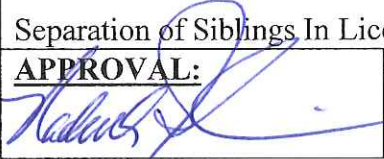




Separated Siblings in Licensed Care

DEPARTMENT NAME: Programs – Foster Care		
SUBJECT: Separation of Siblings In Licensed Care	POLICY NUMBER: PD-003	
APPROVAL: 	EFFECTIVE DATE: 8-18-2015	REPLACES: PD-003, dated 4/18/12

- I. PURPOSE:**
This policy has been developed to address 65C-28.002 (2) of the administrative code in regards to reunification of and visitation between separated siblings in out of home care. This operating procedure establishes the process to be followed when children in licensed care are separated. Its intent is to establish a system to track when sibling are separated, what efforts are being made to reunify the siblings, and plan for face to face contact between siblings on a weekly basis (unless otherwise ordered and approved by the court).

- II. REVIEW HISTORY:**
Revised April 18, 2012 and August 1, 2015

- III. CONTACT:**
Director of Programs

- IV. PERSONS AFFECTED:**
Children’s Network staff and contracted providers

- V. POLICY:**
It is the policy of the Children’s Network of Southwest Florida to assure all separated siblings are reunified in a timely manner and that siblings are provided face to face contact on a weekly basis to maintain the bond and connections between them.

- VI. RATIONALE:**
In order to assure that all separated siblings are afforded all opportunities to reside together while remaining in licensed care.

- VII. CROSS REFERENCES:**
Florida Administrative Code 65C-28.002 (2)

- VIII. PROCEDURES:**
 - A.** Every effort must be made to place siblings in the same family foster home when they are initially removed and placed in licensed care. The Case Management Organization must document all efforts made to place siblings in

the same family foster home. If siblings must be separated the Case Management Organization must provide a plan of action to reunify the siblings in a timely manner. The children must be staffed on a monthly basis to include the Case Management Organization's Placement's Supervisor, and/or Licensing Supervisor, Child Welfare Case Manager, and/or Child Welfare Case Manager, and Children's Network Licensing Specialist. The Case Management Organization is responsible for completing the Sibling Separation Staffing Form (attachment A) prior to the scheduled staffing. A copy of the form must be maintained in the child's electronic case record and must be uploaded to FSFN.

B. Once placement has been secured every effort must be made to maintain siblings in the same family foster home. If a foster family gives notice to have a child removed that is part of a sibling group in the home the agency must provide documentation of all efforts being made to maintain the siblings in the same family foster home. If siblings must be separated the Case Management Organization must provide a plan of action to reunify the siblings in a timely manner. If the separation is made because continued placement would compromise the safety or well-being of the other siblings then the case management organization must provide a reason for the recommendation at the monthly staffing.

C. If siblings are separated the case manager shall ensure that separated siblings in licensed care maintain in-person contact unless the visitation would compromise the safety or well-being of either child. Sibling visitation shall only be limited or terminated by order of the court, which shall be reflected in the case plan.

1. Weekly in-person visitation between separated siblings shall be recommended to the court unless it is deemed not feasible or not in the best interest of one or more of the children concerned.
2. If weekly in-person visitation between separated siblings is not recommended to the court, the court shall be advised of the reasons for the recommendation. When there is a recommendation of no visitation or less than weekly visitation because it is not in the best interest of the child, the court shall be provided clinical documentation of those reasons. Whenever no visitation or less than weekly visitation is recommended, the reasons shall be documented in the case file.

Attachments:

Sibling Separation Staffing Form

Attachment A
Sibling Separation Staffing

Agency: LSF FPS FBCH GC

Staffing Date: _____

Placement Supervisor: _____

Program Director: _____

Child(ren's) Name(s)	DOB	Current Placement	Date of this placement	Placement Capacity

Circumstances Surrounding the Separation: (What efforts were made to maintain the sibling group:

Reunification of siblings: (What efforts have been made to reunify them)

Current and future services provided/needed for assistance in reunifying and maintaining the children with the same family foster home:

Visitation Plan:

Name of staff completing form **Date**

Licensing Specialist/Manager Notes: