

Washington State Supreme Court Commission on Children in Foster Care

Agenda

1:00 pm <i>5 min</i>	1. Welcome and Introductions	Justice Bobbe Bridge (ret.) Co-Chair
1:05 pm <i>30 min</i>	2. DSHS/Children's Administration Updates	David Del Villar Children's Administration
1:35 pm <i>30 min</i>	3. eQuality Protocol	Nicholas Oakley CCYJ
2:05 pm 20 min	4. Family Advocacy Center Updates	MeLisa Carson CCYJ
2:25 pm <i>15 min</i>	5. The Foster Innovation Lab	Shannon Mead FPAWS
2:40 pm <i>50 min</i>	6. ESSA Foster Care Requirements	Jess Lewis OSPI
3:30pm <i>15 min</i>	7. Foster Youth Summit Report	Liz Trautman & Sabian Hart The Mockingbird Society
3:45 pm <i>15 min</i>	8. New Business	Justice Bobbe Bridge (ret.) Co-Chair
4:00 pm	Adjournment	Justice Bobbe Bridge (ret.) Co-Chair
	Next Meeting: March 20 th , 2017	

THE FAMILY ADVOCACY CENTER STABILIZES FAMILIES:

The Family Advocacy Center is an innovative service model that provides legal representation and, if needed, social work services, and parent ally supports to families to prevent the unnecessary placement or prolonged stay of children in foster care. FAC collaborates with Children's Administration to keep families together by strengthening a caregiver's ability to provide for a child's safety or permanence.

OUR GOALS ARE TO:

- keep children safe and stable within their families
- minimize the emotional trauma caused by removal and foster care placement
- allow the foster care system to focus its resources on children who need its protection

FAC's multi-disciplinary team (attorney, social worker, parent ally) resolves legal issues that propel children unnecessarily into foster care and removes legal barriers to a child's exit from care.

Referrals to FAC must come from: Children's Administration or other child welfare stakeholders, including but not limited to public defenders, Assistant Attorney Generals, and CASA program.

FAMILY ADVOCACY CENTER

YWCA South King County Regional Center 1010 South 2nd Street Renton, WA 98057

INTAKE EMAIL: FAC@ccyj.org

Cindy Yeung FAC Attorney 206-707-0880 | cindyy@nwjustice.org



FAMILY ADVOCACY CENTER

stabilizing families minimizing trauma maximizing resources







TO BECOME A CLIENT, A PARENT OR CAREGIVER MUST:

Have a legal issue that, if successfully resolved, would prevent placement of a child in foster care, close a CPS investigation, close a FAR case, or lead to the dismissal of an ongoing dependency proceeding with no additional DSHS CA intervention or services.

OR

Have a legal issue that, if successfully resolved, would allow a child to exit foster care to a permanent home with no additional DSHS CA intervention or services.

AND

ALL PARTIES MUST BE IN GENERAL AGREEMENT.

CASE EXAMPLES

PREVENTION: Domestic Violence, Parentage, Parenting Plan, Child Support, Public Benefits Due to abuse by the mother's partner, CPS determines that her children need to be removed from the home. To prevent placement in foster care, the children's father must establish paternity. Both parents are in agreement that foster care is not the right outcome for their children.

The father is referred to FAC and is assisted by the attorney in establishing paternity, obtaining a protection order, and entering a temporary parenting plan and child support order. The FAC social worker also helps the father apply for benefits and find a larger home for the family. The parent ally provides emotional support and helps the father understand what he must do to retain custody of his children. As a result, the children are safe at home and the CPS case is closed.

PERMANENCY: Criminal Records, Landlord-Tenant, Licensing

After spending several years in foster care, a child has the possibility of being adopted by a relative. However, the adoption home study is stalled due to an old felony conviction, suspended driver's license, and a broken furnace in the relative's home. The parents are in agreement with the adoption.

The relative is referred to FAC where staff assist in sealing/vacating her felony conviction, reinstating her driver's license, and requiring her landlord to repair the furnace. As a result, the home study is approved and the child is adopted into a permanent and loving home.

COMMON LEGAL ISSUES HANDLED BY THE FAMILY ADVOCACY CENTER:



- Parenting Plan
- Temporary Custody Order
- Non-Parental/Third-Party Custody
- Guardianship
- Paternity
- Dissolution/Divorce
- DV Protection/No-Contact Order
- Criminal Record Clean-Up
- Landlord/Tenant
- Public Benefits
- Licensing/Administrative





615 2nd Ave, Ste 275, Seattle, WA 98104 206.696.7503 | supportccyj@ccyj.org | www.ccyj.org

DRAFT

Protocol for Safe & Affirming Care

The following is an initial <u>draft</u> of the Protocol for Safe & Affirming Care. CCYJ's eQuality Project is providing stakeholders with the opportunity to review and provide comments through December 5, 2016. Following the review and comment period, eQuality will publish the final draft.

Contact: Nicholas Oakley, JD, eQuality Project Manager, at <u>noakley@ccyj.org</u> or 206.696.7503 ext. 25.

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About CCYJ and eQuality

The Center for Children & Youth Justice (CCYJ) advances justice for children and youth through juvenile justice and foster care systems reform. It builds diverse partnerships and pioneers innovative reforms that support children and youth, stabilize families, and strengthen communities. For more information, please visit <u>www.ccyj.org</u>.

CCYJ launched eQuality in 2013 as a multi-phased project aimed at creating lasting reform within the child welfare and juvenile justice systems for LGBTQ+ youth. In its first phase, eQuality conducted the first comprehensive research effort on the experiences of Washington's lesbian, gay, bisexual, transgender, queer, and questioning youth in the child welfare and juvenile justice systems and published report, *Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems.* This report served as the impetus for Phase II of eQuality, which includes the development of this Protocol. For more information, please visit: <u>http://ccyj.org/initiatives/equality/</u>.

Acknowledgments

First and foremost, we-- eQuality Project staff--are immensely grateful to the LGBTQ+ system-involved youth and LGBTQ+ young adults who have system experience who courageously shared their personal experiences to the eQuality Project.

We would also like to recognize the organizations and individuals who made the development of the Protocol for Safe & Affirming Care possible through their generous financial support, including the Raikes Foundation, the Pride Foundation, QLaw Association of Washington, Seattle Goodwill, and numerous individual donors.

We are thankful to the eQuality Project Advisory Committee for dedicating their time and expertise throughout the development of this Protocol. They are Jamie Belieu; Judge Elizabeth Berns, Detective Kim Bogucki; Marsha Botzer; Judge James Doerty, ret.; Lea Ennis; Alison Gerttula; Anthony Gipe; Natalie Green; Carrie Hennan; Kris Hermanns; Mark Lee; Judge Anne Levinson, ret.; Linda Lillevik; Ann McGettigan; Barbara "b.g." Nabors-Glass; Shane Nybo; Caleb Oken-Berg (ex officio); Senator Jamie Pedersen; Andy Sachs; Kat Scheibner; and Fred Swanson.

We are grateful to the dedicated professionals, volunteers, caregivers, and youth who participated in developing this Protocol in one of the four regional mini-summits the eQuality Project held across Washington State.

Erica	Allison	Children's Home Society of Washington Triple Point
Erik	Applebee	Alliance for Child Welfare Excellence
Sherri	Aune	Whitman County Juvenile Administrator
Darryl	Banks	Benton Franklin Juvenile Justice Center
Ronni	Batchelor	Lutheran Community Services Northwest
Dan	Baxter	King County Juvenile Court

Jami Mishalla	Belieu	Children's Administration
Michelle	Betts	Children's Administration
Kristen	Bishopp	Bishopp Law Office
Minnie	Bliesner	The Mockingbird Society
Shannon	Boniface	Children's Administration
Cindy	Bridar	Administrative Office of the Courts
Launi	Burdge	Children's Administration
Bonnie	Bush	Spokane County Juvenile Court
Sevan	Bussell	Odyssey Youth Movement
Berta Nul	Cambell	
Michael	Campbell	Children's Administration
Mike	Canfield	Foster Parents Association of Washington State
Grifynn	Clay	City of Spokane
Victoria	Colliver	Whatcom County Juvenile Court
Amanda	Crawmer	SE Family Youth and System Partner Round Tables/Family
Sheila	Davidson	Benton Franklin Counties Superior Court - Guardians ad Litem
Peggy	Devoy	Children's Administration
T.J.	Driver	Spokane County Juvenile Court/Data Systems Manager
Mabel	Elson	Lutheran Community Services Northwest
Lea	Ennis	King County Juvenile Court
Daniel	Estes	Alliance for Child Welfare Excellence
Amy	Fager	Excelsior Youth Center
Melissa	Fieldling	Children's Administration
Kim	Foley	Aspen Victim Advocacy Services
Lovella	Fullton	The Mockingbird Society
Christine	Garcia	Children's Administration
Barb	Geiger	Children's Administration
Jennifer	Godfrey	Children's Administration
Natalie	Green	Children's Administration
Kristina	Greene	Amara
Lisa	Greene	Rural Resources Victim Services
Dori	Guterson	Families Like Ours
Heather	Hamasaki	Children's Administration
Dana	Hanson	Thurston County Juvenile Court
Garrett	Harrison	Cowlitz Court Appointed Special Advocate Association
Amber	Hasler	Pierce County Juvenile Court
Erin	Hatheway	The Mockingbird Society
Delton	Hauck	Children's Administration
Brett	Helling	Children's Administration
]]	Herbert	SE Family Youth and System Partner Round Tables/Family
MaShelle	Hess	Children's Administration
Irena	Hess	Court Appointed Special Advocate Association
April	Hinkle-Johnson	Northwest Youth Services
Rick	Holcomb	Eastern Washington University
Paula	Holter-Mehren	Tri-County Juvenile Court
Hermenia	Jackson	Children's Administration
Monica	Jenkins	Children's Administration
Mike	Johnson	Skagit County Juvenile Court
Christine	Kakalecik	Cocoon House
Wyatt	Kanger	Yakima Neighborhood health
Professor Lisa	Kelly	University of Washington School of Law
Lenea	Keltner	Whitman County Court Appointed Special Advocate Association
Lori	Kinner	Spokane City Council
Josh	Koutcecky	Children's Administration
Mathew	Krempel	Lutheran Community Services Northwest NW
Todd	Kukzyk	Families Like Ours
Nicole	LaBelle	Children's Administration
Commissioner Jennie	Labelle	King County Juvenile Court
Commissioner Jennie	Luitu	King county suverine court

Tamsen	Latimer	Benton Franklin Juvenile Justice Center
Wendy	Lenz	Court Appointed Special Advocate Association Clark Co
Jess	Lewis	Office of the Superintendent of Public Instruction (OSPI)
Mary	Li	Office of the Attorney General
Annette	Lukinbill	Pierce County Attorney and Court Appointed Special Advocate Association
Holly	Luna	Children's Administration
Debbie	Lyn	Children's Administration
Val	MacIntyre	Court Appointed Special Advocate Association
Jim	Madsen	Mason County Juvenile Court
Jill	Malat	Children's Representation Project, Office of Civil Legal Aid
Theresa	Malley	Children's Administration
John	March	Children's Administration
Keylee	Marineau	Community Youth Services
Tim	Markham	Benton Franklin Juvenile Justice Center
Robyn	Martin	Thurston Co. Office of Assigned Counsel
Yolanda	Marzest	Alliance for Child Welfare Excellence
Ana Maria	McCleary	Snohomish County Juvenile Court
Chris	McLaughlin	Children's Administration
Morgan	Mentzer	Office of Civil Legal Aid
Cameron	Mitchell	Benton Franklin Juvenile Justice Center
Eamon	Morgan	Children's Administration
Kurt	Munnich	Jefferson County Juvenile Services
Marcia	Navajas	King County Juvenile Detention
Dr. Joel	Odimba	Children's Administration
Brandy	Otto	Children's Administration
Marianne	Ozmun-Wells	Department of Social and Health Services - ODI
Dorene	Perez	Children's Administration
Shannon	Perez-Darby	Northwest Network of Bi, Trans, Lesbian and Gay Survivors of Abuse
Geri	Phillips	Children's Administration
Leila	Pozegic	The Mockingbird Society
Kris	Randall	Children's Administration
Rhea	Reynolds	Snohomish County Superior Court
Esther	, Rich	Renton High School
Cheryl	Rich	Children's Administration
Veronica	Risken-Oakes	Central Valley School District
Marilee	Roberts	Children's Administration
Ciara	Rodriguez	Children's Administration
Heather	Rodriguez	Triple Point Walla Walla Childrens Home Society of WA
Hannah	Roman	King County Department of Public Defense
Robin	Romanovich	Legal Counsel for Youth and Children
Diane	Ross	Court Appointed Special Advocate Association
Sam	Ryan	Cowlitz Court Appointed Special Advocate Association
Cedric	Samples	Benton Franklin Juvenile Justice Center
Joy	Schaad	Pierce County Juvenile Court
Sue	Serko	Pierce County Superior Court
Marty	Shaw	Cocoon House
Karla	Short	Lutheran Community Services Northwest
Julia	Simon	Cocoon House
Erin	Smith	YouthCare
Tony	Smith	Families Like Ours
Chalia	Stallings-Ala'ilima	Assistant Attorney General - Civil Rights
Vickie	Stock	Children's Administration
Elana	Stone	Treehouse
Denise	Sullivan	Spokane County Juvenile
Fred	Swanson	Gay City/Foster Parent
Annie	Taylor	Children's Administration
Jessi	Taylor	YWCA - Youth Advocacy
Anita	Teeter	Children's Administration

Mark	Terrell	Cup of Cool Water
Sheryl	Theirey	Court Appointed Special Advocate Association
Maria	Thew	Court Appointed Special Advocate Association
Jermaine	Turner	The Mockingbird Society
Yecerica	Valdivia	Aspen Victim Advocacy Services
Alisha	Vilela	Children's Administration
Sean	Walsh	All Home
Clarie	Walter	Truancy Project Coordinator ESD112
Dave	Wheeler	Benton Franklin Juvenile Justice Center
Sheila	Wilson	Families Like Ours
Jessica	Yost	Rural Resources Victim Services
Melody	Youker	Martin Hall Juvenile Facility
Dave Sheila Jessica	Wheeler Wilson Yost	Benton Franklin Juvenile Justice Center Families Like Ours Rural Resources Victim Services

Introduction

The *Protocol for Safe & Affirming Care* is a guide for the professionals, volunteers, and caregivers in Washington State's child welfare and juvenile justice systems. It lays the framework for proving safe and affirming care to lesbian, gay, bisexual, transgender, queer, and questioning youth (LGBTQ+) in these systems and, in doing so, lays the foundation for improving the lives of all youth in these systems.

The core of the Protocol is the Foundation, which contains the purpose, vision, and principles, the 10 Components of Safe & Affirming Care, each of which contain model polices and tools, and Strategies for Implementation, which includes a discussion of potential barriers to implementation and strategies for overcoming those barriers.

Background

The Protocol is the culmination of three years of work at the Center for Children & Youth Justice (CCYJ) and decades of work on the part of LGBT advocacy organizations, juvenile courts, and child welfare agencies across the United States.

In 2013, CCYJ's eQuality Project began the first comprehensive research effort on the experiences of *Washington's* lesbian, gay, bisexual, transgender, queer, and questioning ("LGBTQ") youth in the child welfare and juvenile justice systems. This effort culminated the report, *Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems*.

The findings of *Listening to Their Voices* made it clear meaningful reform would require practice and policy change at the court, agency, and organizational level in addition to any efforts at the legislative level. In other words, a protocol setting forth model practices and policies would be necessary if the eQuality Project and its partners across Washington were to meaningfully improve the lives of LGBTQ+ system-involved youth.

Recognizing that LGBTQ+ advocacy organizations, juvenile courts, and child welfare agencies across the country have been working on model policies and practices for a number of years, the eQuality Project did not seek to "reinvent the wheel." Rather, its goal was to use existing resources as a basis off which Washington could build. The result is a document that encompasses national work but centers the voices from this state.

Methodology

The eQuality Project developed the Protocol in a six stage process:

- 1. <u>Identifying the needs of Washington's LGBTQ+ youth in the child welfare and juvenile justice</u> <u>systems.</u> This stage encompassed the research and drafting of eQuality's *Listening to Their Voices* report.
- 2. <u>Conducting a national review of model policies and practices for serving LGBTQ+ youth.</u> eQuality Project staff outreached to key stakeholders in several states and completed a literature review of model policies and practices.

- 3. <u>Surveying Washington's stakeholders on their perspectives on the model policies and practices</u> <u>identified.</u> eQuality used an electronic survey to determine whether Washington's stakeholders: were already using the model policies and practices identified from the national review, believed these models were/would be beneficial to LGBTQ+ system-involved youth, and perceived potential or actual barriers to these models.
- 4. <u>Convening four regional mini-summits across the state to engage diverse groups of stakeholders in</u> <u>the design of the Protocol.</u> eQuality convened stakeholders from both systems, as well as advocates and community based service providers, in a series of four regional mini-summits for an in-depth discussion on the purpose, principles, participants, practices, and structures that should be included in the Protocol.
- 5. <u>Submitting a draft of the Protocol for review and feedback to stakeholders.</u> Using the models identified through the national review and insight gained from the mini-summits, eQuality developed a draft protocol. It then disseminated this draft to all of the stakeholders who participated in the previous stages, as well as other interested stakeholders, for their review and comment. Additionally, it held a statewide summit of high level leaders and a series of youth summits to review the Protocol.
- 6. <u>Finalizing the Protocol.</u> Incorporating the feedback from stage five, eQuality finalized the Protocol for Safe & Affirming Care.

A detailed description of this process, including results of the survey and summaries of each of the minisummits, is provided in the companion document to this Protocol, *Developing the Protocol for Safe & Affirming Care.*

Terminology

For the sake of brevity and uniformity, this Protocol uses the following terms and acronyms in a manner that may differ from and/or have a more specific meaning than in their common usage:

Caregivers: Individuals who fill a parental or guardian role for system-involved youth, such as foster parents and relative caregivers.

LGBTQ+: LGBTQ+ refers to gay, lesbian, bisexual, transgender, queer, and/or questioning. This Protocol adds the "+" to include youth who, like LGBTQ youth, face marginalization, discrimination, and/or mistreatment on the basis of their sexual orientation or gender identity. This includes, but is not limited to, youth who identify as asexual, gender-nonconforming, two-spirit, and intersex. The "+" is also recognition that terminology is constantly evolving and LGBTQ inadequately represents the population of youth whose experiences give rise to the need for this Protocol.

Professionals: Individuals employed by the child welfare or juvenile justice system, such as caseworkers and probation and detention counselors. This also includes legal professionals who work with children and families in the child welfare and juvenile justice systems, such as attorneys and judicial officers.

SOGIE: Sexual orientation, gender identity, and gender expression.

Leaders: Professionals who hold leadership positions in the child welfare or juvenile justice systems, such as regional administrators and juvenile court administrators.

System-involved: Youth who are involved in the child welfare and/or juvenile justice systems.

Volunteers: Individuals that have a voluntary role in the child welfare or juvenile justice system but do not fill a parental or guardian role for system-involved youth, such as court appointed special advocates.

Pronoun Usage

This Protocol uses the pronoun "their" as a gender-neutral singular pronoun. While the use of "his or her" remains, technically, the grammatically correct option, the pronouns "his" and "her" do not reflect the identities of a significant number of system-involved youth for whom this Protocol was developed. The authors of this Protocol opted to use more inclusive language, reflecting a recent trend toward the use and acceptance of "they" as a singular pronoun.¹

¹ See, e.g., Walsh, B. (2005, December 4). The Post drops the 'mike' — and the hyphen in 'e-mail'. *The Washington Post*. Retrieved from <u>https://www.washingtonpost.com/opinions/the-post-drops-the-mike--and-the-hyphen-in-e-mail/2015/12/04/ccd6e33a-98fa-11e5-8917-653b65c809eb_story.html?tid=a_inl&utm_term=.6a1ecc28ea0a; Nunberg, Geoff. (2016, January 13). Everyone Uses Singular 'They,' Whether They Realize It or Not. *Fresh Air*. NPR. Retrieved from <u>http://www.npr.org/2016/01/13/462906419/everyone-uses-singular-they-whether-they-realize-it-or-not;</u> Green, Robert. L. (2014, February 19). Johnson: Singular they. *The Economist*. Retrieved from http://www.economist.com/blogs/prospero/2014/02/pronouns.</u>

Understanding LGBTQ+

Understanding what it means to be a person who is lesbian, gay, bisexual, transgender, queer, or questioning takes more than a list of definitions. Terminology is constantly evolving and what was once an inappropriate or offensive term may now be an affirming one. "Queer" was widely used as an insult and is now commonly used as an affirming, umbrella term for the LGBTQ community. Conversely, terms that were once used to describe the LGBTQ community are now insufficient. The term "gay" in gay-straight alliance or "gay and lesbian" in the National Gay and Lesbian Task Force may have been intended to represent the LGBTQ community, but are no longer considered inclusive of everyone in that community.

While in-depth training and, most importantly, developing relationships with LGBTQ+ individuals is the best way to understand what it means to be LGBTQ+, the following is a brief introduction to one way of understanding the topic.

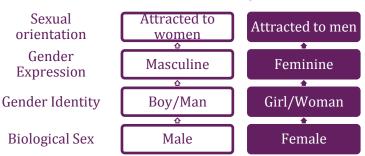
SOGIE and the SOGIE Binary²

Understanding LGBTQ+ youth (and adults) requires an understanding of the relationship between sexual orientation, gender identity, and gender expression and how those categories relate to biological sex.

Category	Questions Answered	Relates to	
Biological Sex	What did the doctor mark on my birth certificate?	Anatomy, chromosomes, and hormones.	
Gender Identity	How do I feel on the inside?	Identity and sense of self.	
Gender Expression	How do I present myself to others?	Communication of gender, including dress and appearance.	
Sexual orientation	Who am I attracted to?	Romantic and erotic response.	

For many, there is a presumption that the SOGIE categories relate in only two ways—a pathway to those whose biological sex is male and another for those whose sex is female. If someone is assigned male at birth,

the presumption follows that that person grows up to identify as a man, expresses himself in a masculine manner, and is attracted to women. Conversely, if someone is assigned female, that person grows up to identify as a woman, expresses herself in a feminine manner, and is attracted to men.

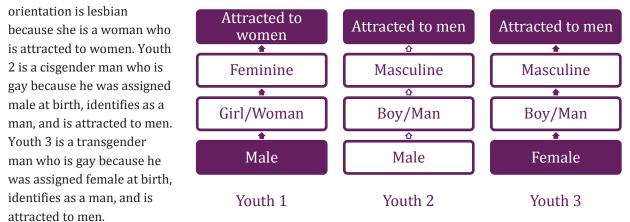


² Adapted from *Coming out As You: The Spectrum*. (2016). Retrieved from The Trevor Project: http://www.thetrevorproject.org/pages/spectrum

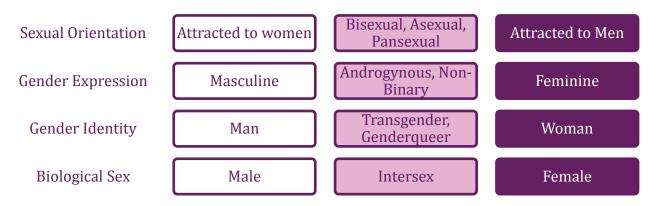
The SOGIE Relationship for LGBTQ+ Youth

The relationship SOGIE and biological sex differs for LGBTQ+ youth and adults. Their identities do not align in either one of the two ways described above. In some instances, LGBTQ+ youth still identify as either male or female, man or woman, masculine or feminine, and attracted to women or men. However, these identities correspond to each other in different ways than in the SOGIE binary. The corresponding graphic provides a visual representation of just three youth for whom this description fits. There are many other identities not highlighted here.

Youth 1 a transgender woman because she was assigned male at birth but identifies as a woman. Her sexual



For other LGBTQ+ youth, the two opposing sides of the SOGIE Binary do not reflect their identity. Their identities fall along a spectrum, in between (or outside) these two opposing sides. In fact, some youth identify as "non-binary." The following graphic provides just a few examples of these identities. It is important to understand that within each SOGIE category, there is a spectrum of identities.



LGBTQ+ youth experience harm in profound and lasting ways when adults and other youth: assume that LGBTQ+ youth's identities fit within the SOGIE Binary and that their biological sex, gender identity, gender expression, and sexual orientation align in a certain way; dismiss LGBTQ+ youth because LGBTQ+ youth's identities fall outside the binary or their SOGIE align differently; and/or convey to LGBTQ+ youth that LGBTQ+ youth are wrong or sick LGBTQ+ youth's identities fall outside the binary or their SOGIE align differently.

This shared harm is one of the reasons this Protocol considers the diverse set of youth that make up LGBTQ+ youth as one group. LGBTQ+ youth, despite their differences, have a shared experience that child welfare and juvenile justice systems must address.

Common LGBTQ+ Terms³

Biological sex:⁴ Describes an individual's biological status and is typically categorized as male, female, or intersex. There are a number of indicators of biological sex, including sex chromosomes, gonads, internal reproductive organs, and external genitalia. *Biological sex assigned at birth* is the sex marker placed on an individual's birth certificate at birth.

Bisexual: Describes an individual who is emotionally, romantically, and sexually attracted to both men and women.

Cisgender: Describes an individual whose gender identity and gender expression matches the gender typically associated with their biological sex. For example: a male who identifies as a man and is perceived as a man.

Gay: Describes a man who is primarily emotionally, romantically, and sexually attracted to other men. This term has also been used as an umbrella term to describe the LGBTQ+ community.

Gender Expression: Describes an individual's outward communication of gender through behavior or appearance. An individual's gender expression may or may not correspond with their biological sex assigned at birth.

Gender Identity: Describes an individual's inner sense of being a man, woman, or another gender. Gender identity may or may not correspond with an individual's biological sex assigned at birth.

Gender Non-Conforming: Describes an individual whose gender expression does not correspond with their biological sex assigned at birth.

Heterosexual: Describes an individual who is only or primarily emotionally, romantically, and sexually attracted to the opposite sex. The term "straight" is often used to describe heterosexual individuals.

Intersex: Describes individuals whose combination of sex chromosomes, gonads, internal reproductive organs, and external genitalia are not "typical"—according to the medical community—of "female" or "male."

³ Unless otherwise noted, all definitions are adapted from The Center for Children & Youth Justice. (2015). Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems. Seattle, WA: Ganzorn, S., Curtis, M., & and Kues. D. Retrieved from http://ccyj.org/wp-content/uploads/2015/04/LTTV_Full.pdf

⁴ Adapted from American Psychological Association. (2011). Definition of Terms: Sex, Gender, Gender Identity, Sexual Orientation. Retrieved from https://www.apa.org/pi/lgbt/resources/sexuality-definitions.pdf

Lesbian: Describes a woman who is primarily emotionally, romantically, and sexually attracted to other women.

LGBTQ: A general term used to describe individuals who identify as lesbian, gay, bisexual, transgender, and/or queer/questioning.

Queer: An umbrella term describing individuals who identify as gay, lesbian, bisexual, transgender, gender neutral, questioning, and many other identities. While this term has been used in a derogatory way in the past, many individuals and groups are reclaiming it as an all-encompassing way to describe those who do not identify as heterosexual and/or cisgender.

Questioning: Describes an individual (often an adolescent) who has questions about his or her sexual orientation and/or gender identity. Some questioning individuals will identify as LGBTQ; some might not.

Pansexual: Describes an individual who is emotionally, romantically, and sexually attracted to individuals of all gender identities and expressions including those who do not fit into the standard gender binary (man and woman).

Pronouns or Preferred Pronouns: A term used to describe gender pronouns that an individual wants others to use when referring to that individual, such as: he, him, his; she, her, hers; or they, them, theirs. Others use less common pronouns.⁵ Pronouns may or may not match the individual's birth assigned gender and may be gender neutral or words not commonly used as pronouns.

Sexual Orientation: Describes an individual's emotional, romantic, and sexual attraction to the same or opposite gender. An individual's sexual orientation is different from an individual's gender identity.

Transgender: An umbrella term that describes individuals whose gender identity differs from the biological sex assigned to them at birth. A transgender woman is a person who is assigned the sex of male at birth but identifies as female. A transgender man is a person who is assigned the sex of female at birth but identifies as male.

⁵ See, e.g., University of Wisconsin Milwaukee Lesbian, Gay, Bisexual, Transgender Resource Center. (2016). Retrieved from https://uwm.edu/lgbtrc/support/gender-pronouns/

Foundation

The foundation for the Protocol is its:

- Purpose—the ultimate reason for the Protocol;
- Vision—the desired future state that the Protocol seeks to create; and
- Principles—the truths or propositions to which professionals, volunteers, and caregivers must commit in order to achieve the Purpose and move closer to the Vision.

Purpose

The purpose statement answers the following question: why—ultimately—should professionals, volunteers, and caregivers in the Washington's child welfare and juvenile justice systems adopt the Protocol for Safe & Affirming Care.

The purpose of the PSAC is:

To uphold the rights of *all* youth in Washington's child welfare and juvenile justice systems to safety, health, and well-being. Professionals, volunteer, and caregivers will not be able to uphold the rights of all youth unless and until they address the specific needs of LGBTQ+ youth. At the same time, non-LGBTQ+ youth benefit when we address the specific needs of LGBTQ+ youth,

"Every youth has a gender identity, not just transgender youth. All youth express their gender, whether they transgress or conform to gender norms. Every youth has a sexual orientation, not just gay, lesbian and bisexual youth. Creating a professional environment that acknowledges and respects youth across the full spectrum of gender and sexuality permits all youth to explore their emerging identities, prevents mistreatment based on anti-LGBT bias, and promotes the health and well-being of all youth. It also sends the message to all youth that self-determination and affirmation are core values and gives all youth the opportunity to define themselves in a supportive and afforming environment. Learning respect for differences will serve youth in all parts of their lives."⁶

Vision

The vision statement describes the desired future state that the Protocol seeks to create.

Professionals, contracted providers, caregivers, and volunteers in Washington's child welfare and juvenile justice systems will support each and every youth in the development of the youth's gender identity and sexual orientation and recognize that that support is critical to the youth's safety, health, and well-being.

⁶ The Annie E. Casey Foundation. (2015). Lesbian, Gay, Bisexual and Transgender Youth in the Juvenile Justice System. Baltimore, MD: Shannan Wilber. Retrieved from www.aecf.org

Principles

The following principles are the truths or propositions to which professionals, volunteers, and caregivers must commit in order to achieve the Purpose and move closer to the Vision.

While the Protocol provides model policies that apply to many different circumstances, the Protocol cannot envision every circumstance in which a professional, volunteer, or caregiver will need guidance in serving LGBTQ+ youth. In instances where there is not an applicable policy or there is a lack of clarity, professionals, volunteers, and caregivers should consult these Principles.

- 1. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity without fear of harm, judgment, dismissal, or coercion to change.
- 2. **LGBTQ+ youth exist.** LGBTQ+ youth exist and their sexual orientation, gender identity, and gender expression are valid, viable, and real.
- 3. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity.
- 4. **Youth are the priority.** The health, safety, and well-being of youth is the paramount priority of professionals, volunteers, and caregivers.
- 5. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 6. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Knowledge of sexual orientation and gender identity, including LGBTQ+ identities, is a core competency for any professional, volunteer, and caregiver.
- 7. **Professionals, volunteers, and caregivers bear the burden.** Systems exist to serve youth and meet their needs. Youth should neither be required to adapt to systems nor be responsible for educating adults on LGBTQ+ issues or holding adults accountable.
- 8. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.
- 9. Youth are the experts on their own lives. Every human, including youth, is an expert in their own life.
- 10. **Our approach matters.** We are more likely to engage others if we approach them as if they are doing the best they can with what they have and know.
- 11. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

12. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems.

10 Components of Safe & Affirming Care

The 10 Components of Safe & Affirming Care include:

- 1. Rights of all youth;
- 2. Training for professionals, volunteers, and caregivers;
- 3. Safe and affirming spaces for all;
- 4. Talking about sexual orientation and gender identity with youth;
- 5. Services for LGBTQ+ youth;
- 6. Housing for LGBTQ+ youth;
- 7. Healthcare for LGTBQ+ youth;
- 8. Responding to families of LGBTQ+ youth;
- 9. Data collection on LGBTQ+ youth; and
- 10. Accountability for professionals, volunteers, and caregivers.

For each component, a purpose statement, relevant principles, policies, and tools are provided.

Purpose:	This is a statement that provides the reason for including the component.
Principles:	While the PSAC contains a list of general principles, there are principles that are particularly relevant to each component.
Policies:	These are the model policies that will fulfill the purpose of the component.
Tools:	These include electronic links to materials that professionals, volunteers, and caregivers can use as is or as a template for creating new materials. Examples include questionnaires, forms, signs, and curricula.

1. Rights of Youth

Purpose

To ensure basic, fundamental protections for youth.

Principles

The following principles are particularly relevant to the Fundamental Rights of Youth.

- 1. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity without fear of harm, judgment, dismissal, or coercion to change.
- 2. **LGBTQ+ youth exist.** LGBTQ+ youth exist and their sexual orientation, gender identity, and gender expression are valid, viable, and real.
- 3. **Youth are the priority.** The health, safety, and well-being of youth is the paramount priority of professionals, volunteers, and caregivers.
- 4. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.
- 5. **Youth are the experts on their own lives.** Every human, including youth, is an expert in their own life.

Policies

- 1. **Identification.** Youth have the right to openly identify as LGBTQ+ or any other identity and to live free from attempts to change how they identify.
- 2. **Anti-Discrimination.** All youth have the right to live free from discrimination. LGBTQ+ youth have the right to equitable services, care, placement, treatment, and benefits as non-LGBTQ+ youth and cannot be denied any of these because of their sexual orientation, gender identity, or gender expression.
- 3. **Dress.** Youth have a right to dress and groom in a manner consistent with their gender identity and gender expression.⁷
- 4. **Names.** Youth have the right to designate the appropriate name for themselves and to be referred to by that name in instances in which a first name is used and use of a legal name is not legally required.
- 5. **Pronouns.** Youth have the right to determine the appropriate pronoun to be used when referring to them.

⁷ Adapted from Majd, K., Marksamer, J., & Reyes, C. (2009). Hidden injustice: Lesbian, gay, bisexual, and transgender youth in juvenile courts. *Equity Project*. 6, 38, 49, 50, 105, Appendix E. Retrieved from http://www.nclrights.org/wpcontent/uploads/2014/06/hidden_injustice.pdf; Annie E Casey Foundation. (2014). A Guide to Juvenile Detention Reform – Juvenile Detention Facility Assessment. *Juvenile Detention Alternatives Initiative*. Retrieved from http://www.aecf.org/resources/juvenile-detention-facility-assessment

- 6. **Privacy.** Youth have the right to not disclose their sexual orientation or gender identity.
- 7. **Safer restrooms.** Youth have the right to use the restroom that is consistent with their gender identity.

Tools

	Title	Author	Link
For LGBTQ+ Youth in Foster Care	LGBTQ Youth In Washington State Foster Care	Washington State Children's Administration	<u>http://independence.wa.g</u> <u>ov/lgbtq-youth-in-</u> <u>washington-state-foster-</u> <u>care/</u>
School Safety Center	Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Youth	Office of Superintendent of Public Instruction	http://www.k12.wa.us/Sa fetycenter/LGBTQ/default .aspx
Know Your Rights Materials	How the Law Protects LGBTQ Youth	Lambda Legal	http://www.lambdalegal.o rg/know-your- rights/youth/how-the- law-protects-lgbtq-youth
	It's Your Life	American Bar Association Opening Doors Project	http://www.americanbar. org/content/dam/aba/mi grated/child/PublicDocu ments/its_your_life.authch eckdam.pdf
	Know Your Rights: LGBTQ Youth and Youth Living with HIV in Foster Care and Juvenile Justice Systems	Lambda Legal	http://www.lambdalegal.o rg/publications/xfs_know- your-rights-lgbtq-and-hiv- youth-in-foster-care

2. Training for Professionals, Volunteers, & Caregivers

Purpose

To ensure:

- All professionals, volunteers, and caregivers have the foundational knowledge necessary to ensure the safety, health, and well-being of youth as it relates to their sexual orientation, gender identity, and gender expression; and
- Each agency, court, and organization has at least one professional has a high level of knowledge with regard to sexual orientation, gender identity, and gender expression and can support other professionals, volunteers, and caregivers with these issues when they arise.

Principles

The following principles are particularly relevant to Training for Professionals, Volunteers, & Caregivers.

- 1. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 2. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Knowledge of sexual orientation and gender identity, including LGBTQ+ identities, is a core competency for any professional, volunteer, and caregiver.
- 3. **Professionals, volunteers, and caregivers bear the burden.** Systems exist to serve youth and meet their needs. Youth should neither be required to adapt to systems nor be responsible for educating adults on LGBTQ+ issues nor holding adults accountable.
- 4. **Our approach matters.** We are more likely to engage others if we approach them as if they are doing the best they can with what they have and know.

Policies

- 1. **LGBTQ+ Lead.** Every court, agency, and organization will have at least one person on staff who is highly trained on LGBTQ+ issues. This person will serve as the LGBTQ+ lead and serve as a resource for their agency.
- 2. **Mandatory Training.** Professionals, volunteers, and caregivers will undergo mandatory initial and ongoing trainings on serving LGBTQ+ youth. ⁸ Such training will:
 - a. Be in-person and include interactive discussion; it may include videos, webinars, and/or alternate training but these should not be the primary means;
 - b. Be tailored to fit the various roles within the child welfare and juvenile justice systems;

⁸ Adapted from Annie E Casey Foundation. (2014). A Guide to Juvenile Detention Reform – Juvenile Detention Facility Assessment. *Juvenile Detention Alternatives Initiative*. Retrieved from http://www.aecf.org/resources/juvenile-detention-facility-assessment

- c. Include youth-led components; and
- d. Address the following components: ⁹
 - Vocabulary and definitions relevant to LGBTQ+ youth;
 - Myths and stereotypes relevant to LGBTQ+ youth;
 - Developmental issues and adaptive strategies for LGBT youth;
 - Promoting positive development of LGBTQ+ youth;
 - The coming-out process and how families and adults can support a young person who is coming out;
 - How sexual orientation or gender identity may relate to the reasons a young person is in system involved;
 - Issues and challenges specific to transgender youth;
 - Approaches to working with the families of LGBTQ+ youth;
 - Identifying the warning signs that youth are experiencing anti-LGBTQ+ mistreatment;
 - Guidance on how to serve LGBT youth respectfully and equitably; and
 - Resources available to serve LGBT youth and their families."

Tools

	Title	Author	Link
Training Curriculum	Toward Equity A Training Curriculum for Understanding Sexual Orientation, Gender Identity, and Gender Expression, and Developing Competency to Serve Lesbian, Gay, Bisexual, and Transgender Youth in the Juvenile Justice System	The Equity Project (A collaborative initiative of Legal Services for Children, National Center for Lesbian Rights, and the National Juvenile Defender Center)	http://www.equityproject s.org/wp- content/uploads/2015/01 /Equity_Curriculum_Comp lete.pdf
	Moving the Margins: Training Curriculum for Child Welfare Services with LGBTQ+ Youth in Out-of-Home Care	Lambda Legal	http://www.lambdalegal.o rg/publications/pp_movin g-the-margins

⁹ Adapted from Wilber, S., Ryan, C., & Marksamer, J. (2006). CWLA best practice guidelines. *Washington, DC: Child Welfare League of America Best Practice Guidelines.* Retrieved from http://www.nclrights.org/wp-content/uploads/2013/07/bestpracticeslgbtyouth.pdf

	Title	Author	Link
Videos and Discussion Guides	We are GLBTQ	Washington State Department of Social and Health Services	Video: <u>https://www.youtube.com</u> <u>/watch?v=910AzCu3CPY</u> Discussion guide: <u>http://depts.washington.e</u> <u>du/allcwe/sites/default/fi</u> <u>les/sites/default/files/car</u> <u>egiver/glbtq_discussion_re</u> <u>source_guide.pdf</u>
Training Resources	Provider Training & Technical Assistance	The NW Network of Bi, Trans, Lesbian, and Gay Survivors of Abuse	http://www.nwnetwork.o rg/provider-training-and- technical-assistance/
Training Standards	Model Standards: Staff Training Focusing on the Needs of Youth in State Custody	The Center for HIV Law & Policy Teen Sense	http://www.hivlawandpol icy.org/sites/www.hivlaw andpolicy.org/files/Teen %20SENSE%20Model%20 Standards%20- %20Staff%20Training%2 0Focusing%20on%20the %20Needs%20of%20Yout h%20in%20State%20Cust ody.pdf
	Best Practices in Creating and Delivering LGBTQ Cultural Competency Trainings for Health and Social Service Agencies	National LGBT Cancer Network	http://www.cancer- network.org/downloads/b est_practices.pdf

3. Safe & Affirming Spaces for All

Purpose

To increase the comfort and sense of safety among youth and ensure all youth know—through verbal and non-verbal indicators—that they can talk about their sexual orientation and gender identity.

Principles

The following principles are particularly relevant to the Safe & Affirming Spaces for All.

- 1. **LGBTQ+ youth exist.** LGBTQ+ youth exist and their sexual orientation, gender identity, and gender expression are valid, viable, and real.
- 2. **Professionals, volunteers, and caregivers bear the burden.** Systems exist to serve youth and meet their needs. Youth should neither be required to adapt to systems nor be responsible for educating adults on LGBTQ+ issues or holding adults accountable. *Additionally, professionals, volunteers, and caregivers bear the burden of demonstrating a safe space.*
- 3. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

Policies

- 1. **Proactive affirmations.** At the initial meeting with a youth and periodically thereafter, professionals, volunteers, and caregivers will indicate, in language that is appropriate for the youth, that their agency/court/organization is a safe place for all youth, including LGBTQ+ youth, and that:
 - a. Youth will be supported regardless of their sexual orientation, gender identity, gender expression, or any other identity; and
 - b. Any acts of bullying, intimidation, or harassment against them by peers or adults will not be tolerated.
- 2. **Visual indicators.** LGBTQ-affirming images, symbols, and/or quotations (such as the equal sign, rainbow flag, or "All Are Welcome" sign) will be displayed prominently in reception areas, offices, and other areas frequented by youth.

	Title	Author	Link
Checklist	Self-Assessment Checklist for Personnel Providing Services and Supports to LGBTQ Youth and Their Families	Tawara D. Goode, M.A. and Sylvia K. Fisher, Ph.D. National Center for Cultural Competence, Georgetown University Center for Child and Human Development	http://nccc.georgetown.ed u/documents/Final%20L GBTQ%20Checklist.pdf
Toolkits	GLSEN's Safe Space Kit: Be an Ally to LGBT Youth	GLSEN	http://www.glsen.org/saf espace

Tools

4. Talking About Sexual Orientation & Gender Identity with Youth

Purpose

To determine, at an appropriate time and place, how a youth identifies with regard to their sexual orientation and gender identity so as to be able to provide the youth with appropriate services and housing.

Principles

The following principles are particularly relevant to the Talking About Sexual Orientation & Gender Identity with Youth.

- 1. **Youth are the priority.** The health, safety, and well-being of youth is the paramount priority of professionals, volunteers, and caregivers.
- 2. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 3. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

Policies

- 1. **Asking about sexual orientation.** The <u>appropriate professional</u>, volunteer, and/or caregiver will ask youth about their sexual orientation at the <u>appropriate</u> time and in the <u>appropriate</u> setting for the purpose of ensuring the youth's needs are met. Professionals, volunteers, and caregivers should never require a response.¹⁰
- 2. **Asking about gender identity.** The <u>appropriate</u> professional, volunteer, and/or caregiver will ask youth about their gender identity at the <u>appropriate</u> time and in the <u>appropriate</u> setting for the purpose of ensuring the youth's needs are met. Professionals, volunteers, and caregivers should never require a response.¹¹
- 3. **Responding to disclosures.** If a youth discloses their sexual orientation and/or gender identity, professionals, volunteers, and caregivers will talk about it with them in a safe and affirming manner and never just move-on.

4. Confidentiality.

a. With regard to communication within their own agency, court, or organization, professionals, volunteers, and caregivers will only share information about the sexual orientation or gender identity of a youth if disclosure is necessary to serve the youth or ensure safety, and never to the youth's detriment.¹²

¹⁰ Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006
 ¹¹ Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006
 ¹² Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006

- b. With regard to communication outside their own agency, court, or organization, professionals, volunteers, and caregivers will not share information about the sexual orientation or gender identity of a youth without first obtaining the youth's consent. This applies to information shared with the youth's parent(s) or guardian(s).¹³
- c. If a professional, volunteer, or caregiver has or may have a duty to disclose what a youth shares about their sexual orientation or gender identity to another adult, then that professional, volunteer, or caregiver will notify all youth of that duty at the beginning of the initial meeting.

Tools

	Title	Author	Link
Interviewing and Intake	 Sample Interview and Intake Protocols: NCCD LGBTQ Youth Interviewing Tool NYC ACS Juvenile Justice Intake Form MA DYS Dialogue Tree Impact Justice SOGIE Questions ACS Asking SOGIE Questions Policy 	The Equity Project (A collaborative initiative of Legal Services for Children, National Center for Lesbian Rights, and the National Juvenile Defender Center)	http://www.equityproject s.org/resource/1022/

¹³ Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006

Determining when it is appropriate to ask about sexual orientation and gender identity

There is no uniform guidance on asking youth about their sexual orientation and gender identity. Each system, court, agency, organization, and community is different. The following table provides general guidance on the factors suggesting it is and is not appropriate.

System leaders should work with their LGBTQ+ point persons and LGBTQ+ advocates in their communities to develop specific guidelines for their court, agency, or organization.

	Likely Appropriate	Likely Not Appropriate
Person	By individuals who:	By individuals who:
	 Have developed a relationship with youth; Have discretion or obligation to maintain confidentiality upon request; and/or Do not have an adversarial relationship with youth. 	 Have not or do not have the opportunity to develop a relationship with youth; Have an obligation to disclose youth's information to others; and/or Have an adversarial relationship with youth.
	Examples may include:	Examples may include:
	 Attorney for youth; Health care providers; Caseworkers; and Probation counselors. 	 Forensic interviewers; Intake staff; Judicial officers; Law enforcement.
Time	At a time:	At a time:
	 After youth have had time to adjust to the system; and/or That is not in conjunction with questioning about negative behaviors, such as substance use. 	 Immediately upon entering the system; and/or That is in conjunction with questioning about negative behaviors, such as substance use.
Setting	In a place that is:	In a place that is:
	 Private; Non-threatening; and/or Excludes other individuals that the youth may fear will reject or mistreat the youth. 	 Open to the public; Threatening; and/or Includes other individuals that the youth may fear will reject or mistreat the youth.
	Examples may include:	Examples may include:
	 A private conference room or office; An exam room; and One on one with the youth. 	 An open courtroom; A lobby or public waiting area; and A meeting with the youth and the youth's parents.

5. Services for LGBTQ+ Youth

Purpose

To ensure that system professionals provide services that meet the specific needs of LGBTQ+ youth and ensure contracted or partner providers do the same.

Principles

The following principles are particularly relevant to the Services for LGBTQ+ Youth.

- 1. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity.
- 2. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 3. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Knowledge of sexual orientation and gender identity, including LGBTQ+ identities, is a core competency for any professional, volunteer, and caregiver.
- 4. **Professionals, volunteers, and caregivers bear the burden.** Systems exist to serve youth and meet their needs. Youth should neither be required to adapt to systems nor be responsible for educating adults on LGBTQ+ issues or holding adults accountable.
- 5. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

Policies

- 1. **Screening of service providers.** Prior to licensing, contracting with, or referring a youth to a service provider, Children's Administration, juvenile courts, and Juvenile Rehabilitation will explicitly verify and confirm that the service provider will uphold the basic rights of youth as outlined in "Rights of Youth" in this Protocol.
- 2. **Identification of LGBTQ+ affirming providers.** Professionals will make good faith efforts to identify and maintain an updated list of LGBTQ+ affirming providers to which they can refer youth who have identified themselves as LGBTQ. LGBTQ+ affirming means going beyond the minimum protections outlined in "Rights of Youth" and providing highly competent services LGBTQ+ youth.
- 3. **Proactive consideration of the impact of other identities on the service needs of LGBTQ+ youth.** In consultation with youth, professionals will proactively consider the impact of the other identities of LGBTQ+ youth on their service needs. Professionals will recognize that youth of color are likely vastly overrepresented among their LGBTQ+ youth population.
- 4. **Linking youth to supportive services.** When necessary, professionals will make a good faith effort to recruit volunteer transporters and/or mentors to connect youth to supportive services. This may be especially necessary in rural areas.

- 5. **Educational materials.** LGBTQ-specific materials will be included with other educational materials made available to youth.¹⁴
- 6. **Community building of youth in care.** Professionals will make good faith efforts to bring LGBTQ+ youth together for support, education, and/or recreation.

	Title	Author	Link
Resources in Washington State	LGBTQ Youth in Washington State Foster Care	Independence.wa.gov	http://independence.wa.g ov/lgbtq-youth-in- washington-state-foster- care/
	Resources: Youth	Gay City	https://www.gaycity.org/ youth/
Toolkit	Getting Down to Basics: Tools to Support LGBTQ Youth in Care	Child Welfare League of America & Lambda Legal	http://www.lambdalegal.o rg/sites/default/files/gdt b_2013_complete.pdf
National Resource Directory	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth- topics/lgbtq-youth/child- welfare

Tools

¹⁴ Adapted from Cook County Juvenile Temporary Detention Center. (2013). Chapter 11: LGBTQ Residents. *Cook County Juvenile Temporary Detention Center: Policies and Procedures*.

6. Housing for LGBTQ+ Youth

Purpose

To ensure professionals, volunteers, and caregivers meet the specific housing needs of LGBTQ+ youth. While the principles and policies contained in "Services" applies to housing, there are also principles and policies that are specific to housing.

Principles

The following principles are particularly relevant to Housing for LGBTQ+ Youth.

- 1. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity without fear of harm, judgment, dismissal, or coercion to change.
- 2. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

Policies

- 1. **Screening of caregivers.** Agencies or organizations responsible for supervising or licensing caregivers will explicitly verify and confirm that prospective caregivers and placements will uphold the basic rights of youth as outlined in "Rights of Youth" in this protocol.¹⁵
- 2. **Safer searches.** When a search of a youth is necessary and legally permitted, professionals will allow transgender or intersex youth to choose the gender of the person that will search them.¹⁶
- 3. **Isolation as a last resort.** Professionals, volunteers, and caregivers will not use isolation or segregation as a default means to protect LGBTQ+ youth from violence or harassment.¹⁷ In consultation with youth impacted, professionals, volunteers, and caregivers will work to identify alternative means of protection. Isolation will be a last resort and minimized.¹⁸
- 4. **Safer restrooms and showers.** Youth will be permitted to use the restroom that is consistent with their gender identity. Transgender, intersex, and youth with privacy concerns will be permitted to shower separately from other youth.¹⁹

¹⁵ Adapted from Stoessel, T. Y. (2013). Addressing the Harm of Silence and Assumptions of Mutability: Implementing Effective Non-Discrimination Policies for Lesbian, Gay, Bisexual, Transgender, and Queer Youth in Foster Care. *UC Davis Journal of Juvenile Law and Policy, Winter.*

¹⁶ Adapted from Cook County Juvenile Temporary Detention Center., 2013; New York State Office of Children and Family Services: Lesbian, Gay, Bisexual, Transgender and Questioning Youth (PPM 3442.00).

¹⁷ Adapted from Stoessel, T. Y., 2013

¹⁸ For additional research, see Marksamer, J., Spade, D., & Arkles, G. (2011). A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-conforming Youth. *San Francisco: National Center for Lesbian Rights.* 24; Cook County Juvenile Temporary Detention Center, 2013; Wilber, Ryan, & Marksamer, 2006

¹⁹ Adapted from Cook County Juvenile Temporary Detention Center, 2013; New York State Office of Children and Family Services (2008). Lesbian, Gay, Bisexual, Transgender and Questioning Youth (PPM 3442.00). *Juvenile Justice and Opportunities for Youth*; Stoessel, T. Y., 2013

Tools

	Title	Author	Link
Resources for Recruiting Placements	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth- topics/lgbtq-youth/child- welfare
PREA	Prison Rape Elimination Act Juvenile Facility Standards	PREA Resource Center, United States Department of Justice	http://www.prearesource center.org/sites/default/fi les/library/preafinalstand ardstype-juveniles.pdf

7. Healthcare for LGBTQ+ Youth

Purpose

To ensure professionals, volunteers, and caregivers meet the specific healthcare needs of LGBTQ+ youth, especially transgender youth. While the principles and policies contained in "Services" applies to healthcare, there are also principles and policies that are specific to healthcare.

Principles

The following principles are particularly relevant to Healthcare for LGBTQ+ Youth.

- 1. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity without fear of harm, judgment, dismissal, or coercion to change.
- 2. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.

Policies

- 1. **Prohibition on so-called "conversion therapy."** Professionals will not contract with any provider that attempts to change, or supports attempts to change, a youth's sexual orientation, gender identity, or gender expression.²⁰ Professionals will explicitly prohibit volunteers and caregivers from attempting to change or supporting attempts to change a youth's sexual orientation, gender identity, or gender expression.
- 2. **LGBTQ+ affirming healthcare.** Professionals will ensure LGBTQ+ youth are provided healthcare, including medical and behavioral healthcare, by LGBTQ+ affirming health care providers.²¹
- 3. **Transgender healthcare.** Professionals will ensure transgender youth are provided transitionrelated healthcare, such as hormones, when prescribed or recommended by the youth's health care provider. ²²

	Title	Author	Link
Healthcare Guidelines	Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People 2 nd Edition	Center for Excellence for Transgender Health Department of Family & Community Medicine University of California, San Francisco	<u>http://transhealth.ucsf.ed</u> <u>u/pdf/Transgender-</u> <u>PGACG-6-17-16.pdf</u>

Tools

²⁰ Adapted from Annie E. Casey Foundation, 2015; Wilber, Ryan, & Marksamer, 2006

- ²¹ Adapted from Annie E. Casey Foundation, 2015
- ²² Adapted from New York State Office of Children and Family Services, 2008

	Title	Author	Link
	Lesbian, Gay, Bisexual, and Transgender Health	Centers for Disease Control and Prevention	http://www.cdc.gov/lgbth ealth/
Standards of Care	Standards of Care for Transgender Health	World Professional Association for Transgender Health	https://s3.amazonaws.co m/amo_hub_content/Asso ciation140/files/Standard s%20of%20Care%20V7% 20- %202011%20WPATH%2 0(2)(1).pdf

8. Responding to Families

Purpose

To assess families' attitudes and beliefs towards LGBTQ+ people and the impact of any negative attitudes or beliefs, and to provide families with accurate, free, and accessible information and reconciliation services if warranted.

Principles

The following principles are particularly relevant to Responding to Families.

- 1. **Youth are the priority.** The health, safety, and well-being of youth is the paramount priority of professionals, volunteers, and caregivers.
- 2. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 3. **Our approach matters.** We are more likely to engage others if we approach them as if they are doing the best they can with what they have and know.
- 4. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.
- 5. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems.

Policies

- 1. Assessing the impact of anti-LGBTQ+ attitudes and beliefs.
 - a. If a youth has already openly identified as LGBTQ+ to their parent(s)/guardian(s), then professionals will:
 - Inquire about the parent/guardian's attitudes and beliefs with regard to the youth's identity;
 - Make a determination as to whether any negative attitudes and beliefs—even those deeply rooted in religious beliefs and cultural values—impact the youth's immediate health, safety, and well-being and/or put the youth at risk for future harm.
 - b. If a youth has not identified as LGBTQ+ to their parent(s)/guardian(s) but a parent or guardian espouses anti-LGBTQ+ attitudes or beliefs, then professionals will:
 - Refrain from divulging any known information about the youth's sexual orientation or gender identity to the parent(s)/caregiver(s);
 - Refrain from making or sharing any assumptions about the youth's sexual orientation or gender identity; and

- Make a determination as to whether any negative attitudes and beliefs—even those deeply rooted in religious beliefs and cultural values—impact the youth's immediate health, safety, and well-being and/or put the youth at risk for future harm.
- c. If a professional suspects that a family member's anti-LGBTQ+ attitudes and beliefs may be the source of conflict between a youth and family but the youth does not openly identify as LGBTQ+ and the family has not made anti-LGBTQ+ attitudes and beliefs explicit, then professionals will work with their LGBTQ+ liaison to determine the most appropriate course of action.
- 2. **Information for families.** When it does not threaten the privacy of youth, professionals will provide families of LGBTQ+ youth with free, accessible, and accurate information regarding the youth's sexual orientation, gender identity, and/or gender expression and the effect of un-affirming, homophobic, and transphobic behavior on the youth's health, safety, and well-being.²³

	Title	Author	Link
Comprehensive Website	Family Acceptance Project (general website)		http://familyproject.sfsu.e du/overview
Resource Guide	A Practitioner's Resource Guide: Helping Families to Support Their LGBT Children	Substance Abuse and Mental Health Services Administration	<u>http://store.samhsa.gov/p</u> <u>roduct/PEP14-LGBTKIDS</u>
	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth- topics/lgbtq-youth/child- welfare

Tools

²³ Adapted from Annie E. Casey Foundation, 2014; Cook County Juvenile Temporary Detention Center, 2013

9. Data Collection on LGBTQ+ Youth

Purpose

To collect information on the number of LGBTQ+ system-involved youth, their demographics (particularly racial and ethnic identities), the circumstances surrounding their entry into the system, involvement in other systems, experiences while in the system, and outcomes after exiting the system, particularly homelessness.

Principles

The following principles are particularly relevant to Data Collection on LGBTQ+ Youth.

- 1. **LGBTQ+ youth exist.** LGBTQ+ youth exist and their sexual orientation, gender identity, and gender expression are valid, viable, and real.
- 2. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity.

Policies²⁴

- 1. **Population surveys.** System leaders will administer periodic anonymous surveys of systeminvolved youth that, at a minimum, contain questions about:
 - a. Sexual orientation;
 - b. Sex assigned at birth;
 - c. Gender identity;
 - d. Gender expression;
 - e. Race;
 - f. Ethnicity;
 - g. Previous experience with homelessness or unstable housing;
 - h. Certainty of future stable housing;
 - i. Involvement in systems other than the one that is administering the survey; and
 - j. Discriminatory experiences related to these social statuses.
- 2. **Research.** Where possible, system leaders should include questions about sexual orientation, sex assigned at birth, and gender identity in research on system-involved youth.

²⁴ Adapted from Center for American Progress. (2016). How to Collect Data About LGBT Communities. Washington, D.C.: Baker, K, Durso, L., & Ridings, A. Retrieved from <u>https://www.americanprogress.org/issues/lgbt/report/2016/03/15/133223/how-to-collect-data-about-lgbt-communities/</u>; Family Builders, Legal Services for Children, National Center for Lesbian Rights, & Center for the Study of Social Policy. (2013). Guidelines for Managing Information Related to the Sexual Orientation & Gender Identity and Expression of Children in Child Welfare Systems. Oakland, CA: Shannan Wilbur. Retrieved from http://www.nclrights.org/wp-content/uploads/2013/07/Information_Guidelines_FINAL_DRAFT_3-20-13.pdf

3. Administrative and programmatic data.

- a. System professionals will record each and every youth's response to questions about biological sex assigned at birth, sexual orientation and gender identity alongside the responses to other demographic questions. If they are not already doing so, system professionals will also collect responses to questions about the youth's previous experience with homelessness or unstable housing and the youth's certainty of future stable housing.
- b. System leaders will provide a breakdown by sexual orientation and gender identity as it relates to biological sex assigned at birth, as is commonly done for race and ethnicity, in reports and analyses of reasons for system entry, experiences in the system, and outcomes after leaving the system.
- 4. **Clinical records.** If applicable, system leaders should include a breakdown by sexual orientation and gender identity in reports or analyses based on information collected in clinical records.

	Title	Author	Link
Research	Sexual and Gender Minority Youth in Foster Care: Assessing Disproportionality and Disparities in Los Angeles	The Williams Institute; Los Angeles LGBT Center; Honarchy Consulting; PII Permanency Innovations Initiative	<u>http://www.acf.hhs.gov/si</u> <u>tes/default/files/cb/pii_ri</u> <u>se_lafys_report.pdf</u>
	Safe Schools & Youth	The Williams Institute	http://williamsinstitute.la w.ucla.edu/category/rese arch/safe-schools-and- youth/
Guidelines	Guidelines for Managing Information Related to the Sexual Orientation & Gender Identity and Expression of Children in Child Welfare Systems	Family Builders, Legal Services for Children, National Center For Lesbian Rights, & Center for the Study of Social Policy	http://cssr.berkeley.edu/c wscmsreports/documents /Information%20Guidelin es%20P4.pdf

Tools

10. Accountability for Professionals, Volunteers, & Caregivers

Purpose

To ensure professionals, volunteers, and caregivers provide safe and affirming care to LGBTQ+ youth and that they use data to continue to improve their systems for LGBTQ+ and all youth.

Principles

The following principles are particularly relevant to Accountability for Professionals, Volunteers, & Caregivers.

- 1. **Youth are the priority.** The health, safety, and well-being of youth is the paramount priority of professionals, volunteers, and caregivers.
- 2. **Meeting the specific needs of LGBTQ+ youth is a matter of health and safety.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe," as defined by professionals and youth.
- 3. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Knowledge of sexual orientation and gender identity, including LGBTQ+ identities, is a core competency for any professional, volunteer, and caregiver.
- 4. **Professionals, volunteers, and caregivers bear the burden.** Systems exist to serve youth and meet their needs. Youth should neither be required to adapt to systems nor be responsible for educating adults on LGBTQ+ issues or holding adults accountable.
- 5. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems.

Policies

- 1. **Standards of conduct.** Professionals, volunteers, and caregivers will take accountability for their words and actions. If a professional, volunteer, or caregiver becomes aware that their words or actions have—even unintentionally—insulted, disparaged, or otherwise harmed a youth, that professional, volunteer, or caregiver will acknowledge and apologize.
- 2. **Individual evaluations.** Evaluation of adherence to the Protocol for Safe & Affirming Care and additional standards set forth in training and/or policies regarding LGBTQ+ youth will be included in evaluations of professionals, volunteers, and caregivers. Such evaluation should include a self-evaluation component.²⁵

²⁵ Adapted from Wilber, S., Ryan, C., & Marksamer, J., 2006; ACS, N. NYC ACS Juvenile Justice Intake Form; Department of Youth Services, M. MA Department of Youth Services Dialogue Tree for Disclosure of a Youth's Gender Identity using JJEMS General Assessment E-File.

- 3. **Confidential complaints.** There will be a mechanism by which you can make confidential complaints of issues related to sexual orientation, gender identity, and gender expression to a neutral third-party, who investigates such complaints.²⁶
- 4. **Advisory committee.** System leaders will convene an advisory committee—preferably multidisciplinary and across systems—on a periodic basis to:
 - a. Conduct an initial organizational assessment to identify the degree to which their court, agency, or organization provides safe and affirming care to LGBTQ+ youth;
 - b. Arrange for initial and ongoing trainings;
 - c. Monitor organizational efforts to provide safe and affirming care to LGBTQ+ youth, including periodic reassessments;
 - d. Develop clear mechanisms for reporting discrimination or disrespectful treatment;
 - e. Develop disciplinary processes that address intimidating, disrespectful, or discriminatory behavior toward LGBTQ+ youth;
 - f. Identify an individual directly accountable to leadership for overseeing organizational efforts to provide more culturally competent care to LGBT LGBTQ+ youth;
 - g. Identify and support staff champions who have special expertise or experience with LGBTQ+ youth;
 - h. Evaluate data collected and assess its implications; and
 - i. Make recommendations for further improvement.

	Title	Author	Link
Organizational Audit	Quick Organizational Audit: LGBT Visibility & Inclusion	The Northwest Network of Bisexual, Trans, Lesbian, & Gay Survivors of Abuse	http://www.nwnetwork.o rg/advocacy-tools
Practice Guide	Creating a Juvenile Justice LGBTQ Task Force	National Council on Crime & Delinquency	http://www.nccdglobal.or g/sites/default/files/publi cation_pdf/practice-guide- lgbtq-task-force.pdf

Tools

²⁶ Adapted from New York City Children's Services. (2011). Promoting a Safe and Respectable Environment for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and their Families Involved in the Child welfare System; and Guidelines for Promoting a Safe and Respectable Environment for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and their Families Involved with DYFJ.

	Title	Author	Link
Planning Tool	Improving Emotional and Behavioral Outcomes for LGBT Children/Youth: An Action Planning Tool	American Institutes for Research	http://www.tapartnership .org/docs/Tool%20for%2 0planning%20improved% 20supports%20for%20LG BT%20young%20people %206-1-13.pdf

Strategies for Implementing This Protocol

While there was a consensus among the contributors of this Protocol--the professionals, volunteers, caregivers, and youth who participated in the four regional mini-summits--that systems can and should provide safer and more affirming care, many of the contributors were concerned about the barriers that might prevent full implementation. To address this concern, the eQuality Project asked contributors to: identify barriers to implementing this Protocol; identify the strengths, weaknesses, and opportunities as they related to these barriers; and develop a preliminary action plan for overcoming the barriers identified.

The following is a summary of contributors' input, which is intended to provide system leaders, professionals, volunteers, and caregivers insight into the contributors' concerns. Note that the perspectives summarized in this section reflect the viewpoints of a number of—but not necessarily all—contributors. Some professionals, volunteers, and caregivers may disagree about perceptions of barriers and others may recognize that a concern in one area of the state is not a concern in another area. Such a debate, in the view of the eQuality Project, is productive; those responsible for implementing this Protocol should challenge the assumptions that underlie the determination of what is and what is not a barrier. Those responsible for implementation should also work to identify local concerns so as to create a tailored strategic plan for implementing this Protocol.

Identify Barriers to Implementation

Contributors identified the following barriers:

- How to recruit foster homes that are LGBTQ+ affirming.
- How to better support social workers and other professionals so that they feel they can make the right choice for youth without fear of reprisal.
- How to collect accurate data without creating unintended consequences or stigmatizing youth.
- How to both challenge professionals, volunteers, and caregivers to overcome their discomfort with LGBTQ+ youth and support them to become more safe and affirming.
- How to sustain progress in the face of high turnover among professionals.
- How to better educate professionals, volunteers, and caregivers.
- How to ensure meaningful accountability.

Identify Strengths, Weaknesses, and Opportunities

In consideration of the barriers identified, contributors identified their strengths, weaknesses, and opportunities.

Strengths	• The political climate is overall supportive of safe and affirming care for LGBTQ+ youth.
	• Many professionals, volunteers, and caregivers are willing to be trained on how to better serve LGBTQ+ youth.
	• Professionals, volunteers, and caregivers share a commitment to youth.
	• Professionals agree that there is a need for more and better data on LGBTQ+ youth.
Weaknesses	• Washington's child welfare and juvenile justice systems are underfunded, resulting in lack of resources, time, money, and training.
	• Some professionals, volunteers, and caregivers will view implementing this Protocol as a task that is in addition to their core job duties and not as part of their core job duties.
	• Some professionals, volunteers, and caregivers lack awareness and education about LGBTQ+ issues.
	• There is a lack of community based LGBTQ+ resources with which systems can partner in many areas, especially in rural areas.
	• Within both systems, there is a pattern of conversation with no action.
	• There is resistance to focusing on the needs of LGBTQ+ youth on the part of some professionals, volunteers, caregivers, contracted providers, and the greater community.
Opportunities	• Many regions have at least one community-based LGBTQ+ organization that provides education, support, or other services to LGBTQ+ youth with which systems can partner.
	• There are existing training opportunities, such as orientations, standing meetings, and professional association conferences, into which LGBTQ+ training can be implemented.
	• There are various opportunities to engage and listen to system involved LGBTQ+ youth and LGBTQ+ young adults who have recently been system involved.
	• Professionals, volunteers, and caregivers have the ability to network, with the assistance of the eQuality Project, with other courts, agencies, and organizations across the state that are working toward providing more safe and affirming care to LGBTQ+ youth.
	• Professionals can work together and with the eQuality Project to develop resource maps and directories to promote better utilization of existing resources.
	• Professionals can work collaboratively to develop and LGBTQ+ system-involved youth Training of the Trainer.

Develop an Action Plan

Finally, contributors developed a preliminary action plan, identifying the status quo, the goal, and actions necessary to achieve that goal. Again, this reflects the preliminary thoughts of the contributors and is intended to be the starting point for developing a comprehensive strategic plan for implementing this Protocol and not a strategic plan itself.

