth files reviewed.	Some or none of the file documentation is objective, professionally written, nor reflective of youth voice. Files do not consistently demonstrate that youth are being connected to community resources and natural supports. Evidence of permanency supports (as evidenced by YDC efforts to connect youth to networks of natural support) is not present in youth files.



# File Review Rubric: Compliance Definitions

**IN FULL COMPLIANCE:** No further action required.

**IN COMPLIANCE, WITH FOLLOW UP NEEDED:** If not in full compliance, a follow up plan containing corrective measures must be put in place to bring district agency into full compliance. Corrective measures include how the district will address the specific feedback regarding areas of improvement made by the reviewers, and what efforts will be made to maintain these improvements moving forward. A summary email of follow up action taken and plans to maintain improvements is due to the reviewers via email **two-four months** following the review date. The specific date follow up is due to the reviewers will be provided in the file review report. Once follow up action is taken, reported to reviewers, and approved, an addendum will be created to bring the district to full compliance.

**NOT IN COMPLIANCE, CORRECTIVE ACTION REQUIRED:** In response to the specific feedback given by the reviewers in the file review report, a district will submit a Corrective Action Plan. Once approved by the reviewers, the Corrective Action Plan will obligate the agency to bring the program operation or documentation into compliance within a defined time frame that will typically be **two weeks**.

# Extended Care Overview

## Completion of Secondary Education – Category A

- Case managed by DCF
- Continuation of DCF case plan through high school graduation
- Financial supports are continued at same rate for licensed providers
- Signed agreement is renewed after six months
- Up to six months of transition may be granted

### **Eligibility:**

- Youth must turn 18 in DCF custody
- Youth must be under 23
- Youth must be enrolled full-time in high school

## Adult Living Program – Category B

- Case managed by YDP
- Extended foster care
- Adult commits to provide long-term support, care, and life skills instruction
- Financial support is reimbursed at a rate of \$18.70/day
- Youth contribute to their own costs
- Signed agreement is renewed after six months

### **Eligibility:**

- Youth must leave DCF custody after the age of 16, or spend five years in care between the ages of 10 -18
- Youth must be between 18 and 23 years old
- Youth participate in 40 hours per week of productive time

## Youth Investment Grants

- Case managed by YDP
- Provides incidental grants to youth for normalcy and enrichment activities; education/training (e.g. GED testing, ACT and SAT testing, college exploration, application, and orientation expenses, computers, text books, college supplies, legal documents (e.g. birth certificates, passports, IDs, green cards, Visas); driver's license (fees for permit and license, driver's education); security deposits; initial household start-up items (e.g. furniture, dishes, linens); transportation (public transportation costs related to education or family contact, gas cards, bicycle and helmet, minor repairs and tires for vehicle owned by the young person, (this does not include purchase of vehicle)); phone and utilities; medical/dental expenses not covered by insurance; work-related items (e.g. tools, apprentice fees, clothing); one-time emergency expenses; or other reasonable expenses, as approved by YDP/DCF central office

### **Eligibility:**

- Youth must be currently in DCF custody OR
- Have left custody after the age of 16 OR
- Have spent five years in care between the ages of 10-18
- For housing support, youth must participate in 40 hours per week of productive time.

**EXTENDED CARE  
VOLUNTARY SERVICES AGREEMENT**  
TO SUBMIT THIS FORM FOR APPROVAL EMAIL [YDP@WCYSB.ORG](mailto:YDP@WCYSB.ORG)

EFFECTIVE DATES - INDICATE SIXMONTH TERM	
Beginning: <input style="width: 90%;" type="text"/>	Ending: <input style="width: 90%;" type="text"/>

PERSONAL INFORMATION			
Name (Legal): <input style="width: 95%;" type="text"/>			
DOB: <input style="width: 20%;" type="text"/>	SSN #: <input style="width: 20%;" type="text"/>	Medicaid #: <input style="width: 20%;" type="text"/>	Family/Child #: <input style="width: 20%;" type="text"/>
Address: <input style="width: 90%;" type="text"/>		Phone: <input style="width: 20%;" type="text"/>	Email: <input style="width: 20%;" type="text"/>
Date of entry into DCF custody: <input style="width: 20%;" type="text"/>		Date of discharge from DCF custody: <input style="width: 20%;" type="text"/>	



TYPE OF AGREEMENT
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- ☐ **COMPLETION OF SECONDARY EDUCATION**  
(CATEGORY A - FOR FULL-TIME HIGH SCHOOL STUDENTS WHO REACH THEIR 18<sup>TH</sup> BIRTHDAY WHILE IN DCF CUSTODY)
- ☐ PLACEMENT:  DAILY RATE: \$
  - ☐ ANTICIPATED DATE OF HIGH SCHOOL GRADUATION:

- ☐ **ADULT LIVING PROGRAM**  
(CATEGORY B - EXTENDED FOSTER CARE)
- ☐ STANDARD RATE: \$18.70
  - ☐ CONTINUED RATE: \$
  - ☐ SET RATE: \$

- ☐ **YOUTH INVESTMENT GRANTS**  
(CATEGORY C - INDEPENDENT LIVING AND INCIDENTAL LIVING GRANTS)  
(CHOOSE BELOW)

FUNDING NEEDS	DESCRIPTION, RATE & DISBURSEMENT SCHEDULE
Housing-Rent Subsidy <i>Independent living subsidies (paid to a landlord)</i>	
Housing-Security Deposit <i>Deposits for stable independent housing</i>	
Housing-Other <i>Household needs, utilities, storage</i>	
Education-Tuition <i>Tuition</i>	
Education-Other <i>Computers, testing, applications, fees, textbooks</i>	
Relationships <i>Activities nurturing lifelong connections</i>	
Enrichment <i>Camps, sports, music lessons, field trips, internships</i>	
Normalcy <i>Activities supporting normal development</i>	
Employment <i>Work clothes, shoes, supplies, stipends</i>	
Transportation-Driving <i>Drivers education and practice, permits, licenses</i>	
Transportation-Other <i>Repairs, registration, insurance, bicycles</i>	
Health <i>Insurance premiums, deductibles, co-pays, supplies</i>	
Identification <i>Non-driver ID, citizenship documents</i>	
Basic Needs <i>Groceries, clothing, parenting related</i>	
<b>TOTAL \$</b> <input style="width: 100px;" type="text"/>	

MY YOUTH DEVELOPMENT COORDINATOR			
Name:		District:	Agency:
Address:		Phone:	E-Mail:

MY DCF WORKER			
Name:		District:	
Address:		Phone:	E-Mail:

MY FOSTER PARENT / ADULT LIVING PARTNER / GUARDIAN			
Name (Legal):		DOB:	SSN:
Address:		Phone:	E-Mail:

MY RESIDENTIAL PROGRAM			
Agency:		Point Person:	
Address:		Phone:	E-Mail:

MY NATURAL SUPPORTS	
Name:	Address, Phone, E-Mail:
Relationship and support offered:	
Name:	Address, Phone, E-Mail:
Relationship and support offered:	
Name:	Address, Phone, E-Mail:
Relationship and support offered:	

SERVICE PROVIDERS ON MY TEAM	
Service providers/programs I am connected to:	
What services I receive and how services are coordinated:	

MY GOALS & TIMELINES	
ATTACH MOST RECENT DCF CASE PLAN AND/OR DESCRIBE AT LEAST 3 GOALS, STEPS, AND TIMELINES	
GOAL:	
Steps to achieving my goal:	
Timeline:	
GOAL:	
Steps to achieving my goal:	
Timeline:	
GOAL:	
Steps to achieving my goal:	
Timeline:	

HOW DOES EXTENDED CARE FUNDING SUPPORT MY GOALS	

MY STRENGTHS AND RESOURCES	

POTENTIAL BARRIERS TO MY PROGRESS	

HOW I WILL MANAGE THESE BARRIERS	



MY WEEKLY PRODUCTIVE TIME	SPECIFIC ACTIVITIES & LOCATION	HOURS/WEEK
Education or Training		
Employment		
Community Involvement		
Therapeutic Activities		
Other Activities		

ADDITIONAL REQUIRED DOCUMENTATION PER CATEGORY			
CATEGORY A, B & C	CATEGORY A ONLY	CATEGORY B ONLY	CATEGORY C ONLY
<input type="checkbox"/> Intake Assessment & Locator	<input type="checkbox"/> Current DCF Case Plan	<input type="checkbox"/> Background Check Release	<input type="checkbox"/> Youth Budget
<input type="checkbox"/> Youth Connections Scale		<input type="checkbox"/> Permanency Pact	
<input type="checkbox"/> Verification of Productive Time		<input type="checkbox"/> Living Agreements	
<input type="checkbox"/> Releases of Information			

SIGNATURES			DATE
Participant	(A, B, C)		
Youth Development Coordinator	(A, B, C)		
Adult Living Partner	(A, B)		
Guardian/DCF Social Worker	(A)		
<i>Legal guardian signature needed for all youth under 18</i>			
District Director/Designee	(A)		
YDP Statewide Director/Licensed Practitioner	(B, C)		
DCF Policy & Practice Specialist	(A)		
Diagnosis Code		Phase of Life Problem    ≥ 60.0	



**EXTENDED CARE**  
**VOLUNTARY SERVICES AGREEMENT**  
 TO SUBMIT THIS FORM FOR APPROVAL EMAIL [YDP@WCYSB.ORG](mailto:YDP@WCYSB.ORG)

EFFECTIVE DATES - INDICATE SIXMONTH TERM	
Beginning: <input style="width: 90%;" type="text"/>	Ending: <input style="width: 90%;" type="text"/>

PERSONAL INFORMATION			
Name (Legal): <input style="width: 95%;" type="text"/>			
DOB: <input style="width: 20%;" type="text"/>	SSN #: <input style="width: 20%;" type="text"/>	Medicaid #: <input style="width: 20%;" type="text"/>	Family/Child #: <input style="width: 20%;" type="text"/>
Address: <input style="width: 90%;" type="text"/>		Phone: <input style="width: 20%;" type="text"/>	Email: <input style="width: 20%;" type="text"/>
Date of entry into DCF custody: <input style="width: 20%;" type="text"/>		Date of discharge from DCF custody: <input style="width: 20%;" type="text"/>	



TYPE OF AGREEMENT
-------------------

☐ **PLAN OF CARE**

MY YOUTH DEVELOPMENT COORDINATOR			
Name: <input style="width: 90%;" type="text"/>	District: <input style="width: 10%;" type="text"/>	Agency: <input style="width: 90%;" type="text"/>	
Address: <input style="width: 40%;" type="text"/>	Phone: <input style="width: 20%;" type="text"/>	E-Mail: <input style="width: 40%;" type="text"/>	

MY DCF WORKER			
Name: <input style="width: 90%;" type="text"/>	District: <input style="width: 10%;" type="text"/>		
Address: <input style="width: 40%;" type="text"/>	Phone: <input style="width: 20%;" type="text"/>	E-Mail: <input style="width: 40%;" type="text"/>	

MY FOSTER PARENT/ADULT LIVING PARTNER/GUARDIAN			
Name (Legal): <input style="width: 90%;" type="text"/>	DOB: <input style="width: 20%;" type="text"/>	SSN: <input style="width: 20%;" type="text"/>	
Address: <input style="width: 40%;" type="text"/>	Phone: <input style="width: 20%;" type="text"/>	E-Mail: <input style="width: 40%;" type="text"/>	

MY RESIDENTIAL PROGRAM			
Agency: <input style="width: 90%;" type="text"/>		Point Person: <input style="width: 90%;" type="text"/>	
Address: <input style="width: 40%;" type="text"/>	Phone: <input style="width: 20%;" type="text"/>	E-Mail: <input style="width: 40%;" type="text"/>	

MY NATURAL SUPPORTS	
Name: <input style="width: 90%;" type="text"/>	Address, Phone, E-Mail: <input style="width: 70%;" type="text"/>
Relationship and support offered: <input style="width: 95%;" type="text"/>	
Name: <input style="width: 90%;" type="text"/>	Address, Phone, E-Mail: <input style="width: 70%;" type="text"/>
Relationship and support offered: <input style="width: 95%;" type="text"/>	
Name: <input style="width: 90%;" type="text"/>	Address, Phone, E-Mail: <input style="width: 70%;" type="text"/>
Relationship and support offered: <input style="width: 95%;" type="text"/>	

SERVICE PROVIDERS ON MY TEAM	
Service providers/programs I am connected to: <input style="width: 95%;" type="text"/>	
What services I receive and how services are coordinated: <input style="width: 95%;" type="text"/>	

MY GOALS & TIMELINES	
<i>ATTACH MOST RECENT DCF CASE PLAN AND/OR DESCRIBE AT LEAST 3 GOALS, STEPS, AND TIMELINES</i>	
<b>GOAL:</b> <input style="width: 95%;" type="text"/>	
Steps to achieving my goal: <input style="width: 95%;" type="text"/>	
Timeline: <input style="width: 20%;" type="text"/>	
<b>GOAL:</b> <input style="width: 95%;" type="text"/>	
Steps to achieving my goal: <input style="width: 95%;" type="text"/>	
Timeline: <input style="width: 20%;" type="text"/>	
<b>GOAL:</b> <input style="width: 95%;" type="text"/>	
Steps to achieving my goal: <input style="width: 95%;" type="text"/>	
Timeline: <input style="width: 20%;" type="text"/>	

**HOW YDP ENGAGEMENT SUPPORTS MY GOALS**

**MY STRENGTHS AND RESOURCES**

**POTENTIAL BARRIERS TO MY PROGRESS**

**HOW I WILL MANAGE THESE BARRIERS**


MY WEEKLY PRODUCTIVE TIME	SPECIFIC ACTIVITIES & LOCATION	HOURS / WEEK
Education or Training	<input type="text"/>	<input type="text"/>
Employment	<input type="text"/>	<input type="text"/>
Community Involvement	<input type="text"/>	<input type="text"/>
Therapeutic Activities	<input type="text"/>	<input type="text"/>
Other Activities	<input type="text"/>	<input type="text"/>

**ADDITIONAL REQUIRED DOCUMENTATION PER CATEGORY**

CATEGORY A, B & C	CATEGORY A ONLY	CATEGORY B ONLY	CATEGORY C ONLY
<input type="checkbox"/> Intake Assessment & Locator	<input type="checkbox"/> Current DCF Case Plan	<input type="checkbox"/> Background Check Release	<input type="checkbox"/> Youth Budget
<input type="checkbox"/> Youth Connections Scale		<input type="checkbox"/> Permanency Pact	
<input type="checkbox"/> Verification of Productive Time		<input type="checkbox"/> Living Agreements	
<input type="checkbox"/> Releases of Information			

**SIGNATURES**

		DATE
Participant	(A, B, C)	<input type="text"/>
Youth Development Coordinator	(A, B, C)	<input type="text"/>
Adult Living Partner	(A, B)	<input type="text"/>
Guardian/DCF Social Worker	(A)	<input type="text"/>
<i>Legal guardian signature needed for all youth under 18</i>		
District Director/Designee	(A)	<input type="text"/>
YDP Statewide Director/Licensed Practitioner	(B, C)	<input type="text"/>
DCF Policy & Practice Specialist	(A)	<input type="text"/>
Diagnosis Code	Phase of Life Problem Z 60.0	<input type="text"/>

# Budget Worksheet



## YOUTH DEVELOPMENT PROGRAM

Youth Name:

Date:

### MONTHLY BUDGET

Income		Expenses		Assets		Debt	
Employment:	\$0.00	Rent:	\$0.00	Savings:	\$0.00	Student Loans:	\$0.00
2 <sup>nd</sup> job:	\$0.00	Utilities:	\$0.00	Car:	\$0.00	Auto Loan:	\$0.00
SSI/SSDI:	\$0.00	Phone:	\$0.00	Other:	\$0.00	Personal:	\$0.00
Reach Up:	\$0.00	Groceries:	\$0.00	Other:	\$0.00	Other:	\$0.00
YDP monthly stipend:	\$0.00	Transportation:	\$0.00		\$0.00	Other:	\$0.00
3 Squares:	\$0.00	Transportation:	\$0.00		\$0.00		\$0.00
Other:	\$0.00	Home maintenance:	\$0.00		\$0.00		\$0.00
Other:	\$0.00	Clothing/personal:	\$0.00		\$0.00		\$0.00
	\$0.00	Recreation:	\$0.00		\$0.00		\$0.00
	\$0.00	Savings:	\$0.00		\$0.00		\$0.00
	\$0.00	Loan/debt:	\$0.00		\$0.00		\$0.00
	\$0.00	Loan/debt:	\$0.00		\$0.00		\$0.00
	\$0.00	Other:	\$0.00		\$0.00		\$0.00
	\$0.00	Other:	\$0.00		\$0.00		\$0.00
	\$0.00		\$0.00		\$0.00		\$0.00
	\$0.00		\$0.00		\$0.00		\$0.00
	\$0.00		\$0.00		\$0.00		\$0.00
	\$0.00		\$0.00		\$0.00		\$0.00
	\$0.00		\$0.00		\$0.00		\$0.00
<b>TOTAL:</b>	<b>\$0.00</b>	<b>TOTAL:</b>	<b>\$0.00</b>	<b>TOTAL:</b>	<b>\$0.00</b>	<b>TOTAL:</b>	<b>\$0.00</b>

# VSA Guidelines

• VSAs should be submitted to the YDP Director ( <a href="mailto:ydp@wcysb.org">ydp@wcysb.org</a> ) for approval.
• When emailing VSAs, encrypt the document to ensure confidentiality.
• Funds need to be spent and invoiced within the six month effective period of the VSA. If additional time is needed to spend funds, a new VSA will be needed.
• Funds need to be spent and invoiced by the same district that requested them. If clients are transferred, a new VSA will be needed.
• VSAs must be reviewed and updated at least every six months. An entry that simply references the previous VSA does not constitute a review of the VSA.
• If additional funds are spent beyond the original approval amount, or changes are being requested, an email needs to be sent describing the increased need to <a href="mailto:ydp@wcysb.org">ydp@wcysb.org</a> . Ideally, the email sent will be a response to the initial email thread and reference the youth, VSA, initial approval amount, and updates to the original plan.
• Funding must clearly link to youth goals in the VSA. Even if it seems obvious how the money will advance the youth's circumstances, articulate the rationale for all requested funding.
• If youth are currently in DCF custody, indicate status as "current" in the date of discharge from DCF custody box.
• VSAs should not be generic from one client to the next.
• Use the youth's own words when possible. If youth language is used in the VSA, use quotation marks or indicate that the youth contributed to the specific section. YDC can (and should) flesh out the plan beyond the youths' contribution to the plan, and then review with youth/guardian before signature(s) are obtained.
• VSAs should be typed, not handwritten.
• The service provider section is more than a list of providers. It describes how team members work together and exactly how they are supporting the youth. Use last names and job titles.
• In the goals section of the VSA, use "real world" steps and benchmarks for measuring progress toward the goal. Use specific time-frames and make sure the goals are SMART (Specific, Measurable, Achievable, Relevant, and Time-bound).
• If three natural supports cannot be identified by the youth when developing the VSA, explain how YDP services will assist the youth with building connections.
• Use the YDP Budgeting Worksheet for all youth who are generating income and/or are over 18. Provide additional information describing the budget and the youth's financial situation as needed. If the youth has no income, explain how living expenses are paid.
• At the end of the VSA, check the boxes if you have the supporting documentation on file.
• Ensure that all youth read, participate in the development of, and sign VSAs. If significant edits are made to the VSA, youth must re-sign the VSA and be made aware of any adjustments.
• All plans must be signed by the youth, YDC and legal guardian (if youth is under the age of 18).
• Signatures must be updated every time the VSA is submitted.
• Category B Agreements are set at the standard daily rate of \$18.70. If there is a continued rate or a requested set rate, please provide justification for the higher rate and a timeline for a decrease in rate over time. Requests for higher rates are subject to DCF approval.



# Typical Range for Youth Investment Grant Funding



<b>Tuition</b>	\$2500/year <ul style="list-style-type: none"> <li>• Must provide award letter and bill</li> <li>• Ensure that youth have accessed all available sources of support (VSAC, work-study aid, loans, high schools, Scholly app (myscholly.com), rotary, credit unions, etc.)</li> </ul>
<b>Computers</b>	Up to \$450 (including software, warranty, carrying case) <ul style="list-style-type: none"> <li>• Computers are prioritized for youth needing access for the purposes of higher education and/or vocation.</li> <li>• Youth still in high school are not eligible for computer funding.</li> <li>• Check out special deals for college students (e.g. college code for Microsoft Office)</li> </ul>
<b>Text books</b>	\$600 per semester <ul style="list-style-type: none"> <li>• Explore options like used books, rentals, digital text, sell-back, etc.</li> </ul>
<b>Car insurance</b>	\$100 per month, three months at a time
<b>Car repairs</b>	\$1000 for lifetime of the vehicle, including tires
<b>Drivers' education</b>	\$800 <ul style="list-style-type: none"> <li>• Check with VSAC about non-degree grant if youth is not enrolled in high school.</li> <li>• If youth is still enrolled in school, ask school to provide funds and use IEP goals to support.</li> </ul>
<b>Gas cards</b>	Gas cards can be provided for travel to work, school, appointments, etc. in a short-term way. A more sustainable source of funding for gas must be explored. Families and youth will not be reimbursed based on mileage.
<b>Progressive employment</b>	Stipends for youth - \$40-\$100/week depending on time commitment, emphasis on skills/education/networks of support, also service if possible
<b>Clothing</b>	Up to \$300 including basic clothing needs, interview/work clothing, shoes. <ul style="list-style-type: none"> <li>• If youth are under 18 and need clothing or other basic needs, must include explanation about why placement/guardian cannot meet youth needs.</li> <li>• Utilize thrift stores, coat drives.</li> <li>• When possible, youth contribute to cost.</li> </ul>
<b>Household start-up</b>	\$300 (linens, dishes, furniture, etc) <ul style="list-style-type: none"> <li>• Explore thrift/second-hand stores.</li> </ul>
<b>Storage unit</b>	\$50/month for up to three months.
<b>Bicycles</b>	Up to \$400, including helmet and lock
<b>Cell phone</b>	\$150 maximum
<b>Cell phone service</b>	\$50/month, three months at a time. Cell phone payments are not for "YDP/other service providers to contact youth" but for youth to access relationships, employment, service providers, emergencies, etc.
<b>Senior pictures</b>	Up to \$150
<b>Prom</b>	Up to \$250
<b>Class ring</b>	Up to \$150
<b>Debt</b>	Make a plan with youth to address debt, access financial education, can be supported through Extended Care with a thorough plan
<b>Fines</b>	Youth must contribute to total amount owed, some restitution needs to have taken place (make include counseling, community service, etc.), team should be in agreement that plan to resolve fine related debt is appropriate, shouldn't be repaid right after fine has been incurred
<b>Hotel stays</b>	Not paid through YDP, may be available through Economic Services or 211
<b>Tents for homeless youth</b>	Not supported through YDP, youth should be encouraged to access shelters, 211, ES, all other available supports for emergency shelter first
<b>Rental subsidies</b>	<ul style="list-style-type: none"> <li>• Youth must demonstrate a plan to sustain housing long term.</li> <li>• Subsidy should decrease over time.</li> </ul>
<b>Groceries</b>	<ul style="list-style-type: none"> <li>• Youth must apply for 3Squares (if eligible) before requesting grocery support; must utilize food shelves/pantries.</li> </ul>

# Examples for Development of VSA: Goals- Employment

## Employment

### Part-time job

- What is it about me that will help me to accomplish this goal: “I want money so I can be independent”
- Things I can do to accomplish this goal: “Fill out job applications, call and check-in with employer, go to interviews”
- How I will know I am making progress: “When I obtain an interview”
- What strengths or assets I am building: “I am building responsibility”

### Obtain job in Burlington area (to prepare for housing transition in Spring)

- What is it about me that will help me to accomplish this goal: Work ethic, work experience, hard-working
- Things I can do to accomplish this goal: Research job openings, apply, interview, connect with community resources
- How I will know I am making progress: “I will obtain an interview”
- What strengths or assets I am building: Income, building resume, independence and professional references

### Obtaining steady job

- What is it about me that will help me to accomplish this goal: “I am good at following directions, accepting feedback, easy-going”
- Things I can do to accomplish this goal: Build resume with supports, apply to job, persistent with following-up with employer
- How I will know I am making progress: “I will be hearing back from employers and interviewing”
- What strengths or assets I am building: “Building an income, getting experience in work field”

### Part-time employment

- What is it about me that will help me to accomplish this goal: Youth would like to remain productive and continue strengthening social skills
- Things I can do to accomplish this goal: Create reference list for job applications and resume, complete job applications with YDC support, build resume, hand-in job applications and speak to employers
- How I will know I am making progress: Talking to employers and obtaining interviews
- What strengths or assets I am building: Responsibility, social skills, income and productivity

### Part-time employment

- What is it about me that will help me to accomplish this goal: “I am intelligent, motivated and want to have an income”
- Things I can do to accomplish this goal: “Pick-up job applications, complete job applications with support from YDC, turn-in job applications and call to follow-up with employers”
- How I will know I am making progress: “I will hear back from employers and be asked for an interview”
- What strengths or assets I am building: Responsibility, trust, income, budgeting

### Getting a Part-Time job

- What is it about me that will help me to accomplish this goal: “I’m a friendly person and want to earn money”
- Things I can do to accomplish this goal: “Pick-up and complete job applications”
- How I will know I am making progress: “I get a job interview”
- What strengths or assets I am building: “Maturity, responsibility, income”



# Examples for Development of VSA: Goals- Education

## Education

### Graduate high school

- What is it about me that will help me to accomplish this goal: “I am motivated to go to college”
- Things I can do to accomplish this goal: “Complete my school work, study, time management skills, maintain contact with guidance counselor and team”
- How I will know I am making progress: “I will obtain good grades that will look good on college applications”
- What strengths or assets I am building: “Time management skills, study skills”

### Completing senior year

- What is it about me that will help me to accomplish this goal: “Determined, motivated, willing to work, I want a full education”
- Things I can do to accomplish this goal: “Meetings, enrolling, sticking to goals and finishing the year”
- How I will know I am making progress: “Report cards, IEP meetings and graduating”
- What strengths or assets I am building: “Making it easier to go into my career field, make me more qualified for jobs”

### Enrolling in Alternative school

- What is it about me that will help me to accomplish this goal: “I want and need a high school education”
- Things I can do to accomplish this goal: “Get an application to this alternative school, communicate with team and communicate with school staff”
- How I will know I am making progress: “I get accepted into the school”
- What strengths or assets I am building: “knowledge, high school diploma”

### High School Diploma through Vermont Adult Learning

- What is it about me that will help me to accomplish this goal: Value education, want to have high school diploma on job application and eventually enlist in the military
- Things I can do to accomplish this goal: Continue completing work assigned by Vermont Adult Learning and check-in with advisor
- How I will know I am making progress: Good grades, positive feedback from team
- What strengths or assets I am building: Education, responsibility, more appealing on job applications

### College Applications & Financial Aid

- What is it about me that will help me to accomplish this goal: “I want a career after high school” and attending post-secondary education training will allow for more opportunities for employment
- Things I can do to accomplish this goal: Research colleges online, complete applications, connect with YDC and VSAC Outreach, complete FAFSA and apply for scholarships
- How I will know I am making progress: “I keep accessing my resources,” completing applications to multiple schools, receiving positive feedback from service providers, receiving additional information from colleges
- What strengths or assets I am building: Education, work experience, responsibility, ability to develop and work toward short-term and long-term goals

# Examples for Development of VSA: Goals- Education

## **Apply to college**

- What is it about me that will help me to accomplish this goal: “I want a good career and future.” Obtaining a college education will allow for room to grow professionally.
- Things I can do to accomplish this goal: Meet with guidance counselor, sign-up for SAT exam, draft essays for applications and scholarships, obtain all required documents, awareness of deadlines, continue working with YDC to plan
- How I will know I am making progress: “I will obtain good grades first semester and will gather documents that are needed for college applications”.
- What strengths or assets I am building: Education, career, long-term planning

## **Explore Post-Secondary Education opportunities out-of-state**

- What is it about me that will help me to accomplish this goal: “I am a determined person and I value education.”
- Things I can do to accomplish this goal: Research post-secondary education opportunities in Maine, Apply for a FAFSA in January, explore colleges online
- How I will know I am making progress: “I will have a plan in place and complete applications.”
- What strengths or assets I am building: Education, career goals, income

## **Complete post-secondary education (immediate goal: first year) with honors**

- What is it about me that will help me to accomplish this goal: “My desire for improvement, my study habits, my time management skills and my need for perfection”
- Things I can do to accomplish this goal: study, and time management habits
- How I will know I am making progress: get good grades and succeed in challenging curriculum
- What strengths or assets I am building: time management, self-independence and education

## **Complete second year at CSJ (associate's degree) and enroll in CCV courses**

- What is it about me that will help me to accomplish this goal: I really want independence and a degree in the nursing field
- Things I can do to accomplish this goal: Continue to meet with educational supports on CSJ campus, connect with CCV advisor to discuss VTC nursing pre-requisite courses. Enroll in CCV courses.
- How I will know I am making progress: I will have good grades (above C average) and time management skills
- What strengths or assets I am building: Education, preparing to pursue career in nursing

# Examples for Development of VSA: Goals- Health

## Preparing for living on own/life skills: meal planning and cooking

- What is it about me that will help me to accomplish this goal: I want to be healthy and living independently
- Things I can do to accomplish this goal: Work with YDC to discuss and practice cooking and meal planning. Research healthy meals, shadow foster parents while they are cooking and ask questions.
- How I will know I am making progress: "I will be able to cook food for myself and live on my own"
- What strengths or assets I am building: Independence, maturity, responsibility, good health

## Enrolling and maintaining health insurance coverage

- What is it about me that will help me to accomplish this goal: "My organization and commitment will help me accomplish this"
- Things I can do to accomplish this goal: Finish Medicaid application and complete interview with Economic Services to ensure coverage
- How I will know I am making progress: "When I secure/maintain coverage"
- What strengths or assets I am building: "Self independence"

## Health insurance coverage

- What is it about me that will help me to accomplish this goal: "I want to maintain health insurance coverage so I can be healthy"
- Things I can do to accomplish this goal: "I have completed Medicaid application for my own health insurance and am waiting to hear back about interview with Economic Services"
- How I will know I am making progress: "When I have health insurance"
- What strengths or assets I am building: Staying healthy, independence

## Quit Smoking Cigarettes

- What is it about me that will help me to accomplish this goal: "will-power, motivated, want a healthier lifestyle, want to save money"
- Things I can do to accomplish this goal: Contact VT Quit Network, team with friends, remain self-aware, track expenses, and consult with doctor
- How I will know I am making progress: cutting back on purchasing cigarettes, saving money, feeling healthy
- What strengths or assets I am building: Healthy lifestyle, confidence, saving skills

## Re-accessing Counseling

- What is it about me that will help me to accomplish this goal: "This is a form of self-care for me."
- Things I can do to accomplish this goal: Car repairs for reliable transportation to counseling. Call counselor to reconnect and schedule consistent meetings. Inform employer of updated availability.
- How I will know I am making progress: "I will be attending counseling."
- What strengths or assets I am building: Having someone to talk to, communication and stress relief

# Examples for Development of VSA: Goals- Health, Relationships

## Health

### Explore physical health concerns with doctor

- What is it about me that will help me to accomplish this goal: concerned about proposed health concerns, I want to be healthy
- Things I can do to accomplish this goal: Schedule doctor appointment, discuss family history, maintain check-ups, discuss with team and support networks
- How I will know I am making progress: “Doctor Appointment will be scheduled and I will obtain more information about my health concerns”
- What strengths or assets I am building: Good health and advocating for myself

### Remain substance free

- What is it about me that will help me to accomplish this goal: “I am intelligent and I want to make good choices”
- Things I can do to accomplish this goal: “Use my support systems (DCF, Kinship, YDC), surround myself with supportive peers, play sports, stay busy”
- How I will know I am making progress: Clean urine assessments, receive positive feedback from team, feel healthier
- What strengths or assets I am building: Able to hold a job and career, able to focus on school

## Relationships

### Successful visitations with family member

- What is it about me that will help me to accomplish this goal: Youth cares about relationship with dad and wants to maintain communication for long-term relationship after leaving DCF custody
- Things I can do to accomplish this goal: Communicate openly during visitations, reach out supports when appropriate, maintain relationship with Aunt for transportation and support during visitations, express feeling effectively, engage in healthy and productive activities during visitations, engage in individual counseling (referral has been made)
- How I will know I am making progress: “Communicate feelings effectively, advocating for myself, eliminating conflict with other family members during visitations, reaching out to other supports when needed.”
- What strengths or assets I am building: Positive, long-term relationship with dad and strengthening social skills

### Developing assertive communication skills: addressing peer pressure

- What is it about me that will help me to accomplish this goal: “I need to learn to stick up for myself.” Caring about consequences of peer pressure.
- Things I can do to accomplish this goal: Receive support from YDC to discuss and develop communication skills to say “no” to peer pressure and avoid situations, discuss situations and challenges with support systems before making decision.
- How I will know I am making progress: “I will have a backbone.” Develop skills to walk-away. Receive feedback from natural supports.
- What strengths or assets I am building: “Backbone, confidence and communication skills”

# Examples for Development of VSA: Goals- Relationships, Budgeting

## Relationships

### Having a positive social life/social group

- What is it about me that will help me to accomplish this goal: “I am trustworthy, honest and have a good sense of self”
- Things I can do to accomplish this goal: Make new friends, be outgoing, and strengthen communication skills
- How I will know I am making progress: “When I have a positive social life”
- What strengths or assets I am building: Self-confidence and responsibility

### Strengthen communication skills

- What is it about me that will help me to accomplish this goal: “I want to socialize and be able to hold a conversation”
- Things I can do to accomplish this goal: “Learn to speak like an adult, role-play conversations with YDC to practice communication skills”
- How I will know I am making progress: “I will have better conversations and will feel comfortable”
- What strengths or assets I am building: “Communication skills, professional skills, socialization with peers”

## Budgeting

### Financial Management Skills: How to write a check

- What is it about me that will help me to accomplish this goal: Motivation to strengthen independent living skills
- Things I can do to accomplish this goal: Meet with YDC to discuss and practice writing checks, obtain check book
- How I will know I am making progress: Practice writing checks, feel confident to write checks and maintain check book balance, learn additional information about online banking
- What strengths or assets I am building: Independent living skills, financial management skills, self-sufficiency

### Save \$1,500 toward vehicle

- What is it about me that will help me to accomplish this goal: “I want a vehicle and independence.” Motivated, seeking self-sufficiency and responsibility.
- Things I can do to accomplish this goal: Save income, continue babysitting and explore other job opportunities when appropriate, develop budget, long-term planning, track expenses.
- How I will know I am making progress: Saving money, aware of expenses, money management skills
- What strengths or assets I am building: Independence, self-sufficiency, transportation, responsibility, vehicle

### Save \$3,000 for new, used vehicle

- What is it about me that will help me to accomplish this goal: “I am motivated to take the steps to achieve this goal, I want a safe and reliable car to remain independent”
- Things I can do to accomplish this goal: “Save income, create budget, stick to budget, and strengthen financial management skills with YDP support”
- How I will know I am making progress: “I will be sticking to the budget I have created and cutting costs in different areas”
- What strengths or assets I am building: “Learning how to budget my income and apply this life skill to future expenses”

# Examples for Development of VSA: Goals- Transportation

## Transportation

### Permit

- What is it about me that will help me to accomplish this goal: Working to pay off fines to be eligible for permit
- Things I can do to accomplish this goal: Continue working, study for permit test with support systems, keep in contact with lawyer to obtain information about fines
- How I will know I am making progress: Saving goal amount to pay off fines
- What strengths or assets I am building: Keeping a job, becoming more independent by driving, responsibility, pay off fines

### Learner's Permit

- What is it about me that will help me to accomplish this goal: "I want to be more independent and self-sufficient"
- Things I can do to accomplish this goal: "Study for permit with YDC, complete practice tests, work with DCF work to obtains social security card and birth certificate so I can have necessary documentation"
- How I will know I am making progress: "I will obtain the documents I need in order to take permit exam"
- What strengths or assets I am building: "Self-reliance and driving skills"

### Learner's Permit

- What is it about me that will help me to accomplish this goal: Motivated to continue working toward independence, would like to be self-sufficient with transportation
- Things I can do to accomplish this goal: Study permit book and practice tests, schedule and complete permit exam at DMV
- How I will know I am making progress: Will feel confident to take permit exam
- What strengths or assets I am building: Self-sufficiency with transportation, responsibility, opportunity to enroll in Driver's Education at school, driving skills

### Learner's Permit

- What is it about me that will help me to accomplish this goal: "I want my permit so I do not need to rely on other people for rides and I want to be independent."
- Things I can do to accomplish this goal: Complete practice tests with YDC, study permit book, schedule permit exam
- How I will know I am making progress: Complete practice tests, permit exam scheduled and youth will feel confident to attend and complete permit exam. Driver's education course has been added to next semester's schedule at high school.
- What strengths or assets I am building: Self-sufficiency with transportation, independent living skills, driving skills, responsibility, a sense of freedom

### Getting my Driver's License

- What is it about me that will help me to accomplish this goal: "I'm motivated"
- Things I can do to accomplish this goal: Apply for Driver's Education, practice driving with learner's permit and complete driver's log needed to take driver's exam.
- How I will know I am making progress: Getting into driver's education course and completing driver's exam
- What strengths or assets I am building: Self-sufficiency, transportation, independence



# Examples for Development of VSA: Goals- Transportation

## Transportation

### Learner's Permit

- What is it about me that will help me to accomplish this goal: "I want my permit so I do not need to rely on other people for rides and I want to be independent."
- Things I can do to accomplish this goal: Complete practice tests with YDC, study permit book, schedule permit exam
- How I will know I am making progress: Complete practice tests, permit exam scheduled and youth will feel confident to attend and complete permit exam. Driver's education course has been added to next semester's schedule at high school.
- What strengths or assets I am building: Self-sufficiency with transportation, independent living skills, driving skills, responsibility, a sense of freedom

### Getting my Driver's License

- What is it about me that will help me to accomplish this goal: "I'm motivated"
- Things I can do to accomplish this goal: Apply for Driver's Education, practice driving with learner's permit and complete driver's log needed to take driver's exam.
- How I will know I am making progress: Getting into driver's education course and completing driver's exam
- What strengths or assets I am building: Self-sufficiency, transportation, independence

### Obtain more affordable vehicle

- What is it about me that will help me to accomplish this goal: "I need to get rid of my car because I can't afford the car payments and it has many repairs."
- Things I can do to accomplish this goal: Communicate with dealerships about trading-in vehicle, research leasing options for future, receive suggestions from natural supports, budget to make car payments each month, explore tracking (credit builder) loan options at opportunities bank to increase credit score.
- How I will know I am making progress: Able to pay car payments each month, begin tracker loan at opportunities credit union
- What strengths or assets I am building: Credit, reliability, financial management skills

### Repairing car

- What is it about me that will help me to accomplish this goal: "Determined to be self-sufficient"
- Things I can do to accomplish this goal: Work, save income, budget for repairs, contact repair shops to have car repaired.
- How I will know I am making progress: "I will have reliable transportation to get to work, school and meetings with service providers. I will not have to rely on others for a ride."
- What strengths or assets I am building: Self-sufficiency, independence, transportation

### Repairing car and/or accessing public transportation

- What is it about me that will help me to accomplish this goal: "I need to have reliable transportation to get to work and appointments"
- Things I can do to accomplish this goal: "Save money, keep up with repairs, access bus for transportation if/when I move to a different area"
- How I will know I am making progress: "When my car doesn't break down and I have stable transportation"
- What strengths or assets I am building: "Being able to keep a job and rely on myself"

# Examples for Development of VSA: Goals- Housing

## Housing

### Moving into an apartment

- What is it about me that will help me to accomplish this goal: “motivated to move out of parents home and live on my own”
- Things I can do to accomplish this goal: Work, save money, budget, research apartments, apply and have credit score checked, discuss eligibility for YDP living agreements
- How I will know I am making progress: “I will be getting my own place”
- What strengths or assets I am building: Independence, strength and stability

### Getting an apartment/YDP Housing agreement

- What is it about me that will help me to accomplish this goal: “I want to live on my own and in safe living environment”
- Things I can do to accomplish this goal: Research apartments online, contact landlords, apartment showings, save money, discuss YDP supports
- How I will know I am making progress: “When I get my own place and find something that is affordable”
- What strengths or assets I am building: Independence, stress relief

# Examples for Development of VSA: Strengths & Natural Supports

## Strengths:

- Creative, artistic, good at communicating, sense of humor
- Softball, athletic, leadership, supportive, good friend, sense of humor, intelligent
- “Good self-motivation, good goal setting qualities, sense of humor, insight, creative and acceptance of others.”
- “Outgoing, independent, motivated, sense of humor, respectful and advocate for myself”
- “Good advocate for myself, reading, sense of humor and determined”
- “Determined”, “goal-orientated”, sense of humor, “leader”, excellent work-ethic, friend, caring, “forgiving,” “honest”
- Honesty, hard-working, committed, motivated to continue post-secondary education
- Tech-savvy, science, mathematics, sense of humor, creative, friendly
- Dancing, singing, drawing, outdoor activities, social skills, friendly, sociology, sense of humor
- “Good attitude,” animal-lover, learner, patient, friendly, open-minded, engaging, positive sense of humor, professional
- “I am a friendly person, have a good sense of humor, being motivated, being persistent, drawing, architectural activities and accomplishing set goals.”
- Athletic, intelligent, friendly, respectful, good sense of humor, strong-willed and caring
- Friendship, sense of humor, responsible, respectful, smart, motivated

## Natural Supports:

- Parents/supportive adults: support with strengthening time management skills, parental figures, providing me with a home, very understanding, life mentors, emotional support, feedback with decision-making, housing, super amazing, loving and welcoming, support with reaching goals, emotional support and housing, helped with housing, they are caring individuals and allowed me to stay in their home after aging out of DCF custody, someone to go to and help with my needs, help with driving and support, communication, supportive of goals, provides housing, care providers, have become family, parental figures, emotional support, keep me on track with education
- Family: emotional support with challenges, support with family challenges, guidance, family support, emotional support and housing, educational surrogate, respite provider, advocates for me and occasional financial support, financial support, emotional support, “He can read my mind and knows me best,” housing, transportation to work at times, supportive with basic needs and someone to talk to, maintains communication, support with long-term planning, supportive of goals and provides emotional support, “she has taught me how to cook and clean and be more independent,” maintains communication, frequent check-ins with youth and supports education-related goals, love her very much, best friend
- Peers: Emotional support, honest, friendship, collaborate with college applications, life-long friend, emotional support, “she is my rock,” strongest support system, supportive, people I can talk to comfortably, support with school work, best friend of 7 years and support system
- Partners: Socially positive and accepting, emotional support, transportation and financial support at times, she is substance free and open for communication, supports goal of high school diploma and provides emotional support
- YDP: help with preparing for independence and transitions, support with applying to college and decision-making skills, help with independent living skills, financial support, independent living skills and connects me to community resources, “provides support with employment and answers questions,” working on life skills, we meet once a week or so, good help, working toward independence

# Examples for Development of VSA: Barriers

## Barriers:

- Procrastination: Work with YDC and foster parents to strengthen time management skills, use planner throughout school year to organize assignments and deadlines, focus on school work at home and meet with guidance counselor regularly
- Flunking out of school, inability to access known resources, problems socializing with peers. I will connect with Youth Development Program and campus resources when appropriate and needed. I will be open to socializing with peers and meeting new people at college. I will become involved on campus.
- Lack of communication skills and confidence (saying “no” to peer pressure): work with YDC and other supports to strengthen these skills, walk-away, discuss decisions with foster family, avoid situations, and remove negative friendships
- Outside opinions/influences: “Do my own thing and be my own person”, focus on long-term goals and own career path
- Car breaking down: save as much money as possible, cut expenses to save for used vehicle
- Not staying on budget: work with YDC to strengthen budgeting skills and discuss budget monthly
- Communication: time management with socialization during school year, prioritize school work and employment
- Potential Barriers: graduating high school, transportation, lack of motivation, peer relationships, getting hired, substance abuse.
- I will be saving money to contribute toward gas until I obtain permit/driver's license, I will ask reliable adults to provide transportation, I will stay focused with education, I will meet regularly with educational supports, I will surround myself with sober, positive friends and acknowledge the potential consequences of substance use, maintain contact with all supports
- Attachments to others (adjust goals and not move out-of-state): Focus on long-term goals and self-care, communicate goals with supports, outweigh pros and cons
- Credit Score: explore and begin tracking loan at opportunities credit union bank to increase credit score and save money simultaneously
- Transportation: Save income to pay for car repairs, ask supportive for rides to work until car is fixed.
- Saving enough money for apartment: Work on strengthening budgeting skills
- Procrastination: self-motivation, use planner for school assignments and deadlines, support from foster family and friends, maintain meetings with educational supports
- Documentation for permit: Discuss with DCF worker, YDC and complete necessary paperwork to obtain social security card and birth certificate
- Visits with Dad: arguments with step-mom. Manage this barrier by reaching out to supports and walking to Aunt's house when needed

# Examples for Development of VSA: Barriers, Service Coordination

## Barriers:

- Employment: no response from employers. Manage this barrier by following-up and calling employers to ask for opportunity to interview
- Permit: failing permit exam. Manage this barrier by rescheduling exam and seeking alternate ways to study, study material with YDC and supports
- “Sometimes I have trouble advocating for myself, I am not very confident”: manage this barrier by making step-by-step lists to process information when obtaining an assignment or goal, ask questions ie: Who, What, Where, When, Why (as mentioned in a Youth Development Committee meeting).
- Remembering meetings with service providers: Purchase a whiteboard for bedroom to hang on door for reminder of day's appointments, begin the habit of checking iPad or planner in between all classes to jog memory of day's appointments
- Getting in contact with new school. Contact DCF worker and communicate needs with High School. In middle of high school/ living transition.
- Not getting into Driver's Education course: continue applying every semester until I am accepted. Complete driver's log.
- Substance use: surround with peers who are substance free, keep busy and productive, focus on goals
- Unsupportive peers: meet new people through school or work
- No communication with team: Reach out to team members when in need of support, guidance and resources
- Car breaking down a lot, gas goes fast because of car problems: save money for car repairs and keep up with car repairs, access public transportation when possible
- Stressful friendships: Working on not being around certain people
- Home environment: Home life is a lot of stress and I am working on moving out into an apartment

## Service Coordination:

- YDP will coordinate with Guidance Counselor and I will sign releases for them to communicate with each other and provide updates about progress in school. YDC will remain in regular contact with DCF to ensure needs are met, transition planning and discussion of extended care living agreements.
- Youth Development Coordinator will coordinate with VSAC Outreach Counselor to ensure youth is on track with college application process and receiving support with this at school. YDC will reach out to guidance counselor when appropriate and as requested to ensure contact among team members. YDC and DCF will continue to communicate youth's needs and goals, as well as attend team meetings.
- Youth Development Coordinator will connect with advisors as appropriate and as requested to ensure success throughout transition to college.
- YDC will continue to communicate with CSJ STEPS Coordinator to ensure needs are being met while away at college. YDC will coordinate with residential case manager to prepare for transition into the housing residence during upcoming spring. YDC will provide youth with transportation to the residence for interview.

# Examples for Development of VSA: Service Coordination

## Service Coordination:

- YDP will communicate and coordinate with counselor, grandmother and social worker. In process of creating team in community and YDC will communicate with team when assigned. YDC will join educational team when youth is enrolled in high school after transition out of DCF custody/residential.
- Youth has identified that YDC is currently only service provider. Youth will update YDC if/when other service providers join team and YDC will coordinate accordingly to ensure needs are being met.
- In process of re-enrolling in counseling and Youth Development Coordinator will connect with counselor when appropriate and as requested.
- YDC will maintain contact with DCF to ensure needs are met. YDC will connect with guidance counselor when appropriate to discuss post-secondary education goals. YDC will connect with school psychologist when appropriate and as requested.
- YDC will attend team meetings as scheduled to update team members on youth's identified goals and progress made throughout engagement with YDP. YDC will maintain contact with DCF worker to ensure needs are being met and obtain any updates with services outside of YDP. YDC will communicate with GAL and Family Assessment Specialist as appropriate and as concerns arise. YDC and guidance counselor will be in-contact in regards to progress at school and post-secondary education goals. YDC will communicate with VSAC Outreach counselor as needed to ensure engagement and progress toward post-secondary education goals.
- YDC will continue to maintain contact with DCF worker and Aunt & Uncle. Team meetings will be scheduled as needed. YDC will check-in with VSAC Outreach counselor to ensure youth is receiving support with college applications and financial aid. YDC will continue updating team members with YDP updates and youth's progress. YDC will attend all team meetings. YDC will connect with Guidance Counselor as needed.
- Youth Development Coordinator will join education team when school is determined. YDC will communicate with guidance counselor and advocate/ensure educational needs are met. Youth Development Coordinator will maintain contact with DCF worker to ensure needs are met. YDC will communicate with substance counselor as appropriate and as concerns arise.
- YDC will coordinate with Counselor when appropriate to ensure needs are being met and progress is being made with clean urine assessments. YDC will coordinate with Drug Court case manager when appropriate. YDC will remain in contact with DCF Worker to ensure youth's goals are being pursued and YDP services are being utilized. YDC will attend team meetings.
- "I will sign a release for YDC to have contact with Counselor when appropriate."



# Extended Care Invoice

**YOUTH DEVELOPMENT PROGRAM  
EXTENDED CARE INVOICE AND EXPENDITURE REPORT**

*Reports should be completed and submitted electronically to [YDP@WCYSB.ORG](mailto:YDP@WCYSB.ORG)*

[illegible]

# Adult Living Program Agreements:

## Procedures and Best Practice Guidelines

### Procedure

1. If the prospective Adult Living Partner (ALP) is not a licensed foster parent, YDCs must submit background check forms to the YDP Director ([ydp@wcysb.org](mailto:ydp@wcysb.org)).
  - a. Background checks may take up to 30 business days to be processed.
2. Once the YDP Director informs YDCs that the background checks came back all set OR if the ALP is a licensed foster parent, the YDC should submit a VSA for approval.
  - a. Check the Adult Living Program box under “Type of Agreement.”
  - b. Explain how the living arrangement would support the youth’s goals in the plan.
  - c. Complete the Permanency Pact and ALP Living Agreements with the youth and ALP. Attach the ALP Living Agreements and signature page of the Permanency Pact to the VSA. Check the boxes for these documents on the last page of the VSA.
  - d. Follow submission procedure for all other VSAs.
3. If ALPs want their monthly stipend direct deposited, they must complete the Direct Deposit form (located on the YDP website and in the Orientation Manual).

### Best Practice Guidelines

- ☐ ALPs must reside in Vermont and be at least 25 years old.
- ☐ YDCs should check in with youth and ALP at least every other week to discuss agreement.
- ☐ YDC should convene team meetings when appropriate.
- ☐ These agreements are meant to offset food and shelter costs, not for incidentals or allowance for the youth.
- ☐ Category B Agreements are set at the standard daily rate of \$18.70 per day. The YDC may advocate for a higher daily rate for supporting additional services and supervision by the ALP, but this must be justified based on the significant support and supervision required. When there is a higher daily rate approved, it will decrease when the agreement is renewed. YDCs must make this clear to ALPs.
- ☐ ALPs receive payment mid-month following the calendar month that services were provided. For example, ALPs are paid around January 17<sup>th</sup> for ALP services provided in December.
- ☐ YDCs should inform ALPs that they must communicate to YDP when the youth is not present in the home. According to the Youth in Transition rules, “If the Youth is temporarily absent from the home, through no fault of the adult partner, reimbursement may continue at the discretion of the Commissioner or designee for up to 10 days after the Youth has left the home, pending the Youth’s return.”
- ☐ YDC notifies ALP, youth, and all other involved parties when an agreement should be terminated.
  - o Per the Youth in Transition rules, YDP must “provide verbal and written notice to the youth and adult partner, specifying when support ends, why the agreement is terminated, what other support options may be available to the youth.”
- ☐ YDCs must contact the YDP Director ASAP when an agreement must be terminated.
- ☐ If ALPs are paid more than they should have been, they will receive a letter from DCF and be expected to return funds.

# PERMANENCY PACT

In an effort to substantiate and sustain  
an on-going connection between a youth and a supportive adult,

SUPPORTIVE ADULT

pledges to provide specific support to, and has been accepted as a  
provider of such support by,

YOUTH

confirmed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
DAY MONTH YEAR

as witnessed by \_\_\_\_\_

FACILITATOR

*FosterClub's Permanency Pact documents a  
life-long, kin-like commitment to a relationship  
between a youth and a supportive adult.*

the national network for young people in foster care | [www.fosterclub.org](http://www.fosterclub.org)



- ☐ A Home For The Holidays
- ☐ A Place To Do Laundry
- ☐ Emergency Place To Stay
- ☐ Food/Occasional Meals
- ☐ Care Packages At College
- ☐ Employment Opportunity
- ☐ Job Search Assistance
- ☐ Career Counseling
- ☐ Housing Hunt
- ☐ Recreational Activities
- ☐ Mentor
- ☐ Educational Assistance
- ☐ Relationship/Marriage/Parenting
- ☐ Transportation
- ☐ Assistance With Medical Appts
- ☐ Storage
- ☐ Motivation
- ☐ Someone To Talk To/Discuss Problems
- ☐ A Phone To Use
- ☐ A Computer To Use
- ☐ Clothing
- ☐ Spiritual Support
- ☐ Legal Troubles
- ☐ Cultural Experience
- ☐ Apartment Move-in
- ☐ Cooking Lessons/Assistance
- ☐ Regular Check-in
- ☐ Bill & Money Management Assistance
- ☐ Drug And Alcohol Addiction Help
- ☐ Mental Health Support
- ☐ Co-Signer
- ☐ Help Reading Forms, Complex Docs
- ☐ Mechanical/Building Projects
- ☐ Housekeeping
- ☐ Home Decorating
- ☐ Voting
- ☐ Volunteerism
- ☐ Finding Community Resources
- ☐ Safety And Personal Security
- ☐ Babysitting
- ☐ Emergency Cash
- ☐ Social Circle/Community Activities
- ☐ Advocacy
- ☐ Reference
- ☐ Adoption
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

# ALP Agreement- Category B

ADULT LIVING PROGRAM AGREEMENTS (CATEGORY B)
House rules/expectations:
Responsibilities and chores:
Guests:
Transportation and car use:
Personal expenses such as clothing, phone, personal care items, recreation, etc:
Description of the nature of the relationship:



# Background Check Form

## INFORMATION ON HOUSEHOLD MEMBERS

The information below will be used to complete background checks for household members:

- FSD intranet database
- Vermont Crime Information Center
- Office of Child Support
- Vermont Adult Abuse Registry
- Vermont Case Access System
- Other databases as allowed by law
- Motor Vehicle Violations
- Relief from Abuse Orders
- Department of Corrections database
- Bright Futures Information database
- Out of state Child Abuse Reg. as applicable

These checks may be periodically repeated during your tenure as a foster parent including receiving updates to your criminal record via VCIC's subscription service. The accuracy or completeness of Vermont Crime Information Center records may be appealed to the Center.

**Please provide information for each applicant and all members of your household who are age sixteen or older, except youths in DCF custody. If necessary, use back of sheet for more household members.**

**Residence Telephone Number:** \_\_\_\_\_ **(required)**

<b>Print</b> last name, first name, middle <small>init.</small> :	Date of birth:	<b>Print</b> place of birth:
<b>Print</b> all maiden and previous names:	Soc. Sec. #.:	Signature:
<b>Print</b> last name, first name, middle <small>init.</small> :	Date of birth:	<b>Print</b> place of birth:
<b>Print</b> all maiden and previous names:	Soc. Sec. #.:	Signature:
<b>Print</b> last name, first name, middle <small>init.</small> :	Date of birth:	<b>Print</b> place of birth:
<b>Print</b> all maiden and previous names:	Soc. Sec. #.:	Signature:
<b>Print</b> last name, first name, middle <small>init.</small> :	Date of birth:	<b>Print</b> place of birth:
<b>Print</b> all maiden and previous names:	Soc. Sec. #.:	Signature:

**For Residential Licensing/Adoption Unit Use Only:**

Type of Check	Date Checked	Initials	Result
VCIC			
FSD Intranet Database			
Motor Vehicles			
Office of Child Support			
Vermont Adult Abuse Registry			
Department of Corrections			
Vermont Case Access System			
Relief from Abuse			
Bright Futures Information System			

# Background Check Release of Information



State of Vermont  
Department for Children and Families  
Family Services Division  
103 South Main Street, Osgood 2  
Waterbury, Vermont 05671-2401  
[www.dcf.state.vt.us/fsd/](http://www.dcf.state.vt.us/fsd/)

*Agency of Human Services*

## RELEASE FOR SUBSCRIPTION SERVICE

Title 33, Chapter 3, Section 309 entitles the Department for Children & Families to receive criminal conviction record information for applicants applying for a foster care or child care license. Title 20, Chapter 117, Section 2064 now allows the Department for Children & Families to receive updated criminal conviction information on any criminal record with applicant permission during the course of foster parenting and employment.

### PLEASE PRINT CLEARLY & LEGIBLY

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_

\_\_\_\_\_ I give permission for the Department for Children & Families to receive updates to my criminal record via VCIC's subscription service.

\_\_\_\_\_ I **do not** give permission for the Department for Children & Families to receive updates on my criminal conviction record.

I understand that this criminal record information will be used for reviewing my suitability for foster parenting/ continued employment. I further understand that within 30 days of receiving the results of the record check or update, I have the right to appeal the findings in writing to the Vermont Criminal Information Center, Department of Public Safety, 103 South Main Street, Waterbury, Vermont 05671-2101.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

This form is to be kept on file in your office for audit purposes. **DO NOT** RETURN THIS FORM TO VCIC





# State of Vermont ACH Authorization Form

**STATE OF VERMONT  
SUPPLIER ACH AUTHORIZATION FORM**



Action Requested: (check one)    ☐ NEW                      ☐ CHANGE                      ☐ CANCEL

**Section 1: Supplier Identification**

SUPPLIER NAME		
ADDRESS		
CITY	STATE	ZIP CODE
CONTACT PERSON	TELEPHONE	
TAXPAYER IDENTIFICATION NUMBER [EIN <u>or</u> SSN]	VERMONT SUPPLIER ID NUMBER (if available)	

**Section 2: Banking Information**

BANK NAME			
ADDRESS	CITY	STATE	ZIP CODE
ACCOUNT NUMBER	ROUTING NUMBER (9 digits)	ACCOUNT TYPE (check one) <input type="checkbox"/> Checking <input type="checkbox"/> Savings	

CHANGE Request - Previous Bank Account Number:

**Section 3: Supplier Authorization**

I authorize the State of Vermont to initiate/change/cancel ACH credit entries to the above bank account. I further authorize the State of Vermont to reverse any payment made to this account in error.		
SIGNATURE		
PRINTED NAME	TITLE	DATE

**Please Mail or Fax Completed Form to:**  
VT Dept of Finance & Management  
109 State St, 4<sup>th</sup> Floor  
Montpelier, VT 05609-5901  
  
Fax: 802-828-2434  
Email:  
[VISION.SupplierRequests@vermont.gov](mailto:VISION.SupplierRequests@vermont.gov)

If you have questions when completing this form, contact the VT Dept of Finance & Management at 802-828-1259.

STATE OF VERMONT Use Only		
VISION Supplier ID:	VISION Process Date:	Processed By:

F&M Supplier ACH Authorization



# Youth Engagement Overview

YDP youth are empowered to effect change in the child welfare system and become leaders in their communities through valuable training, networking, and community engagement.

**Youth Advisory Board (YAB):** The mission of the Youth Advisory Boards are to empower youth through advocacy, training, teamwork, and courage to make meaningful change in the foster care system. Engaging regional meetings are tailored for youth who are currently in (or have ever been in) DCF custody who want to make a difference in the child welfare system. Youth representatives emerge from regional meetings to form a state-wide team of representatives that identify priority issues facing their local community, problem-solve, present potential solutions, and follow up on targeted issues to generate sustainable change that improves the lives of their peers and future generations.

**Virtual YAB-** Developed in response to social distancing throughout the Covid-19 pandemic. The objective of the virtual YAB meetings are to build and maintain connections with youth in Vermont with similar lived experiences, participate in the state-wide youth Movie Club, and to explore the best ways to support each other and people in our community throughout the Covid-19 pandemic.

## Internships

Two youth internships were made available in the fall of 2020. Interns will work to build up the YAB and create a “Youth Alumni Network.”

## Training DCF staff and foster parents:

YDP youth advocates train DCF workers and foster parents by speaking on panels, giving presentations, and joining community conversations. These opportunities provide a space for youth to directly affect how adults approach working with youth. Youth are provided support and training so they are fully prepared to authentically engage in these activities in a healthy and meaningful way

## Turning Dreams into Plans Conference:

The Turning Dreams into Plans youth conference is for young Vermonters, ages 14-23, who have experience in the foster care system. Any young person who is or has been connected to YDP is welcome to attend. Conference offerings include engaging workshops, powerful presentations, and an overall great day to learn about resources, meet new people, connect with old friends, and celebrate the amazing youth in our state. This event also hosts the Youth of the Year Awards - an annual celebration to honor young adults who have given back to their communities, worked to improve services for other youth, or made terrific strides in accomplishing their own goals.

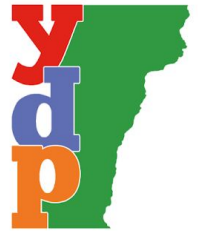
**Travel:** Leadership activities can extend past Vermont! Youth leaders can apply to attend conferences and internships through the New England Youth Coalition (NEYC), FosterClub, Foster Youth in Action, and more!

# Youth Advocacy Document

PRIORITY ISSUES OF YDP'S FORWARD YOUTH ADVISORY BOARD



2018



**To whom it may concern,**

Forward is a youth advisory board made up of young people between the ages of 14-22 with shared experience in Vermont's foster care system. Our board advises the Youth Development Program, Department for Children and Families, and other community partners on how to best serve and care for teenagers and young adults. We meet monthly for training and support, and are committed to improving the system for all youth through advocacy, training, teamwork, and courage.

We present you with this document to raise awareness about five issues that we feel are priorities for youth in foster care.

**Sincerely,**

**The Youth Advocates & Young Adult Consultants of  
Forward Youth Advisory Board**

### PRIORITY ISSUE #1

# Opportunities for Self Advocacy

**We believe youth need to be listened to. They need to understand their case, know how to advocate when their needs are not being met, and feel empowered to do so.**

## The Issue

The current process for making a complaint to DCF is difficult for youth to access. Few people even know that there is a process or the level to which you can make a complaint. Advocating for yourself is especially hard if you don't have a strong voice or feel empowered. Even when you do make a complaint, communications systems break down, you get shuffled between people, and most of the time you end up getting nowhere.



## Our Recommendations

- Encourage the state to hire a foster care ombudsperson - a person who works outside of DCF and manages complaints from youth and families, helps youth when the system breaks down, and advocates for changes to the system if policies are causing harm to people
- Collect data on current numbers of complaints, types of complaints, how those complaints are currently handled, and how youth and families feel about the outcomes
- Work alongside Forward members to advocate that the state mandates funding for this position

**"We need someone who knows the system, but is outside of the system, whose only job is to make sure we're being treated alright."**



## PRIORITY ISSUE #2

# Safety Planning

**We believe all youth should have some control over their own safety. When someone is in foster care the state is responsible for keeping them safe, but a lot of children and youth are still being hurt. this is not ok.**

## The Issue

When someone is in foster care the state is responsible for keeping them safe, but a lot of children and youth are still being hurt. Safety plans are often created for families or parents, but rarely for the youth themselves, and the ones that are created are often inaccessible. This is important because having a safety plan can help promote the best outcomes. We want the ability to be proactive rather than reactive, and safety = permanency.



## Our Recommendations

- Create a policy about personal safety plans for youth
- Support workshops/classes that teach children and youth how to make safety plans, and teach adults how to support youth to make plans
- Make plans more accessible to youth by using clear language, decorating them, having them be in a format that they can carry with them (booklet, on their phone, etc.)
- Look into how this issue has been addressed before

"It's hard to stay safe alone."

### PRIORITY ISSUE #3

# Working with Bio-Families

**We believe bio-families deserve to be treated with respect and compassion. DCF needs to do more to help bio-families understand how to get reunification and meet their kids' needs.**

## The Issue

Oftentimes parents have their own history with foster care, and having their children taken away is just another traumatic interaction with DCF. There ends up being an "us vs. them" mentality that puts the kids in the middle. When families do reach out to DCF they often feel unheard and don't understand the systems they're supposed to work with. It's important to address these issues so that more families can have a healthy reunification and not be subject to more trauma.



## Our Recommendations

- Assign a parent advocate to every family
- Caseworkers spend more time getting to know the family and building stronger relationships
- Educate caseworkers and other team members to address negative stereotypes of bio-families
- Make the process less scary for parents by welcoming them into the team
- Set reasonable expectations for parents and celebrate when things are going well - don't just focus on the negative
- Recognize that parents are going through trauma too and provide help through therapy, financial support, and life skills education

**"Once communication is broken  
it's hard to repair."**



## PRIORITY ISSUE #4

# Quality Foster Parents

**We believe foster homes should feel like home. All youth should be placed in homes where they are comfortable, safe, and treated with respect and dignity. Foster parents should know how to advocate for their youth, and be committed to getting them ready go out into the world as adults.**

## The Issue

There are not enough quality foster homes. We are passionate about this issue because being in bad foster homes is worse than staying in the homes we were removed from. Some foster parents are not able to give meaningful support because they themselves don't get enough support or training from DCF. The really bad ones add further trauma to our lives. DCF has a hard time finding homes for teens, perhaps because of the negative stereotypes surrounding foster care.



## Our Recommendations

- Encourage adults already in the youth's life (teachers, coaches, friends, etc.) to become foster parents
- Host panels where youth in care can speak to people who are curious about becoming foster parents
- Share stories that focus on positive outcomes and change the negative image of foster care
- Recruit more foster parents who have their own experience in foster care; people "like us"
- Take time to find good matches - create a matching process where youth can learn about and meet the families before being placed
- Support mentoring programs that pair alumni of care with kids entering care
- Require all foster parents to take the LGBTQ+ training
- Continuously vet homes to make sure they are actually safe. Check in with youth separate from the family so they feel safe to be fully honest. Concerns and complaints from youth must be taken seriously, and licenses revoked when necessary.
- Offer concrete supports when foster parents are struggling with a child, so they don't give up on them

**"DCF has got to get rid of the bad homes. One part of doing that is making sure there are good homes available."**

## PRIORITY ISSUE #5

# Driving

**We believe that driving is a basic rite of passage for teenagers. Youth in foster care should be supported to have this normal experience so they can build independence and responsibility, and have agency over their own lives.**

### The Issue

Youth in foster care face many barriers when trying to get their driver's licenses. It is often a struggle to get access to personal identification papers necessary for applying for your permit. Many youth don't have an adult who is willing to help them get their practice hours. Youth who are in alternative education programs have a harder time finding driver's ed programs. Even if a youth is able to get their license, they then often face barriers to getting insurance. It has been our experience that DCF tends to tell kids to wait until they're 18 because "it's easier". This is a problem because not having the ability to drive in Vermont is very isolating and affects other areas of Normalcy, such as getting a job, participating in community activities, spending time with friends, and building personal responsibility.