From	• There is currently minimal training on LGBTQ+ youth.
What is the	 There are not enough safe and affirming placements for LGBTQ+ youth.
status quo?	• The delivery of services to LGBTQ+ youth is inadequate, fragmented, and not prevention based.
	• There is inadequate data on LGBTQ+ youth.
То	• There should be mandatory, competent, and tailored training on LGBTQ+ youth.
What are the goals?	• There should be a safe and affirming placement for all youth, including LGBTQ+ youth.
	• There should be a cross agency service delivery plan that is inclusive, collaborative, and available at all stages.
	• Systems should collect data that identifies the number of system involved LGBTQ+ youth and captures their needs, challenges, experiences, and outcomes.
Actions How do systems	• Professionals, volunteers, and caregivers can identify the policies in this Protocol that can be implemented immediately without additional resources or authority and implement them.
achieve the goals?	• Professionals, volunteers, and caregivers can model safe and affirming behavior, especially with regard to their own communication.
	• Professionals, volunteers, and caregivers can address moments that can be used as educational opportunities.
	• System leaders can convene regional, multi-disciplinary meetings to assess progress and support each other in providing safer and more affirming care.
	• System leaders can work with community based organizations to establish venue- temporary or permanent LGBTQ+ youth centers.
	• System leaders can work together to develop a statewide training of trainers.
	• System leaders can utilize surveys of youth to assess perceptions of safe and affirming care among youth instead of relying solely on complaints.
	• Professionals can ask youth how they identify, in an appropriate manner, so as to provide appropriate referrals.
	• Professionals can collect better data LGBTQ+ youth so as to justify greater resource allocation.



THE FAMILY ADVOCACY CENTER STABILIZES FAMILIES:

The Family Advocacy Center is an innovative service model that provides legal representation and, if needed, social work services, and parent ally supports to families to prevent the unnecessary placement or prolonged stay of children in foster care. FAC collaborates with Children's Administration to keep families together by strengthening a caregiver's ability to provide for a child's safety or permanence.

OUR GOALS ARE TO:

- keep children safe and stable within their families
- minimize the emotional trauma caused by removal and foster care placement
- allow the foster care system to focus its resources on children who need its protection

FAC's multi-disciplinary team (attorney, social worker, parent ally) resolves legal issues that propel children unnecessarily into foster care and removes legal barriers to a child's exit from care.

Referrals to FAC must come from: Children's Administration or other child welfare stakeholders, including but not limited to public defenders, Assistant Attorney Generals, and CASA program.

FAMILY ADVOCACY CENTER

YWCA South King County Regional Center 1010 South 2nd Street Renton, WA 98057

INTAKE EMAIL: FAC@ccyj.org

Cindy Yeung FAC Attorney 206-707-0880 | cindyy@nwjustice.org



FAMILY ADVOCACY CENTER

stabilizing families minimizing trauma maximizing resources







TO BECOME A CLIENT, A PARENT OR CAREGIVER MUST:

Have a legal issue that, if successfully resolved, would prevent placement of a child in foster care, close a CPS investigation, close a FAR case, or lead to the dismissal of an ongoing dependency proceeding with no additional DSHS CA intervention or services.

OR

Have a legal issue that, if successfully resolved, would allow a child to exit foster care to a permanent home with no additional DSHS CA intervention or services.

AND

ALL PARTIES MUST BE IN GENERAL AGREEMENT.

CASE EXAMPLES

PREVENTION: Domestic Violence, Parentage, Parenting Plan, Child Support, Public Benefits Due to abuse by the mother's partner, CPS determines that her children need to be removed from the home. To prevent placement in foster care, the children's father must establish paternity. Both parents are in agreement that foster care is not the right outcome for their children.

The father is referred to FAC and is assisted by the attorney in establishing paternity, obtaining a protection order, and entering a temporary parenting plan and child support order. The FAC social worker also helps the father apply for benefits and find a larger home for the family. The parent ally provides emotional support and helps the father understand what he must do to retain custody of his children. As a result, the children are safe at home and the CPS case is closed.

PERMANENCY: Criminal Records, Landlord-Tenant, Licensing

After spending several years in foster care, a child has the possibility of being adopted by a relative. However, the adoption home study is stalled due to an old felony conviction, suspended driver's license, and a broken furnace in the relative's home. The parents are in agreement with the adoption.

The relative is referred to FAC where staff assist in sealing/vacating her felony conviction, reinstating her driver's license, and requiring her landlord to repair the furnace. As a result, the home study is approved and the child is adopted into a permanent and loving home.

COMMON LEGAL ISSUES HANDLED BY THE FAMILY ADVOCACY CENTER:



- Parenting Plan
- Temporary Custody Order
- Non-Parental/Third-Party Custody
- Guardianship
- Paternity
- Dissolution/Divorce
- DV Protection/No-Contact Order
- Criminal Record Clean-Up
- Landlord/Tenant
- Public Benefits
- Licensing/Administrative



Foster Care Education Program: Dispute Resolution Process

Office of the Superintendent of Public Instruction: Foster Care Education
_____ Program

DEFINITIONS

Caregiver: In Washington state, the term "caregiver" applies to potential out-ofhome placement options that include: licensed foster homes, relatives, group care providers, or court ordered suitable others. *Please note: these placement options* <u>must</u> be the result of a state dependency action as established by the court for this dispute process to apply.

DSHS/CA: Department of Social and Health Services/Children's Administration is the public child welfare agency for the state of Washington.

Educational Decision-Maker: The *Caregiver Authorization form* always lists the caregiver and social worker as day to day decision makers for children and youth in foster care. There may, however, be additional decision-makers appointed by the court and identified on the *Health and Education Authorization Court Order* if it is someone other than, or in addition to, the caregiver and case worker. This could be the birth parent, education liaison, or another appropriate adult.

Foster Care: Twenty-four hours per day temporary, substitute care for the child placed away from the child's parents or guardians, and for whom DSHS or a licensed or certified child placing agency has placement and care responsibility. This includes any out-of-home care (including a relative or suitable person), <u>so long as the child is under the placement and care responsibility of DSHS, and placed in out-of-home care by DSHS</u>.

Other Supervising Agency: means an agency licensed by the state under RCW 74.15.090, or licensed by a federally recognized Indian tribe located in this state under RCW 74.15.190, that has entered into a performance-based contract with the department to provide case management for the delivery and documentation of child welfare services as defined in RCW 74.13.020.

School of Origin: The school of origin is the school in which a child is enrolled at the time of placement in foster care. If a child's foster care placement changes, the school of origin would then be considered the school in which the child is enrolled at the time of the placement change.

Best Interest Decision Making: Using child-centered criteria for determining which educational setting is best for a particular child or youth. Decisions should be made on a case-by-case basis. The cost of transportation should not be considered.

OVERVIEW

In a case where a dispute occurs regarding the determination of best interest or the provision of other educationally related services for a child or youth in foster care, the following process must be used:

- 1. Level I of the appeal is to the district's foster care liaison;
- 2. If unresolved at this level, the dispute is appealed to the local school district superintendent or their designee (Level II); and
- 3. If the dispute continues to be unresolved, the final appeal (Level III) is to OSPI.

If a dispute arises over school selection, enrollment in a school, or the provision of other educational services, the child or youth shall be immediately admitted to the school in which enrollment is sought and educational services will be provided, pending resolution of the dispute.

If a dispute over transportation expenses arises, the school district must provide transportation services while payment disputes are being resolved.

Every effort must be made to collaborate with Children's Administration or the other Supervising Agency and the aggrieved parties to resolve the complaint or dispute at the local level before it is sent to OSPI.

Disputes may only be filed by the caregiver or the educational decision-maker appointed by the court. The two parties may not use the school district dispute resolution process to resolve disagreements amongst themselves.

THE DISPUTE RESOLUTION PROCESS

If a school district seeks to place a child or youth in foster care in a school other than the school of origin, <u>or</u> the school requested by the caregiver or educational decision-maker in consultation with the youth, the individual making the request shall be informed in a language and format understandable to that person of their right to appeal the decision made by the school district and they shall be provided with the following:

- 1. The written contact information for the LEA foster care liaison and the State Foster Care Education Program Supervisor, with a brief description of their roles.
- 2. A simple, written, step-by-step description of how to dispute the school district's decision and the contact information of the person designated to receive the dispute. Caregivers or educational decision-makers should be able to easily complete the steps to initiate the dispute process.

Individuals submitting disputes shall have the opportunity to submit a dispute to the district via email. These disputes shall be treated with the same legitimacy as

a dispute submitted in any other format. School districts should respond to disputes in the same format in which they were received or as requested by the student's caregiver or educational decision-maker.

No dispute should be rejected because it is not on the appropriate form; however, individuals filing disputes will be held to the process and timelines outlined in this document.

- 3. Written notice of the right to enroll and attend immediately in the school requested by the student's caregiver or educational decision-maker while the dispute is being resolved.
- 4. Written notice of the right to appeal to the state if the district-level resolution is not satisfactory and applicable timelines.

LEVEL I: LEA LIAISON

If a caregiver or educational decision-maker wishes to dispute a school district's decision related to the determination of best interest or the provision of other educationally related services for a student in foster care:

1. The caregiver or educational decision-maker must file a request for dispute resolution with the district's foster care liaison by submitting a letter or email that initiates the dispute resolution process.

The request for dispute resolution must be submitted by the caregiver or educational decision-maker to the district foster care liaison within fifteen (15) business days of receiving notification that the district intends to enroll the student in a school other than the school of origin or the school requested by the caregiver or educational decision-maker.

The caregiver or educational decision-maker may submit the request directly to the foster care liaison or they may submit the request to the school where the dispute is taking place. If the request is submitted to the school where the dispute is taking place, the school shall immediately forward the request to the district's foster care liaison.

In the event that the district's foster care liaison is unavailable, a school district designee may receive the request to initiate the dispute resolution process.

- 2. The foster care liaison must log their receipt of the complaint, including the date and time, with a written description of the situation and the reason for the dispute, and a copy of the dispute must be forwarded to the liaison's immediate supervisor and the district superintendent.
- 3. Within five (5) business days of their receipt of the dispute, the foster care liaison must make a decision on the dispute and inform the caregiver or

educational decision-maker in writing of the result. The foster care liaison must include the following documents in their notification:

- a. A copy of the original dispute which was filed at Level I,
- b. The decision rendered at Level I by the LEA foster care liaison, and
- c. Any additional information from the caregiver or educational decisionmaker and/or foster care liaison.
- d. Instructions regarding how to file a Level II dispute.

It is the responsibility of the district to verify receipt of the written notification regarding the foster care liaison's Level I decision.

4. If the caregiver or educational decision-maker disagrees with the decision made at Level I and wishes to move the dispute resolution process forward to Level II, the caregiver or educational decision-maker shall notify the district's foster care liaison of their intent to proceed to Level II within ten (10) business days of receipt of notification of the Level I decision.

LEVEL II: LEA SUPERINTENDENT OR DESIGNEE

(If the dispute remains unresolved after a Level I appeal)

- 1. If the student's caregiver or educational decision-maker disagrees with the decision rendered by the district's foster care liaison at Level I, they may appeal the decision to the local school district's superintendent, or the superintendent's designee, (the designee shall be someone other than the district's foster care liaison) using the appeals package provided at Level I.
- 2. The superintendent, or superintendent's designee, will arrange for a personal conference to be held with the student's caregiver or educational decision-maker, the youth if appropriate, and at least one representative from Children's Administration or other supervising agency.

Personal conferences can occur in-person or over the phone. If it is not possible for Children's Administration or other supervising agency staff to be present for the conference within a reasonable time, the district should document their efforts to include a representative and proceed with the conference.

The personal conference will be arranged within five (5) business days of the notification to the district that the caregiver or educational decision-maker intends to proceed to Level II of the dispute resolution process.