### Our Recommendations

- Stop the message that it's easier to get your license when you're 18
- Partner with driving schools, volunteers, insurance companies, corporate sponsors, and other community organizations to create programs dedicated to helping youth get on the road
- Have a "fleet" of DCF vehicles youth can use for practice hours
- Recruit volunteers to be "driving mentors" for youth to practice with
- Have a universal insurance policy that covers youth and foster families
- Address the high caseloads that are the root cause of youth not getting the attention they need
- Continue to support permanency so youth have more natural supports in their life to teach them to drive, co-sign car loans, share insurance policies, and support them through the process
- Partner with other state agencies (DOL) to offer rides for people to get to work

**"When you wait until you're 18 to get your license it just means you have to deal with everything all at once AND do it without a car... So who is it really easier for?"**

# Youth Advocacy Document

PRIORITY ISSUES OF YDP'S YOUTH DEVELOPMENT COMMITTEE



**To whom it may concern,**

The Youth Development Committee (YDC) is a youth leadership board made up of young people between the ages of 15-22 with shared experience in Vermont's state foster care system. Our committee advises the Youth Development Program, Department for Children and Families, and other community partners on how to best serve and care for teenagers and young adults. We meet monthly for training and support, and also help plan and run the annual "Turning Dreams into Plans" youth conference.

We present you with this document to raise awareness about six issues that we feel are a priority for youth in foster care.

**Sincerely,**

**The Young Leaders of the Youth Development Committee**



### PRIORITY ISSUE #1

# Social Worker Communication

We believe social workers should be accountable for maintaining regular communication with youth, because this is essential for ensuring safety and wellbeing.

### The Issue

Social workers make important decisions about our lives, so it's important that they know what's going on with us. Many of us have had the experience of having an overworked social worker who is really hard to get a hold of, which is very stressful and can be dangerous when we are in crisis. This is our first priority for a reason - because you need this for everything else to work.



### Our Recommendations

- More workers and less turnover
- Workers who are timely and respond to calls quickly
- Workers who work collaboratively
- A number we can call or text after hours (and knowing what the number is!)
- Knowing who we should call when our worker is on vacation
- Being able to choose how we communicate. (Text, call, Facebook, email, etc.)
- Being informed about our case in a way that makes sense to us
- Having more opportunities to voice our own opinions about our situation

It's just as important to  
avoid miscommunication.

-Bryce, 18

It's scary when you can't  
reach your social worker  
when you need them.

-Jasmine, 16

## PRIORITY ISSUE #2

**Safety**

We believe all youth have a right to physical and emotional safety in whatever home they reside. Safety includes having their basic needs met, feeling cared for, being listened to, and having a stable and reliable home.

**The Issue**

Foster homes should always be safer than an original home, but many of us have not always had this experience. Youth who are in foster homes that don't feel safe and accepting are more likely to run away, putting them at higher risk of experiencing additional trauma.

**Our Recommendations**

- We're asked, "do you feel safe and comfortable here?" on a regular basis away from the people we are living with
- Placements are responsive to any triggers, allergies, medications, or anything else that may make it difficult for us to thrive in any particular home
- Being kicked out is not used as a threat
- We are allowed to have comfort items, like a therapy animal
- Staff that we work with take our concerns seriously
- We never have to worry about food, warmth, and clothing

Sometimes I'm afraid to speak up when something doesn't feel right because I'm worried I'll get moved somewhere worse.

-Sarah, 16



### PRIORITY ISSUE #3

## Advocates

We believe all youth should have a relationship with an advocate, preferably someone they choose, who supports decisions made in the youth's best interest. These advocates could be grandparents, teachers, coaches, mentors, or any other trusted adult who is active in the youth's life. Youth should also be encouraged and taught to be their own self-advocate and fight for a case plan that benefits their life.

### The Issue

Growing up, especially in foster care, is really confusing and it's nearly impossible to figure things out on your own. We need someone on our team who we can relate to and trust, and who we know will always listen to us. We also need to learn how to share information and advocate for ourselves so we have the skills to get our needs met throughout our lives.



### Our Recommendations

- We have more opportunities to identify supportive adults in our life and invite them to team meetings
- We are encouraged and supported to connect with more adults in our communities
- We are shown examples of what good self-advocacy looks like, and coached through advocating for ourselves

It feels awesome to know  
someone is fighting for you.

-Brett, 18



## Privacy

We believe all youth should be able to have their own appropriate space, their belongings should be respected, and they should be able to handle their own things when moving.

### The Issue

Privacy is really important to building a trusting relationship, and sometimes we just need time and space to ourselves to process what's happening in our lives. Moving away from your family or between foster homes is a tough experience, especially when you feel like you don't have any control over your belongings. It feels awful to have your things thrown into trash bags, or to not be able to pack yourself and risk having something important left behind.



### Our Recommendations

- Foster parents and group homes should not be able to go through our things without our permission
- Everyone should get moving boxes and suitcases or duffle-bags to move their things
- If we can't be present to pack our own things, whoever is packing should talk to us first, to get permission and information about any belongings we don't want them to forget
- Homes should be understanding when we want space and time to be alone - we should not be pressured to do things we're not ready for
- DCF should not be allowed to take away our electronics unless there is a serious issue. When there are issues, we should be given an explanation and a plan for how and when we regain this privilege.

Sometimes we just need time to settle in.

-Niki, 17

### PRIORITY ISSUE #5

# Medication

We believe all youth should be able to make their own informed decisions about the medication they take, and fully understand the pros and cons of any medication they are prescribed. Meds should be prescribed on a person-by-person basis, keeping in mind the youth's history with substance use.

### The Issue

Many youth in care are being overprescribed mood-altering drugs, and many don't even understand why. We want to have other options available to us, and not feel like the system is just trying to erase our emotions.



### Our Recommendations

- Everyone should be given a list of all their medications, with their purpose, pros, and cons described in a way they can understand
- Medication should not be the go-to solution every time
- We should be told about alternative options to medication
- Nobody should be forced to take medication they don't want to, within what's reasonable and safe
- We should be able to advocate for taking ourselves off meds when we don't need them anymore, and doctors should always be looking for opportunities to lower our dosage

We can't all be treated the same  
when it comes to medication.

-Ashley, 18



## Money Management

We believe all youth should be actively encouraged to save their earnings and be taught financial responsibility while in care. The teaching of these responsibilities should include (at a minimum) going to a bank and learning how to open an account, understanding basic credit and loan information, knowing how to write and deposit a check, and using online and mobile banking.

### The Issue

Money management is something that everyone needs to know as an adult, but people who are aging out of DCF care often do so without these skills. Credit, banking, and other financial skills are difficult to figure out on your own, and not having these skills can put us at risk of financial instability, debt, and having barriers to getting a job, car, or housing.



### Our Recommendations

- We are given opportunities to practice managing money by having an allowance or a job where we earn income
- We all exit care with personal checking and savings accounts and all the information we need to use them
- We know someone, past the age of 18, who can help us answer any financial questions
- We have access to online resources and games

DCF is doing a fair job of preparing us,  
but it should start even sooner.

-Jasmine, 16

# Understanding Normalcy

## Having trouble understanding what “Normalcy” means?

Normalcy is kind of a strange word, with a very unique definition. It is used specifically to describe the kinds of typical teenage experiences that should be accessible to youth in all situations. Many times teens who are in foster care are not able to do the same things their friends who are not in care are able to do, simply because “the system” gets in the way. We don’t think this is right or fair, and by advocating for “Normalcy” we’re working to make sure teens in care don’t miss out on valuable life experiences. Here are some examples of what “Normalcy” can look like:

**Normalcy with your family** means being able to maintain connections that are important to you, such as with biological parents, siblings, aunts, uncles, cousins, and anyone else who you identify as family. It also means being treated as a part of the family you’re living with, such as being included in family dinners, game night, celebrations, or anything else your foster home does as a family.

**Normalcy with your friends** means having opportunities to make and build friendships, go to sleepovers or to the movies, learn how to use social media and cell phones in a safe way, explore dating and romantic relationships (when you’re ready), and having a say in how you spend your free time. It means being able to go to events that are important to you and help you stay connected to good friends.

**Normalcy in your community** means being able to play on a sports team or join the drama club at your school, get a job when you want one, go on field trips, go to summer camp, have a mentor, or anything else that provides fun, personal growth, and support in your life. It means being able to make quick decisions so you’re able to participate in opportunities as they become available, rather than needing to go through long processes for approval.

**Cultural normalcy** means being able to express your personal culture without discrimination. This means being able to listen to the music you like and wear the clothes you want. It means having trusting adults in your life who can help you navigate the process of figuring out your own beliefs. It means being able to practice your religion even when it doesn’t match the religion of the home you’re living in, and having the option to participate or not in the religious customs of your foster family. It also means living with a family that is supportive of your sexual and gender identity, so that you always feel safe.

**Normalcy in decision-making** means being included in the decisions that affect your life. It means being trusted to make decisions and learn from your mistakes.

**Other examples of normalcy can include** getting your driver’s license, having a bike, opening your own bank account and learning money management skills, having more personal freedom around curfews, allowances, and relationships as you mature, celebrating birthdays, graduations, and other achievements, going to a school where you feel you can learn, and being able to take steps to help you prepare for adulthood, higher education, and the workforce.

# Strategic Sharing Checklist



## Strategic Sharing Checklist for Public Speaking

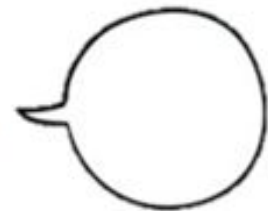
### THE SETTING

- ☐ Where am I going?
- ☐ How am I getting there?
- ☐ What time should I arrive? What time will I leave?
- ☐ Do I need to bring anything with me? If yes, do I have those things?
- ☐ Should I dress a certain way? What am I going to wear?



### THE CHARACTERS

- ☐ Who else is going to be there?
- ☐ Who is coming with me as my supporter and cheerleader?
- ☐ Who can I talk to if I have any questions before the event?



### THE PLOT

- ☐ Why am I going? How is my contribution being used?
- ☐ What will I be talking about? If it's a panel, what questions will I be asked?
- ☐ Am I going to be filmed or recorded? If yes, am I ok with that?
- ☐ If I change my mind about speaking, is it OK if I don't participate?  
(Hint: YES! You may step out at any time or ask that any recordings be discarded. It's your story to share and you are always in control of when it is heard, no matter the event.)

**Practicing Strategic Sharing techniques will help you prepare so that you're able to communicate more effectively, and protect yourself, others, and your story.**

**GOOD LUCK!**



# Youth Panel Outline: Foster Parent Training (1 hour)

## Introductions:

- Moderator introduces self, explains role and general flow of the panel. Reminds listeners about purpose and strategic sharing.
- Panelists introduce themselves – share name, age, town, and fun fact. May also share current relationship with DCF/YDP.
- Listeners introduce themselves – share name, role, and what they think it takes to be a great foster parent. Youth will then answer the same question. It's suggested that the moderator writes their words on the board/flipchart.

## What do young people need in order to thrive while in DCF care?

- Each panelist will get a chance to talk about 1-2 things they think are most important. Speakers should prepare topics that are different from each other.

**Popular examples:** communication, normalcy, strong relationships between everyone one their team, sibling connections, patience, etc.

## Questions to use while also opening it up to questions from the audience:

- How can foster parents help youth to feel safe?
- How should foster parents build a relationship with a young person who has been burned by previous foster homes?
- Normalcy: Why is it important for foster parents to help youth participate in “normal” adolescent activities, such as getting a job, being on a sports team, going on field trips, sleepovers, etc.? How can foster parents support youth to be part of these activities?
- Where do you find community? How can foster parents help youth build community?
- How do you like to be introduced when you're with your foster family? What advise do you have about figuring out what youth will want to call us (foster parents)?
- How do we support you if you're feeling stigmatized in school, the community, etc.?
- How do we work with your biological family?

## What do you think foster parents need to know more about?

## Final piece of advice?



# Tips for Speaking On A Youth Panel

1. **Take a minute.** Give yourself time to process each question so you can answer in a thoughtful way. Ask the moderator for a copy of the questions beforehand if you find it helpful to prepare your answers before the presentation
2. **Work as a team.** You and the other panelists are on the same team! Be aware of how much time you take up when speaking and make sure everyone gets a chance to say what's important to them.
3. **Honor your story.** Be intentional about what you share, and know why you're sharing. This is also known as "Strategic Sharing". People don't need to know your personal history with DCF, and won't be able to process your message if you tell them too much. If you want to share something specific from your story, pick one important and relevant piece that helps you explain why your message is important. If you have any questions about Strategic Sharing, talk to the moderator before the panel.
4. **Don't use people's names.** Name can be distracting for the audience, and they will be able to follow you better if you use titles instead (i.e. "foster mom", "social worker", "teacher", etc.)
5. **Remember that your goal is to share strategies.** Teach them what they should do instead of what they shouldn't. The audience should leave your presentation with ideas of how to be the best foster parent, social worker, GAL, etc. they can be!

# DCF & YDP Roles And Responsibilities

## DCF and YDP Roles and Responsibilities

DCF Family Services Workers collaborate with the Youth Development Program (YDP) to provide coordinated and complimentary case management services that best meet the needs of youth and families with an emphasis on:

- Engaging youth ages 14-16 in normalcy, career exploration, education, and community connection activities
- Engaging with all youth 17-18 in making and implementing plans for their futures as young adults
- Supporting youth ages 18-23 in achieving their plans for education, employment, safe and stable housing, connections to caring adults and community, and access to health care.

The purpose of this document is to clarify the respective roles and responsibilities of DCF and the Youth Development Program on cases where they are jointly serving the youth.

## Referral and Intake

- DCF must complete and submit a referral to YDP on behalf of youth when they turn 14 years old. Youth who are 17 years old are prioritized by DCF and YDP for engagement in the program. In districts where there are capacity challenges, DCF District Directors will work with YDP contract providers to prioritize which youth are served.
- DCF completes the referral form and provides it to YDP.
- The specific roles of DCF and YDP are discussed with the youth and family at the start of YDP services.
- DCF and YDP review the responsibilities of the agencies in meeting the needs of the youth and family on a regular basis. Necessary changes, based on staffing availability and status of the case are noted and discussed with the family.
- If there is disagreement around services to be provided by DCF and/or YDP, the supervisors of each program discuss further and make necessary decisions.

## Contact and Engagement with Youth and Family

- DCF meets monthly face-to-face contact requirements.
- YDP meets at least once per month in-person with the youth (family is included if appropriate). If the needs of the youth and family require additional contact, DCF and YDP discuss the circumstances and make a plan to meet the needs.
- DCF ensures that there is a monthly team meeting with the youth, family, YDP and other service providers to review progress made toward meeting case plan goals and additional services/supports that may be needed to achieve success.
- YDP attends and participates in team meetings.
- DCF and YDP discuss who will arrange and facilitate meetings.

## NYTD and Screening and Assessment

- When requested by DCF Central Office, DCF completes NYTD surveys and locator forms with 17-year-old youth in custody. YDP assists DCF with collecting this information as needed.
- YDP completes NYTD surveys and locator forms with 19 and 21-year-old youth as needed.
- YDP completes an Intake Assessment and Youth Connections Scale annually. YDP provides a copy of the Youth Connections Scale to DCF.

## Case Plan Reviews and Transition Plans

- DCF writes the case plans and convenes the case plan review meetings. DCF requests any additional information from YDP necessary to complete the case plan.
- YDP provides youth-specific information to the DCF Family Services Worker in preparation for the case plan review.
- DCF invites YDP to the case plan review.
- YDP attends and participates in the case plan review.
- YDP and DCF meet to complete the Transition to Adulthood (90-Day) Plan.

# DCF & YDP Roles And Responsibilities

## Communication and Documentation

- DCF meets documentation requirements of the case (Disposition Report, Case Plans, Case Notes, Violation of Probation, etc.). DCF obtains necessary information from YDP to inform development of reports.
- YDP provides a monthly progress note to DCF Family Services Workers for each youth served by the program. DCF will file the monthly progress note in the youth's file.
- YDP notifies DCF immediately of any behaviors or circumstances that may require a response from DCF.
- DCF notifies YDP immediately of any change in circumstances that may impact the work with the youth and family (custody changes, probation violation, placement change, etc.).
- DCF and YDP obtain releases of information from the youth and family for each other and other service providers involved with the family to monitor progress in treatment and in reaching case plan goals.
- DCF District Directors (and other staff they deem appropriate) and YDP meet quarterly to conduct a utilization review, including capacity to meet the need; if necessary triaging cases based on need/priority; and review of eligible caseload to maximize participation.
- DCF provides input for the annual reviews of YDP services in their district.

## Voluntary Services Agreements (VSAs) and Extended Care

- DCF develops VSAs with youth in DCF custody that opt to extend DCF services beyond the 18 birthday through high school graduation (Completion of Secondary Education).
- YDP develops VSAs for youth that are over 18 and chose to live in extended foster care or independently (Adult Living Program and Housing Support Program).
- YDP develops VSAs that outline youth goals, services, and requests for youth investment grants.
- YDP and DCF provide VSAs to each other and collect signatures within 10 days of the start date of the VSA.
- DCF will maintain a copy of all signed VSA's in the youth's file.

## Transfer Protocol: YDP Services for Youth Placed Out-of-District

- When youth are placed outside of their DCF district of origin, Youth Development Coordinators (YDCs) and DCF staff should consider transferring that youth to the local YDP office.
- For individual youth placed out-of-district, the DCF District, local YDP, and YDP local to placement should establish communication. DCF and YDP should make efforts to schedule an in-person transfer meeting with the youth and other relevant team members.
- DCF should notify YDP when youth move out of district.
- YDCs should communicate via email with DCF Family Services Workers to share updates, monthly case notes, team meeting scheduling, and to share VSAs and collect signatures from Family Services Workers as needed.
- Referrals and transfers should be made promptly.
- The YDC and DCF Family Services Worker should communicate with the YDC in the original district when youth have case plan and permanency reviews and regarding the timeframe for returning to the original district.
- When youth are placed out-of-state, the DCF Family Services Worker should maintain communication with the local YDC regarding the youth, scheduled team meetings, case plan reviews, and timeframe for returning to Vermont. Whenever possible, YDCs should attempt to maintain a relationship with the youth while they are placed out-of-state.
- DCF can request statewide YDP contact information from local YDCs or they can access contact information on the YDP website: [vtyouthdevelopmentprogram.org](http://vtyouthdevelopmentprogram.org).
- YDCs and DCF staff may contact the YDP Statewide Administrative Team via email ([YDP@wcysb.org](mailto:YDP@wcysb.org)) for additional guidance related to transfers.

# Transfer Protocol: YDP Services for Youth Placed Out-of-District

## YDP Services for Youth Placed Out-of-District

When youth are placed outside of their DCF district of origin, Youth Development Coordinators (YDCs) and DCF staff should consider transferring that youth to the local YDP office. When considering such a transfer, YDCs and DCF staff should follow the recommendations and guidelines included in this protocol.

### Recommendations for YDCs and DCF staff:

- DCF staff and YDCs should meet monthly to review DCF and YDP caseloads and to discuss how best to serve YDP-eligible youth. Meetings may include the DCF District Director, JS/Ongoing Supervisor(s), YDP agency supervisor, and YDCs.
- For individual youth placed out-of-district, the DCF District, local YDP, and YDP local to placement should establish communication. DCF and YDP should make efforts to schedule an in-person transfer meeting with the youth and other relevant team members.
- DCF should notify YDP when youth move out of district.
- YDCs should communicate via email with DCF Family Services Workers to share updates, monthly case notes, team meeting scheduling, and to share VSAs and collect signatures from Family Services Workers as needed.
- Referrals and transfers should be made promptly.
- The YDC and DCF Family Services Worker should communicate with the YDC in the original district when youth have case plan and permanency reviews and regarding the timeframe for returning to the original district.
- When youth are placed out-of-state, the DCF Family Services Worker should maintain communication with the local YDC regarding the youth, scheduled team meetings, case plan reviews, and timeframe for returning to Vermont. Whenever possible, YDCs should attempt to maintain a relationship with the youth while they are placed out-of-state.
- DCF can request statewide YDP contact information from local YDCs or they can access contact information on the YDP website: [vtyouthdevelopmentprogram.org](http://vtyouthdevelopmentprogram.org).
- YDCs and DCF staff should refer to the “DCF and YDP Roles and Responsibilities” document for additional guidance, available on the YDP website: [vtyouthdevelopmentprogram.org](http://vtyouthdevelopmentprogram.org).
- YDCs and DCF staff may contact the YDP Statewide Administrative Team via email ([YDP@wcysb.org](mailto:YDP@wcysb.org)) for additional guidance related to transfers.

### Factors impacting a decision to transfer to a more local YDP:

- The planned length of stay outside of district
- The youth’s existing relationship with the local YDP
- The ability for the local YDP to maintain a meaningful relationship with youth placed out-of-district (caseload capacity, travel budget, etc.)
- Whether there is a placement-specific YDC (Park Street, CSJ, Vermont School, Woodside, etc.)
- YDP vacancies


### Guidelines for youth who are living in Vermont have been in custody in another state:

- Youth in these situations are eligible for YDP case management services in Vermont.
- Releases and verification of child welfare experience must be confirmed by the original state’s child welfare agency.
- Services should be coordinated with the State IL Coordinator in the state of origin. A list of State IL Coordinators can be found here: <https://www.childwelfare.gov/nfcad/>. Eligibility for funding through the state of origin should be determined before a funding request is submitted to the VT YDP. Youth Investment Grants will be approved on an exceptional, case-by-case basis only. Category A or B Agreements for youth that were not in custody in Vermont will not be approved.



# Normalcy Policy

## [Policy 75: Normalcy and the Reasonable and Prudent Parent Standard \(RPPS\)](#)

 <b>VERMONT</b> DEPARTMENT FOR CHILDREN AND FAMILIES <b>Family Services Policy Manual</b>		<b>75</b>
Chapter:	Working with Families	
Subject:	Normalcy and the Reasonable and Prudent Parent Standard (RPPS)	Page 1 of 11
Approved:	Karen Shea, Deputy Commissioner	Effective: 7/27/2018
Supersedes:	Family Services Policy 75	Dated: 1/2/2018

### Purpose

To provide guidance to division staff about promoting normalcy for children and youth in DCF custody, and to provide guidance for caregivers about applying the reasonable and prudent parent standard (RPPS).

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### Related Policies

Family Services [Policy 72](#): Educational Achievement and Stability for Children and Youth in DCF Custody

Family Services [Policy 76](#): Supporting and Affirming LGBTQ Children & Youth

Family Services [Policy 77](#): Medical Care for Children and Youth in DCF Custody

### Introduction

[The Preventing Sex Trafficking and Strengthening Families Act](#) of 2014 ([PL 112-183](#)) requires child welfare agencies to promote normalcy and well-being for children and youth in foster care. [PL 113-183](#) also requires child welfare agencies to implement a reasonable and prudent parent standard (RPPS), whereby permission for normal, day-to-day activities and events shifts from division staff to caregivers.

Vermont [Act 106](#) of 2018 establishes the reasonable and prudent parent standard into state law and creates liability protection for caregivers acting in accordance with the reasonable and prudent parent standard.


### Definitions

**Age or Developmentally Appropriate:** Activities or items that are:

(a) generally accepted as being suitable for children of the same chronological age or level of maturity or that are determined to be developmentally appropriate for a child, based on the development of cognitive, emotional, physical, and behavioral capacities that are typical for an age or age group; and

# Normalcy Policy

## Policy 75: Normalcy and the Reasonable and Prudent Parent Standard (RPPS)

 <b>VERMONT</b> DEPARTMENT FOR CHILDREN AND FAMILIES <b>Family Services Policy Manual</b>		<b>75</b>
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(b) in the case of a specific child, activities or items that are suitable for the child based on the developmental stages attained by the child with respect to the cognitive, emotional, physical, and behavioral capacities of the child.

**Caregiver:** A foster parent, including a kinship foster parent or residential treatment or other program, with whom a child or youth in DCF custody has been placed (33 V.S.A. § 4906(a)(1)).

**Normalcy:** Allowing children and youth in out-of-home care to experience childhood and adolescence in ways like their peers not in foster care. This includes opportunities to participate in activities and experiences such as:

- After-school clubs and sports;
- Recreational and community activities;
- School field trips;
- Sleepovers;
- Part-time jobs or summer employment;
- Driver's education;
- Choice in personal style and expression;
- Cultural and religious practices and expression;
- Access to cell phones, computer usage, and social media;
- Reasonable curfews; and
- Reasonable rules regarding dating and socializing with peers.

**Reasonable and Prudent Parent Standard (RPPS):** The standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child or youth in DCF custody, while at the same time encouraging the emotional and developmental growth of the child, that a caregiver must use when determining whether to allow a child in DCF custody to participate in extracurricular, enrichment, cultural, and social activities (33 V.S.A. § 4906(a)(2)).


## Policy

Caregivers shall use the reasonable and prudent parent standard when determining whether to allow a child in DCF custody to participate in extracurricular, enrichment, cultural, and social activities (33 V.S.A. § 4906(b)). Caregivers are authorized to provide or withhold permission without prior approval of division staff to allow a child or youth in their care to participate in normal childhood activities and events. Caregivers may approve or disapprove activities independently without the division's explicit permission unless the activity:



# Normalcy Policy

Policy 75: Normalcy and the Reasonable and Prudent Parent Standard (RPPS)

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- (1) conflicts with a safety plan, treatment plan, case plan, or court order; OR
- (2) last more than 72 hours (as a singular event, not the totality of hours spent doing the activity over an extended period of time).

Per Vermont law, a caregiver shall not be liable for injuries to a child in DCF custody that occur as a result of acting in accordance with the reasonable and prudent parent standard. A caregiver acting in good faith in compliance with the RPPS shall be immune from civil liability arising from such action (33 V.S.A. § 4906(c)).

Consultation with division staff is encouraged for decisions where the parent’s and caregiver’s wishes or opinions differ. Caregivers may seek consultation from division staff as needed or desired. See Appendix I for additional information and guidance.

## Appendix I: Reasonable and Prudent Parent Standard (RPPS) Caregiver Guidelines

Child & Youth Activity Category	GREEN – Examples of childhood activities that are generally considered normal which caregivers can <b>approve</b> or <b>disapprove</b> independently without DCF-FSD's explicit permission	RED – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order
<p><i>DCF-FSD approval is needed for any events or activities that (1) conflict with a safety plan, treatment plan, case plan, or court order OR (2) last more than 72 hours. "72 hours" refers to a singular event, not the totality of hours spent doing the activity over an extended period of time. Consultation with DCF-FSD staff is encouraged for decisions where the parent's and caregiver's opinions differ.</i></p>		
<p><b>Recreation Activities</b></p>	<p>Children/youth and caregivers must comply with all laws and use appropriate protective/safety gear (helmet, life jacket, harness, pads, etc.) based on the activities. Examples include:</p> <ul style="list-style-type: none"> <li>Community events</li> <li>Cultural events</li> <li>Family events, gatherings, parties, or reunions</li> <li>Health and fitness-related activities (gym, weightlifting, high intensity interval training (HIIT), yoga, pilates, running, jogging, jump roping, etc.)</li> <li>Outdoor activities (camping, fishing, hiking, climbing, biking/cycling, skateboarding, rollerblading, roller skating, riding scooters or hoverboards, riding pedal cars or drifter karts, horseback riding, swimming, diving, snorkeling, rock climbing, ice skating, skiing, snowboarding, snow tubing, river tubing, river rafting, canoeing, kayaking, paddle boarding, other sporting activities, etc.)</li> <li>Playing in a public park or on a playground</li> </ul>	<ul style="list-style-type: none"> <li>Any events or activities that conflict with a safety plan, treatment plan, case plan, or court order</li> <li>Any events or activities lasting more than 72 hours</li> </ul>
	<p><b>Social &amp; Extracurricular Activities</b></p> <ul style="list-style-type: none"> <li>Camps</li> <li>Field trips and school-related trips</li> <li>School dances, prom, and post-prom activities</li> <li>Band, orchestra, voice lessons, or lessons for a musical instrument</li> <li>Student council/government, student newspaper, debate team, or other academic competitive teams and clubs</li> <li>Community service, volunteer projects, or philanthropic opportunities</li> <li>Cultural or language clubs</li> <li>Gender &amp; Sexuality Alliance (GSA) meetings/activities at school or in the community; LGBTQ community events or support groups</li> <li>Youth Development Program (YDP) activities</li> <li>After school clubs or other school-related activities (art, drama, chorus, ballet, dance classes, etc.)</li> <li>Sports or athletic activities (football, basketball, baseball, softball, soccer, wrestling, lacrosse, hockey, track and field, tennis, cross country, golf, volleyball, cheerleading, dance team, golf, gymnastics, martial arts, ultimate frisbee, roller derby, etc.)</li> <li>Amusement parks, waterparks, museums</li> <li>Concerts, festivals, musicals, plays, other artistic performances</li> </ul>	<ul style="list-style-type: none"> <li>Field trips or school-related trips lasting more than 72 hours</li> <li>Field trips or school-related trips requiring international travel (excluding Canada if less than 72 hours)</li> <li>Any events or activities that conflict with a safety plan, treatment plan, case plan, or court order</li> <li>Any events or activities lasting more than 72 hours</li> </ul>



Child & Youth Activity Category	<b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve</b> or <b>disapprove</b> independently without DCF-FSD's explicit permission	<b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order
	<ul style="list-style-type: none"> <li>• Movies, bowling, laser tag, paintball, arcades, or other social activities</li> <li>• Time with peers; "hanging out" in the community or at someone's home</li> <li>• Sleepovers (spending the night away from the caregiver's home at a friend's house or having a friend over to spend the night)</li> <li>• Dating and romantic relationships</li> </ul> <p>Children and youth will be supported in attending religious and cultural services and activities of their choosing, including:</p> <ul style="list-style-type: none"> <li>• Attending religious services of the child or youth's choice</li> <li>• Participating in church, mosque, synagogue, temple, or other place of worship activities</li> <li>• Participating in cultural activities and events</li> <li>• Participating in tribal activities and events</li> <li>• Speaking in one's native language with siblings or others who speak the language</li> </ul>	<ul style="list-style-type: none"> <li>• Instances where the child/youth's and parent's opinions are in conflict</li> <li>• Instances where the child/youth's and caregiver's opinions are in conflict</li> <li>• Instances where the caregiver's and parent's opinions are in conflict</li> <li>• Any events or activities lasting more than 72 hours</li> </ul>
<b>Religious, Cultural, &amp; Tribal Participation</b>		<ul style="list-style-type: none"> <li>• All travel lasting more than 72 hours</li> <li>• All out-of-country travel (excluding Canada), which will require a passport and authorization letter specific to the trip</li> <li>• Any travel that conflicts with a safety plan, treatment plan, case plan, or court order</li> </ul>
<b>Travel</b>	<ul style="list-style-type: none"> <li>• All travel within the United States and Canada lasting less than 72 hours using the <i>Foster Parent Authorization Letter</i> which should be given to caregivers at the time of placement, or provided by DCF-FSD upon request</li> <li>• Taking public transportation alone or with peers</li> </ul>	
<b>Supervision</b>	<p>Specific to supervision, the <a href="#">Licensing Regulations for Foster Homes in Vermont</a> require caregivers to:</p> <ul style="list-style-type: none"> <li>• Provide or arrange for supervision appropriate to each child's age and developmental level (#302);</li> <li>• Have a plan for providing appropriate substitute care in their absence for employment or other purposes (#303); and</li> <li>• Take reasonable steps to safeguard foster children from hazards (#306).</li> </ul> <p>See the Child Welfare Information Gateway's guidance on <a href="#">leaving a child home alone</a> (specifically the prompts on age and maturity, circumstances, and safety skills). There is no universally accepted age when all children can stay home alone safely.</p> <p>Caregivers must consider a child's physical, mental, developmental, and emotional maturity and needs, and their willingness and comfort with being alone. Caregivers need to be sure children have the skills and maturity to handle unsupervised situations safely. Caregivers may consider leaving a child unsupervised once they have reached the developmental maturity of 11 years of age and older.</p>	<ul style="list-style-type: none"> <li>• Inadequate supervision that violates the <a href="#">Licensing Regulations for Foster Homes in Vermont</a> or <a href="#">Licensing Regulations for Residential Treatment Programs in Vermont</a></li> <li>• Inadequate supervision that places a child or youth at risk of harm or risk of serious physical injury (see Family Services <a href="#">Policy 50</a>)</li> <li>• Supervision arrangements that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>



Child & Youth Activity Category	<b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve</b> or <b>disapprove</b> independently without DCF-FSD's explicit permission	<b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order
<b>Babysitting</b>	<ul style="list-style-type: none"> <li>Enroll and participate in online or in-person babysitting classes offered by the <a href="#">American Red Cross</a> or other reputable organization.</li> <li>If developmentally appropriate and determined to be safe, youth age 11 and older in DCF custody may babysit other children.</li> </ul>	<ul style="list-style-type: none"> <li>Children/youth with sexually harmful behaviors are not permitted to babysit</li> <li>Children/youth in DCF custody are not permitted to babysit other children in DCF custody</li> <li>DCF-FSD approval is required for siblings to babysit other siblings in DCF custody</li> <li>Babysitting that conflicts with a safety plan, treatment plan, case plan, or court order</li> </ul>
<b>Employment (in accordance with state and federal laws)</b>	<p>Youth 14 years and older will be encouraged and supported in:</p> <ul style="list-style-type: none"> <li>Accessing employment-related services, such as the <a href="#">Vermont Department of Labor (DOL)</a> or <a href="#">VocRehab Vermont</a></li> <li>Seeking internship opportunities and/or job shadowing</li> <li>Interviewing for employment</li> <li>Obtaining employment if it does not interfere with school</li> </ul> <p>Opportunities for children and youth under 14 may include:</p> <ul style="list-style-type: none"> <li>Job shadowing experiences</li> <li>Internship opportunities</li> <li>Babysitting</li> <li>Community service, volunteer projects, or philanthropic opportunities</li> </ul>	<ul style="list-style-type: none"> <li>Children/youth under 14 years old are not legally permitted to work</li> </ul>
<b>Motorized Activities</b>	<p>Children/youth and caregivers must comply with all laws, take required safety courses, and use appropriate protective/safety gear. See the <a href="#">Vermont law specific to all-terrain vehicles</a>, <a href="#">Vermont ATV Manual</a>, the <a href="#">Vermont Snowmobile Regulations</a>, the <a href="#">Handbook of Vermont Boating Laws and Responsibilities</a>, <a href="#">Vermont's Legal Requirements for Boating</a>, and the <a href="#">Official Vermont Boating Safety Course Online</a> for additional information.</p> <p>Children/youth <b>riding</b> in/on a motorized vehicle with an adult, including but not limited to:</p> <ul style="list-style-type: none"> <li>Snowmobiles</li> <li>All-terrain vehicles (ATV)</li> <li>Dirt bikes</li> <li>Go-karts</li> <li>Jet skis</li> <li>Boats</li> </ul>	<ul style="list-style-type: none"> <li>Children under 12 years old are not legally permitted to operate most motorized equipment or vehicles without restrictions</li> <li>Any activities that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>

Child & Youth Activity Category	<b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve</b> or <b>disapprove</b> independently without DCF-FSD's explicit permission	<b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order
	<p>Youth 12 years and older <b>operating</b> motorized equipment/vehicles supervised by a legal adult and following the appropriate safety guidance, including but not limited to:</p> <ul style="list-style-type: none"> <li>• Snowmobile</li> <li>• All-terrain vehicles (ATV)</li> <li>• Dirt bikes</li> <li>• Go-karts</li> <li>• Jet skis</li> <li>• Boats</li> </ul> <p>For children under 12 to operate an ATV in Vermont, they must be on land owned by their parents, family, or guardian; have written permission of the landowner or lessee where they are operating the ATV; or must be directly supervised by someone at least 18 years of age.</p> <p>Children/youth and caregivers must comply with all laws and use appropriate protective/safety gear. See the American Academy of Pediatrics <a href="#">Lawn Mower Safety Recommendations</a>.</p> <p><b>Lawn Equipment:</b></p> <ul style="list-style-type: none"> <li>• Operate a walk-behind power mower or hand mower if 12 years or older</li> <li>• Operate a riding lawn mower if 16 years or older</li> <li>• Operate a brush cutter (also known as trimmer mowers or weed whackers) if 16 years or older</li> </ul> <p><b>Farm Equipment:</b></p> <ul style="list-style-type: none"> <li>• Grant approval for youth to enroll in a tractor safety course if 14 years or older</li> </ul> <p>See the Vermont Department of Motor Vehicles (DMV) website specific to <a href="#">Teen Drivers</a>, the <a href="#">AAA Guide to Teen Driver Safety</a>, and the <a href="#">AAA Parent-Teen Driving Agreement</a>.</p> <p>Youth should be supported in taking steps to obtain a driver's license once they reach 15 or 16 years of age if developmentally appropriate. Youth under 18 years old are required to complete the following phases of the <a href="#">Vermont GDL Program</a> to obtain a driver's license:</p> <ul style="list-style-type: none"> <li>• Driver's education course</li> <li>• Learner's permit (15 years old)</li> <li>• Junior driver's license (16 years old)</li> <li>• Senior driver's license (18 years old)</li> </ul> <p>With a junior driver's license, youth are permitted to drive alone but must follow certain restrictions:</p>	
<b>Lawn &amp; Farm Equipment</b>		<ul style="list-style-type: none"> <li>• All operation or use of tractors or other farm equipment</li> <li>• Any activities that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>
<b>Driving</b>		<ul style="list-style-type: none"> <li>• Any activities that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>



Child & Youth Activity Category	<p><b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve or disapprove</b> independently without DCF-FSD's explicit permission</p>	<p><b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order</p>
	<ul style="list-style-type: none"> <li>Youth cannot be employed to drive (delivery jobs or courier service jobs) until they have held the license for 1 year or have turned 18 years old.</li> <li>Youth cannot carry any passengers for the first 3 months unless they are accompanied by a licensed adult who is at least 25 years old.</li> <li>Youth may begin carrying family members as passengers only during the second 3 months.</li> <li>After 6 months, there are no passenger restrictions.</li> </ul> <p>Other activities related to driving:</p> <ul style="list-style-type: none"> <li>Ride in a car with a friend who has a senior driver's license or junior driver's license for at least 6 months</li> <li>Transport other children (peers, siblings, other children placed in the home) if the youth has a senior driver's license or junior driver's license for at least 6 months</li> <li>Ride in a car with an adult, such as a friend's parent</li> </ul> <p>Youth in DCF custody who obtain a driver's license and are subsequently adopted/change their name are required to officially change the name associated with their driver's license through the Vermont DMV within 30 days of the name change per <a href="#">23 V.S.A. § 205</a>.</p> <p>Children/youth and caregivers must follow the Vermont Fish &amp; Wildlife Department's <a href="#">statutes and regulations</a> and take appropriate safety measures. Firearms must be stored in accordance with the <a href="#">Licensing Regulations for Foster Homes in Vermont</a> (#407).</p> <ul style="list-style-type: none"> <li>Grant approval for children/youth to take online hunter education courses</li> <li>Enroll youth ages 12 and older (at a sixth-grade reading level) in the in-person hunter education course, bowhunter education course, or combined class through the Vermont Fish &amp; Wildlife Department</li> </ul> <p>When children and youth begin voicing opinions about their appearance, personal style and expression (regardless of gender), caregivers should strive to support their preferences. Examples include:</p> <ul style="list-style-type: none"> <li>Wearing gender affirming hairstyles, clothing, and accessories</li> <li>Wearing contact lenses or glasses</li> <li>Temporarily altering one's appearance (haircut, hairstyle, hair dye, henna tattoo, temporary tattoo, spray tanning or self-tanning, etc.)</li> <li>Wearing makeup and wearing perfume/cologne</li> <li>Painting one's nails or getting manicures or pedicures</li> </ul> <p>All children and youth will be supported in wearing gender affirming clothing that aligns with their gender identity.</p>	
Hunting & Activities Involving Firearms		<ul style="list-style-type: none"> <li>Obtain/purchase a hunting license</li> <li>Hunting with a gun or bow</li> <li>Archery</li> <li>Target shooting</li> <li>Any activities involving weapons that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>
Personal Style & Appearance		<ul style="list-style-type: none"> <li>Children/youth in DCF custody are not permitted to use tanning beds</li> <li>Permanently alter one's appearance (piercings, gauges, tattoos, etc.)</li> <li>Instances where the child/youth's and parent's opinions are in conflict</li> <li>Instances where the caregiver's and parent's opinions are in conflict</li> <li>Instances where the child/youth's and caregiver's opinions are in conflict</li> </ul>



Child & Youth Activity Category	<p><b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve or disapprove</b> independently without DCF-FSD's explicit permission</p> <p>Caregivers are expected to establish house rules and norms around acceptable and unacceptable technology use. The rules should consider children's age, developmental level, maturity, and trust. These norms may differ from family-to-family. Factors caregivers should consider include:</p> <ul style="list-style-type: none"> <li>• Decide where you are comfortable having children use devices. Can they only use it in family spaces, like a family room, office or kitchen? Can they bring it into their bedroom or the bathroom? Can they use it at the dinner table?</li> <li>• Consider the difference between using a device for homework or school projects and using it for entertainment. The child's school may have specific policies for how a device may be used and by whom (i.e., no siblings or peers).</li> <li>• Talk about what it means to "balance" time spent with technology, media, and other activities. What are some steps your family can take to balance screen time with face-to-face time? Do you want to make the dinner table a device-free zone, in which no family member (not even the adults) may use a cell phone, tablet, or computer? Do you want to set a curfew for when devices need to be shut off or put away?</li> </ul> <p>Caregivers are expected to monitor/limit technology use based on the house rules and norms, and clearly explain to youth how they will be monitored or limited. Methods of monitoring technology use include: limiting the number of hours and locations where devices can be used, knowing the child's passwords and checking their activity, employing privacy settings (location tracking, parental controls for internet use, or use of monitoring apps), and having ongoing dialogue about online behaviors and setting healthy limits. Caregivers should increase monitoring or employ restrictions based on behaviors, violations of agreed upon rules, or incidents. The use of technology is an ongoing discussion and learning opportunity for young people and caregivers.</p> <p>See <a href="#">Social Media: Tips for Foster Parents and Caregivers</a> and <a href="#">Common Sense Media's Family Toolbox</a>, which contains <a href="#">family media agreements</a>, <a href="#">device contracts</a>, <a href="#">a media log</a>, <a href="#">tip sheets</a>, <a href="#">a sexting handbook for teens</a>, <a href="#">digital glossary of terms</a>, <a href="#">parent advice videos</a>, and <a href="#">activity sheets</a>.</p> <p>When safe and developmentally appropriate, children and youth should:</p> <ul style="list-style-type: none"> <li>• Have access to and learn how to use technology, the internet, and electronic devices (iPods, tablets, laptops, computers, gaming systems, etc.) with appropriate monitoring</li> <li>• Have access to social media accounts with appropriate monitoring</li> <li>• Receive support and be taught about the risks of technology and social media for all young people, and the special risks that children in foster care might face</li> <li>• Learn how to keep personal information private and set strict privacy settings</li> </ul>	<p><b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order</p> <ul style="list-style-type: none"> <li>• Own a cell phone</li> <li>• Technology access for youth who have recently run away or been missing</li> <li>• Technology access that places a suspected or known victim of sex trafficking in danger or at risk</li> <li>• Technology use that compromises a child or family's confidentiality</li> <li>• Allowing unlimited and/or unmonitored technology access is not permitted</li> <li>• Technology access which conflicts with a safety plan, treatment plan, case plan, or court order</li> </ul>
Technology		



Child & Youth Activity Category	<p><b>GREEN</b> – Examples of childhood activities that are generally considered normal which caregivers can <b>approve</b> or <b>disapprove</b> independently without DCF-FSD's explicit permission</p> <ul style="list-style-type: none"> <li>Have access to online support/community groups for youth in foster care, such as <a href="#">FosterClub</a>, <a href="#">Foster Care Alumni of America</a>, and the <a href="#">Youth Development Program's Facebook Page</a></li> <li>Learn how to use technology in support of future life skills (build a resume, search for jobs, search for apartments, research future career options, search and apply for colleges, scholarships, or financial aid)</li> </ul>	<p><b>RED</b> – Examples of childhood activities DCF-FSD must discuss with caregivers, approve, or obtain a court order</p>
<b>Photos</b>	<p>Children and youth will be supported in having yearbook photos, senior photos, school dance photos, and other photos with teammates or peers. Additionally, photos of children and youth may appear in a newspaper if the young person is not identified as a "foster child", in "DCF custody", or "a ward of the state"</p> <ul style="list-style-type: none"> <li>Photos of children/youth in DCF custody for brochures or advertising purposes are not permitted</li> <li>Photos that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>	<ul style="list-style-type: none"> <li>Privileges that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>
<b>Privileges</b>	<ul style="list-style-type: none"> <li>Access to toys, games, books, movies, etc. within the home</li> <li>Magazine or other mailed or electronic subscriptions</li> <li>Rearranging one's bedroom or having choices of décor or decoration</li> <li>Receive a personal allowance</li> <li>Open and maintain a bank account (savings and/or checking)</li> <li>Learn how to balance a checkbook and write/deposit checks</li> <li>Learn how to use online banking</li> <li>Learn basic credit and loan information</li> </ul>	<ul style="list-style-type: none"> <li>Activities that conflict with a safety plan, treatment plan, case plan, or court order</li> </ul>
<b>Financial Skills</b>	<p>The <a href="#">Licensing Regulations for Foster Homes in Vermont</a> (#319) require foster parents to respect a child's privacy (including personal space and personal belongings). Caregivers are expected to establish house rules and norms regarding respecting all household members' privacy. For instance:</p> <ul style="list-style-type: none"> <li>Is there a rule about knocking on closed doors before entering?</li> <li>Are there rules regarding closing bedroom doors (when the child is alone vs. when friends, siblings, or a significant other are in the bedroom)?</li> <li>Are household members welcome in bedroom spaces?</li> <li>Is it expected that the person doing laundry will be entering bedrooms and bathrooms to gather laundry and put clean laundry away?</li> <li>Similarly, is it expected that household members will enter bedrooms to collect glasses, dishes or other items from the kitchen that may have accumulated in a bedroom?</li> <li>Are there any behaviors or actions that could prompt an area to be searched? How is this communicated to the young person?</li> </ul> <p>Children and youth are always able to have private conversations with their attorney, guardian ad litem (GAL), Family Services Worker, therapist, or other team members</p>	<ul style="list-style-type: none"> <li>Privacy which conflicts with a safety plan, treatment plan, case plan, or court order</li> <li>Privacy infringements that violate the <a href="#">Licensing Regulations for Foster Homes in Vermont</a> or <a href="#">Licensing Regulations for Residential Treatment Programs in Vermont</a></li> <li>Privacy which conflicts with a therapeutically or medically determined and documented need</li> <li>There are limits to privacy in circumstances of imminent danger (concern of a missing weapon, active threats of self-harm or suicide, etc.)</li> <li>Surveillance recording devices of any kind (video monitors, "nanny</li> </ul>
<b>Privacy</b>		



# Youth Connections Scale

## (A) Tools for Youth Connections

	Yes	No
Has a genogram or connectedness map been completed with youth?	<input type="checkbox"/>	<input type="checkbox"/>
Has a Lifebook been created with or for the youth?	<input type="checkbox"/>	<input type="checkbox"/>

## (B) Number of Supportive Adult Connections: For each category, please write the total number of meaningful relationships that apply for youth at this time.

"Meaningful relationships" are defined by the youth. This would include adults who have some on-going contact with the youth and who can be counted on for some type of support.

### Total # of Adult Relationships for Each Category

Mother (birth, adoptive, stepmother)	
Father (birth, adoptive, stepfather)	
Adult siblings	
Other adult relatives	
Current foster parent	
Former foster parent	
Current or former social worker	
Current or former teacher	
Current or former therapist, counselor or psychologist	
Pastor, rabbi or other spiritual leader	
An adult friend, mentor or sponsor	
Other adults (Please list relationships):	

## (C) Strength of Youth Connections: Indicate the strength of the relationship between the youth and adult right now.

In categories where there is more than one person, choose the most meaningful relationship and answer about that person. You can list up to two additional adults in the last two rows. Circle the best response for each row.

**Very Weak:** No Contact

**Weak:** Infrequent contact; youth can't count on this adult for support

**Moderate:** Some contact with this adult but may not be consistent; youth feels a connection but can't count on this adult all the time

**Strong:** Contact at least once per month; youth feels a connection of the heart, mind or spirit with this person; youth can usually count on this person

**Very Strong:** Contact at least once per week; youth feels a long-term connection of the heart, mind or spirit with this person; youth can count on this person to be there for them when needed

**N/A:** Not applicable because adult is deceased or youth has no siblings

	Very Weak	Weak	Moderate	Strong	Very Strong	N/A
Parent 1 (birth, adoptive or step mother or father)	0	1	2	3	4	N/A
Parent 2 (birth, adoptive or step mother or father)	0	1	2	3	4	N/A
Siblings	0	1	2	3	4	N/A
Other adult relatives	0	1	2	3	4	N/A
Other caring adult identified by youth:	0	1	2	3	4	N/A
Other caring adult identified by youth:	0	1	2	3	4	N/A



**(D) Support Indicators:** Answer yes or no for each indicator. *These do not have to be from the same adult.*

You have an adult in your life whom you will be able to count on for the following support after you leave foster care:

Yes	No	Indicator
<input type="checkbox"/>	<input type="checkbox"/>	Providing a home to go to for the holidays
<input type="checkbox"/>	<input type="checkbox"/>	Providing an emergency place to stay
<input type="checkbox"/>	<input type="checkbox"/>	Providing cash in times of emergency
<input type="checkbox"/>	<input type="checkbox"/>	Help with job search assistance or career counseling, or providing a reference for youth
<input type="checkbox"/>	<input type="checkbox"/>	Help with finding an apartment or co-signing a lease
<input type="checkbox"/>	<input type="checkbox"/>	Help with school ( <i>homework, re-enrolling in school, help in applying to colleges</i> )
<input type="checkbox"/>	<input type="checkbox"/>	Assisting with daily living skills, such as cooking, budgeting, paying bills and housecleaning
<input type="checkbox"/>	<input type="checkbox"/>	Providing storage space during transition times
<input type="checkbox"/>	<input type="checkbox"/>	Emotional support – a caring adult to talk to
<input type="checkbox"/>	<input type="checkbox"/>	Sharing in or supporting experiences of youth's cultural and spiritual background
<input type="checkbox"/>	<input type="checkbox"/>	Checking in on youth regularly – to see how they are doing
<input type="checkbox"/>	<input type="checkbox"/>	Assisting with medical appointments so youth does not have to experience that alone
<input type="checkbox"/>	<input type="checkbox"/>	Assisting with finding and accessing community resources.
<input type="checkbox"/>	<input type="checkbox"/>	A home to go for occasional family meals
<input type="checkbox"/>	<input type="checkbox"/>	Help providing transportation ( <i>help with purchasing a car</i> ) or figuring out public transportation
<input type="checkbox"/>	<input type="checkbox"/>	Someone to send care packages at college
<input type="checkbox"/>	<input type="checkbox"/>	Assisting with purchasing cell phone and service ( <i>for example, youth is added to a family plan</i> )
<input type="checkbox"/>	<input type="checkbox"/>	A place to do laundry
<input type="checkbox"/>	<input type="checkbox"/>	Supporting youth in civic engagement such as voting and volunteering

List has been modified and adapted from the FosterClub Permanency Pact (2004).

**(E) Level of Youth Connections:** Indicate your level of agreement with the following statements.

Circle the best response.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
While in foster care, you have connected or re-connected with relatives or caring adults who will be lifelong supportive connections	0	1	2	3	4
An adult has made a commitment to provide a permanent, parent-like relationship to you	0	1	2	3	4
You are living with an adult who has or plans to adopt you or become your legal guardian	0	1	2	3	4
You feel very disconnected from any caring adults	0	1	2	3	4

Office Use Only: Youth Name \_\_\_\_\_ Youth Date of Birth \_\_\_\_\_

Worker Completing Form \_\_\_\_\_ Date of Completion of Form \_\_\_\_\_

Form Completed: Within 30 Days of Placement ☐ Within 30 Days of Discharge ☐ Other ☐

Form Completed Without Youth at Discharge: Yes ☐ No ☐ If Yes, Explain: \_\_\_\_\_

# Self-sufficiency Matrix

**Self-sufficiency:** The point at which the client is able to maintain recovery efforts and service needs without the help of the case manager or significant support from other social service agencies.

## Benchmark Outcome Scales on the Self Sufficiency Matrix

There are 14 key benchmarks defined by outcome scales on the Self-Sufficiency Matrix. It has been determined that each of the 14 areas represented by outcome scales are critical components of self-sufficiency. Here is a brief description of each scale to assist in the selection of outcome scales for individual programs:

- ❖ **Access to Services:** assesses the client's knowledge and ability to get the type of services they need to meet their individual or family needs.
- ❖ **Basic Needs:** assesses the client's ability to obtain appropriate clothing, food, and other daily living necessities (heat, mail, phone, etc.) both in terms of knowledge about how to access these basic needs and financial resources to purchase them if necessary.
- ❖ **Housing:** assesses the ability of the client to obtain appropriate housing of choice based on their circumstances.
- ❖ **Transportation:** assesses whether or not the individual has appropriate, safe, and reliable access to transportation.
- ❖ **Health Insurance:** assesses whether or not the individual has consistent, affordable, comprehensive health insurance.
- ❖ **Physical Health:** assesses the general physical well-being of the client.
- ❖ **Social:** assesses the nature of the individual's interpersonal relationships, especially the extent to which they can be a source of support.
- ❖ **Family:** assesses the nature of the individual's family relationships, especially the extent to which they can be a source of support.
- ❖ **Alcohol/Drug Use:** assesses whether or not the individual is using alcohol and/or prescription drugs in an appropriate manner. Any use of illicit drugs is considered at-risk to in crisis depending on the extent.
- ❖ **Mental Health:** assesses the emotional well-being of the client.
- ❖ **Legal:** assesses whether the client has any pressing legal issues and, if so, whether they have the knowledge, skills and resources to work toward getting the legal issues resolved.
- ❖ **Education:** assesses academic, institution-based achievements.
- ❖ **Employment:** assesses the skills and abilities a client has for achieving and sustaining a career given the changing dynamics of the workforce, as well as the nature of the job or career in which the client is employed and considers the permanency of, stability of, and benefits that accompany the employment.
- ❖ **Life Skills:** assesses ability to 1) to manage relationships with family, friends, and colleagues; 2) handle the day-to-day tasks and stresses associated with being an independent adult; 3) pay bills in a timely fashion, develop and maintain a budget, and understand other important financial issues; and 4) assesses ability to plan for the future and utilize resources efficiently, especially around education and employment.
- ❖ **Safety:** assesses two separate elements of safety. The first is denoted by the letter "a" and assesses the nature of the individual's personal relationships with regard to overall safety and well-being. The second is denoted by the letter "b" and assesses the safety of one's immediate living environment and neighborhood or community. If you elect to use this scale, you will only measure one of the two elements.

<b>Domains</b>	<b><u>Thriving</u> Score: 1</b>	<b><u>Safe/Stable</u> Score: 2</b>	<b><u>Vulnerable</u> Score: 3</b>	<b><u>In Crisis</u> Score: 4</b>
<b>Access to Services</b>	No longer needs services or receiving all services needed.	Receiving some indicated services; limited choice of providers; knows what services still needed.	Knows what s/he needs but not yet receiving services, significant barriers exist, needs assistance.	Does not know what s/he needs, services do not exist, barriers prevent getting help.
<b>Housing</b>	Has safe and secure housing in place of own choosing.	Has affordable or subsidized housing; limited choice; housing safe for the most part.	Has unaffordable, overcrowded or transitional housing; housing unsafe.	Homeless or couch surfing.
<b>Basic Needs</b> Food, clothing, heat , mail, telephone, etc.	Always has resources and knowledge to meet basic needs.	Sufficient resources and knowledge to meet basic needs, occasionally needs assistance programs.	Has few resources and knowledge to meet basic needs, relies on assistance programs.	Lacks resources and knowledge to meet basic needs, no awareness of how to access assistance programs.
<b>Transportation</b>	<i>Always</i> has transportation needs met.	Has transportation needs met most or some of the time.	Rarely has transportation needs met.	Transportation needs not met and has no available transportation.
<b>Health Insurance</b>	Has good insurance with no or low co pays including Medicaid; insurance has comprehensive coverage.	Has some form of health insurance with higher co pays and/or plan limits comprehensive coverage.	No health insurance but knows how to access care.	No health insurance; barriers to accessing care.
<b>Physical Health</b>	No problems, doing regular preventative doctor and dental appointments.	Any health problems treated mostly, trying to do regular preventative doctor and dental appointments.	Has chronic health problems that are not treated regularly.	Has chronic health problems that are untreated.
<b>Social</b>	Always has a healthy support system, is able to give and receive support.	Has healthy support system most of the time or only in crisis.	Has few healthy relationships that are unreliable, support system is unhealthy and limited.	Has no healthy relationships, no support system.
<b>Family</b>	Family is stable, has open and healthy communication, supportive.	Family has some problems, generally supportive, sees need for and is accessing help.	Family is unstable; not getting help or no one to help.	Family is in crisis – neglect or abuse present; barriers to getting help; needs help.
<b>Alcohol and drug use</b>	Minimal (appropriate for age) to no usage or in recovery, high functioning in meaningful activities.	Some misuse of alcohol or other drugs, use has a tendency to lead to problems; some involvement in meaningful activities.	Significant abuse of alcohol or other drugs leading to chronic problems.	Uses alcohol or other drugs regularly even though having problems related to use, experiences increased tolerance or withdrawal.
<b>Mental Health</b>	No problems, high functioning in meaningful activities.	Minimal to occasional problems, usually makes good choices.	Has significant problems that negatively impact functioning, has great difficulty caring for self or others.	At clear risk of harm to self or others, cannot care for self or family.
<b>Legal</b>	No legal problems.	Few or some legal problems; has legal help; has begun to respond to legal actions or legal problems are nearly resolved.	Legal problems; no legal help; does not know what to do or how to access help.	Has significant legal problem(s) affecting daily living, does not know what to do.
<b>Education</b>	Has post secondary education/training.	Pursuing post secondary education/training and/or has GED or HS Diploma, basic reading, writing, & math skills.	Working towards GED or HS Diploma; has basic reading, writing, & math skills.	No GED or HS Diploma; difficulty reading & writing.
<b>Employment</b>	Has stable employment for as many hours as desired & benefits offered.	Has stable employment but not enough hours and no benefits.	Unstable temporary, seasonal, or part time employment for less than half the amount of hours desired.	No job, desires job, exhausted all unemployment compensation.
<b>Life Skills</b> Interpersonal Independent Living Budgeting	Always has skills & knowledge to interact in domains independently successfully.	Most or some of the time has skills & knowledge to interact in domains independently successfully.	Has minimal understanding of skills, knows of some resources to help learn skills.	Has not learned skills, unaware of resources to help learn skills.
<b>Safety</b>	Relationship(s) supportive, nurturing, and violence free; feels safe in community all the time and able to get help if needed.	Relationship(s) is violence free or is alone, feels unsafe in community some of the time, but able to get help if needed.	In an emotionally/ mentally abusive relationship but no physical violence, feels unsafe in community often and chooses not to access services.	In a physically and/or emotionally abusive relationship, feels unsafe in community all the time, no access to help.

# Youth Service Plan

Domains	Score (1-4)	Priority	Action Steps
Access to Services			
Housing			
Basic Needs Food, Heat, Mail, Clothing, Telephone			
Transportation			
Health Insurance			
Physical Health			
Social			
Family			
Alcohol and drug use			
Mental Health			
Legal			
Education			
Employment			
Life Skills Interpersonal, Education, Independent Living, Budgeting, Vocational			
Safety			



# Life Skills Worksheet



Youth Name: \_\_\_\_\_

YDC: \_\_\_\_\_

Date: \_\_\_\_\_

## LIFE SKILLS I would like to learn!

### Self-sufficiency with transportation:

- ☐ Using public transportation
- ☐ Understanding maps
- ☐ Taking Driver's Ed or driving lessons
- ☐ Getting your Driver's Permit and/or License
- ☐ Buying a car
- ☐ Getting insurance and registration
- ☐ Maintaining your vehicle

### Post-secondary education support:

- ☐ Understanding your IEP/504
- ☐ Advocating for yourself
- ☐ Knowing what you want to learn and study
- ☐ Knowing where you want to get your education
- ☐ Filling out college applications
- ☐ Knowing vocational options
- ☐ Alternative education programs
- ☐ Obtaining financial aid for education
- ☐ Filling out a FAFSA
- ☐ Applying for grants and scholarships

### Employment Skills:

- ☐ Knowing what sort of job you want
- ☐ Finding jobs
- ☐ Creating your resume
- ☐ Using community employment resources
- ☐ Filling out an application
- ☐ Interviewing for a job
- ☐ Choosing your references, asking permission
- ☐ Following up on an application
- ☐ Understanding job policies and rights
- ☐ Understanding workplace etiquette
- ☐ Making a bad job better
- ☐ Quitting a job respectfully
- ☐ Internships
- ☐ Volunteer opportunities

### Skills and awareness for budget and financial management:

- ☐ BUDGETING
- ☐ Opening a bank account
- ☐ Writing checks and balancing a checkbook
- ☐ Using an ATM
- ☐ Understanding your paycheck
- ☐ Paying bills on time
- ☐ Getting a money order
- ☐ Filing your taxes
- ☐ Understanding interest, loans, and credit

- ☐ Understanding your credit report
- ☐ Addressing identity theft
- ☐ Using a credit card
- ☐ Your money and your emotions

### Housing education and home management skills:

- ☐ Knowing where I want to live and with who
- ☐ Developing living agreements with housemates
- ☐ Finding an apartment using newspapers, the internet, community resources, and natural supports
- ☐ Understanding a lease and moving in
- ☐ Setting up utilities, and keeping bills down
- ☐ Knowing my rights as a tenant, communicating with my landlord and neighbors
- ☐ Budgeting
- ☐ Moving out
- ☐ House cleaning, cleaning products
- ☐ Laundry, using a Laundromat
- ☐ Garbage and recycling
- ☐ Smoke alarms and security
- ☐ Shopping for the best price
- ☐ Understanding food stamps
- ☐ Where to find free or reduced-price food
- ☐ Grocery shopping
- ☐ Meal planning
- ☐ Eating nutritionally balanced meals
- ☐ Cooking
- ☐ Understanding expiration dates, food safety, storing food properly

### Positive connections with adults or natural supports:

- ☐ Identifying my life-long connections and supports
- ☐ Finding mentors or sponsors
- ☐ Occupying free time with healthy activities
- ☐ Knowing what you like to do in your free time
- ☐ Meeting new people
- ☐ Knowing about local drop-in centers, clubs, teen centers, sports teams
- ☐ Volunteer opportunities
- ☐ Community events
- ☐ Internships
- ☐ Learning about the Youth Development Committee
- ☐ Advocating for yourself
- ☐ Developing good decision making skills
- ☐ Understanding healthy communication and intimate partner violence
- ☐ Setting limits
- ☐ Knowing the difference between assertiveness and aggression
- ☐ Expressing feelings effectively
- ☐ Confronting and challenging without physical aggression

**Health education and risk prevention:**

- o Knowing who to call in times of crisis
- o Addressing drug, alcohol, cigarette use
- o Knowing where and when AA/NA/AL-Anon meetings are
- o Knowledge of safe sex/sexually transmitted infections
- o Basic first aid
- o Understanding birth control
- o Taking medications as prescribed
- o Understanding health insurance
- o Applying/re-applying for insurance
- o Going to the dentist
- o Finding a new doctor/dentist/prenatal/eye care
- o Health care, Clinics, hospital
- o Economic hardship services
- o Child care
- o Shelter and Housing assistance
- o Domestic violence resources
- o Identifying a therapist, counselor
- o Knowing about local substance abuse programs
- o Where to find free or reduced-price food
- o Applying for SSI/SSDI
- o Understanding your probation, satisfying terms
- o Developing good hygiene habits
- o Incorporating exercise into your life
- o Having up-to-date medical records

**Reduction of high-risk behavior:**

- o Crime prevention
- o Fire safety and prevention
- o Creating a sense of security
- o Economic hardship services
- o Using the internet
- o Knowledge of safe sex/sexually transmitted infections
- o Basic first aid
- o Understanding birth control
- o Domestic violence resources
- o Identifying a therapist, counselor
- o Addressing drug, alcohol, cigarette use
- o Knowing about local substance abuse programs
- o Having emergency phone numbers available
- o Reporting a crime, seeking protection

**Information/Membership Needs:**

- o Birth certificate
- o Social Security card
- o Medicaid Health Insurance card
- o Driver's license
- o Driver's permit
- o Non-Driver's ID/Photo ID
- o Power of Attorney/Living Will
- o ATM card
- o Library card
- o Voter Registration
- o Bus pass
- o Medic Alert bracelet/necklace
- o Auto Insurance card
- o Selective Service registration
- o Medical/vaccine records
- o Green card/work permit
- o Diploma/GED
- o Resume

# Connection Questions

## When you lived with your family:

- ❖ Who did you count on when your parents were not around?
- ❖ Who did you spend holidays and birthdays with?
- ❖ Who was your favorite teacher(s) at school?
- ❖ Who were your closest friends and what were they like?
- ❖ Describe your relationship with your extended family. Was there anyone that you could count on when you needed someone?
- ❖ Were you in any programs (like scouts, church groups, sports teams, etc)?
- ❖ Were there any other people that were positive, that we have not already thought of, that you had a connection with when living with your birth family?

## While in foster care:

- ❖ Who are your current foster parents? Or residential counselors?
- ❖ Can you describe what they are like?
- ❖ Have you had other foster parent? If yes, can you describe your relationship with the ones you felt most connected to:
- ❖ Do you know your Guardian ad Litem? How would you describe this relationship?
- ❖ Did you visit with any other families on weekends or holidays?
- ❖ Were there any teachers or people who worked in the school that you felt cared about you or that you really liked?
- ❖ Talk about any adults who led different extracurricular activities that you are/were involved in:
- ❖ Did you go to a church while in foster care? Was there anyone involved in the church that you connected with?
- ❖ Describe your closest friends now and in past foster homes. Did you get to know any of their families? If yes, were there any that you liked?

## Connection Circles

**Name:**

**Date:**