Once arranged, the meeting between the superintendent, or superintendent's designee, the caregiver or educational decision-maker, and Children's Administration or other supervising agency representative is to take place as expeditiously as possible.

3. The local superintendent, or superintendent's designee, will provide a decision in writing to the caregiver or educational decision-maker with supporting evidence and reasons, within five (5) business days of the personal conference.

It is the responsibility of the district to verify receipt of the written notification regarding the superintendent's Level II decision. The district should provide:

- a. A copy of the caregiver or educational decision-makers initial dispute which was filed at Level I, along with the Level I decision;
- b. The decision rendered at Level II by the LEA Superintendent or their designee; and
- c. Any additional information from the caregiver or educational decisionmaker and/or foster care liaison.
- d. Instructions regarding how to file a Level III including the physical address and email address of where to submit their dispute.

Jess Lewis Foster Care Education Program Supervisor Old Capital Building PO Box 47200 Olympia, WA 98504-7200 fostercare@k12.wa.us

- 4. A copy of the appeals package, along with the written decision made at Level II must be shared with the district's foster care liaison.
- 5. If the designated caregiver or educational decision-maker disagrees with the decision made at Level II and wishes to move the dispute resolution process forward to Level III, he or she shall notify the district's foster care liaison of their intent to proceed to Level III within ten (10) business days of receipt of notification of the Level II decision.

LEVEL III: OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION (OSPI) (If the dispute remains unresolved after a Level II appeal)

- The district superintendent or their designee shall forward all written and electronic documentation to the OSPI Foster Care Education Program Supervisor, or designee, for review, within five (5) business days of receiving notification of the caregiver or educational decision-maker's intent to file a Level III dispute.
- 2. The caregiver or educational decision-maker may also submit related documentation to the OSPI Foster Care Education Program Supervisor, or designee, for review, within the five (5) business days after notifying the school district of their intent to file a Level III dispute.

OSPI will not review any documents or other information submitted by either party after the five (5) business day deadline.

- *3.* The entire dispute package, including all documentation and related paperwork, is to be submitted to OSPI in one consolidated and complete package via email or the US Postal Service. *It is the responsibility of the district to ensure that dispute package is complete and ready for review at the time it is submitted to OSPI.*
- 4. The OSPI Foster Care Education Program Supervisor, or designee, other appropriate agency staff, and the appropriate Children's Administration representatives shall make a final decision within fifteen (15) business days of receipt of the dispute.
- 5. The final decision will be forwarded to the local school district's foster care liaison for distribution to the caregiver or educational decision-maker, the Children's Administration representative engaged by the school district at Level II, and the local superintendent.
- 6. The decision made by OSPI shall be the final resolution for placement and the provision of services for a child or youth in foster care in the district.
- 7. The office of the school district superintendent shall maintain a record of all disputes related to the placement of children and youth in foster care. These records shall include disputes resolved at Level I, Level II, and/or Level III and shall be made available to OSPI upon request.

DISPUTES BETWEEN SCHOOL DISTRICTS AND CHILDREN'S ADMINISTRATION OR ANOTHER SUPERVISING AGENCY

Disputes between LEAs and DSHS/CA that do not involve the educational placement of a child or youth in foster care or the provision of educational services to an individual student, remain unresolved shall be forwarded in writing by either of the disputing parties to the OSPI Foster Care Education Program Supervisor, or designee and the other party.

The only disputes that may be heard by OSPI directly are systemic issues related to inter-agency conflicts such as failures to collaborate, transportation reimbursements, data sharing, records release policies, and other inter-agency disputes. A decision will be made by the OSPI Foster Care Education Program Supervisor, or designee, along with a committee of OSPI and Children's Administration staff within ten (10) business days of the receipt of the dispute. The decision will be forwarded, in writing, to the district's superintendent, the district's foster care liaison, and the DSHS/CA representative involved in the dispute.

The decision made by OSPI and Children's Administration shall be the final resolution between the disputing school district and Children's Administration for placement of a child or youth in a district and the provision of related educational services.

Denial of Enrollment or Services

•Provide contact information for Foster Care Liaison and Foster Care Education Program Supervisor to person filing the dispute •Provide written, step-by-step description of how to dispute the district's decision •Within 15 days of the denial, the student's educational decsion-maker may submit a dispute to the foster care liaison; the dispute is logged •The Foster Care Liaison must make a decision within 5 days and inform the person who submitted the dispute; and verifies receipt •Student remains in the school where enrollement is sought and receives services while the dispute is being resolved

Level I

•Within 10 days of receipt of the Level I decsion, the educational decsion-maker may notify the district that they intend to proceed to Level II •Within 5 days, the superintendent or their designee must arrange a meeting with the person filing the dispute and staff from DSHS/CA •Within 5 days of the meeting, the Superintendent or their designee shall provide a decision and other documentation

Level II

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•Within 5 days of this notification, the district superintendent or their designee shall forward the required documents to OSPI. The disputing •Within 10 days, the educational decision-maker must notify the foster care liaison that they intend to proceed to a Level III dispute •A final decision will be made within 15 days of reciept of the dispute package party may also send documentation to OSPI for consideration.

Level III

•The decision will be sent to the district's Superintendent, the Foster Care Liaison, and the DSHS/CA representative involved in the dispute •Either agency may submit a dispute directly to OSPI. The disputing agency must send a copy of the dispute to the other agency and OSPI Student attends where enrollment is sought and services are provided while the dispute is being resolved. •Within 10 days of receipt, OSPI and DSHS/CA will meet to review the dispute and come to resolution

> Inter-Angency Disputes

FOSTER CARE EDUCATION PROGRAM

Frequently Asked Questions

Improving Educational Outcomes of Children and Youth in Foster Care 07/2016

Jess Lewis jess.lewis@k12.wa.us Foster Care Education Program Supervisor Office of Superintendent of Public Instruction (OSPI)

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Purpose

This document was created in collaboration with the Foster Care Education Program, the Title I, Part A Program, and the Education of Homeless Children and Youth Program at OSPI and the Department of Social and Health Services (DSHS)/Children's Administration (CA). This document also includes excerpts from the U.S. Department of Education (ED) Non-Regulatory Guidance published in June 2016.

1. Who can I contact for help regarding the education of students in foster care?

OSPI's Foster Care Education Program Supervisor is available to provide technical assistance, training, and support as districts work to improve educational outcomes for children and youth in foster care. For assistance, email <u>Jess Lewis</u> or call 360-725-6050. You can also visit the <u>Foster Care Education Program website</u>.

In addition, DSHS/CA has designated Education Leads in each of its three regions. These individuals work collaboratively with school districts in their regions to better facilitate school stability and help address the educational barriers experienced by children and youth in foster care. CA Education Leads can be reached at:

Region/Counties	Contacts
Region 1 (North) Ferry, Stevens, Pend Oreille, Lincoln, Whitman, Garfield, Asotin, Spokane School District, Okanogan, Chelan, Douglas, Grant, Adams	Valerie Marshall <u>Valerie.Marshall@dshs.wa.gov</u> 509-363-3320
Region 1 (South) Kittitas, Yakima, Klickitat, Benton, Franklin, Walla Walla, Columbia, White Salmon, Goldendale, Toppenish	Lorenzo Lopez Lorenzo.Lopez@dshs.wa.gov 509-454-6931
Region 2 (North/South) Whatcom, Skagit, Snohomish, San Juan, Island, King	Donna LaFrance <u>Donna.LaFrance@dshs.wa.gov</u> 206-639-6207
Region 3 (North/South) Pierce, Kitsap, Clallam, Jefferson, Grays Harbor, Mason, Pacific, Lewis, Thurston, Cowlitz, Skamania, Clark	Sandy Duron <u>Duronss@dshs.wa.gov</u> 253-983-6155
Statewide Education Program Manager, Children's Administration	Shanna McBride <u>mcbrism@dshs.wa.gov</u> 360-902-8474

State Laws

The Washington State Legislature passed several laws regarding the responsibilities of public schools that have children and youth in foster care enrolled or seeking enrollment. The following questions are in reference to those state requirements.

2. Which students are eligible for services?

"Foster care¹" means twenty-four hours per day temporary, substitute care for the child placed away from the child's parents or guardians, and for whom DSHS or a licensed or certified child placing agency has placement and care responsibility. This includes any out-of-home care (including a relative or suitable person), <u>so long as the child is under the placement and care</u> <u>responsibility of DSHS, and placed in out-of-home care by DSHS</u>.

3. How will students in foster care be identified?

Students in foster care will be identified using the Comprehensive Education Data and Research System (CEDARS) through a collaborative effort between OSPI and DSHS. Districts should use this "foster care flag" to focus services, data collection, and outreach efforts. See the <u>CEDARS website</u> for more information.

4. Should students in foster care remain in their school of origin?

It depends. Both state and federal laws pertaining to education **and** child welfare emphasize school stability for children and youth in foster care. State law requires that, whenever practical and in the best interest of the child, children placed into foster care shall remain enrolled in the school they were attending at the time they entered care².

Caseworkers and school district Foster Care Liaisons should work collaboratively to determine what is in the best interest of the student using criteria appropriate for the student's situation³.

5. Are there guidelines around enrollment and transfers for students in care?

Yes. A school may not prevent a student who is dependent from enrolling in a public school if they are lacking records regarding any of the following:

- (a) Any history of placement in special educational programs.
- (b) Any past, current, or pending disciplinary action.
- (c) Any history of violent behavior, or behavior listed in RCW <u>13.04.155</u>.
- (d) Any unpaid fines or fees imposed by other schools.
- (e) Any health conditions affecting the student's educational needs.

¹ WAC 388-25-0010

² <u>RCW 74.13.550</u>–Child placement–Policy of educational continuity, <u>RCW 74.13.631(1)(e)</u>–School-aged youth in out-of-home care

³ <u>RCW 74.13.631(1)(e)</u>–School-aged youth in out-of-home care

If a student in foster care is enrolled in one school and transfers enrollment to another school, either in the same school district or in another school district, the sending school district or school shall transfer the student's education information and records to the receiving school within **two school days** after receiving a transfer request⁴.

6. Can students in foster care have access to free lunch?

Yes. Students in foster care are categorically eligible for free school meals without submission of a free and reduced-price household application. While students are typically identified for free meals through a data exchange between OSPI and school districts, students in foster care who are newly enrolled may be verified immediately through third party documentation of their foster status.

Acceptable documentation includes information indicating if the state retains legal custody of the child. That documentation can come from the court that placed the child or from a state or local foster agency that administers the foster care program.

7. Can a district withhold records and transcripts due to unpaid fines and fees?

No. State law requires the prompt/timely transmission of student records to DSHS/CA for appropriate case planning, school enrollment⁵, and maximizing the student's academic achievement.

Records may not be withheld from DSHS/CA for any reason, including fines and fees owed by the student⁶. In addition, records may not be withheld from receiving schools in a way that will prevent the academic progress, or the appropriate placement of the student in foster care.

State law provides that DSHS/CA is able to pay unpaid fines and fees for children and youth residing in care⁷. Contact the student's case worker or the Education Lead assigned to your region for assistance.

8. Does a child or youth in foster care get absences excused if they have to participate in courtordered activities or other services?

Yes. Absences from school due to a required court appearances or participation in courtordered activities, including but not limited to family visitation or therapy, should be excused.

⁴ <u>RCW 28A.255.330(7)</u>–Enrolling students from other districts

⁵ <u>RCW 74.13.631(22(c)(d)</u>–School-aged youth in out-of-home care–School placement options

⁶ <u>RCW 28A.150.510</u>–Transmittal of education records to DSHS

⁷ RCW 74.13.631(1)(e)-School-aged youth in out-of-home care

9. How must districts approach unexpected or excessive absences for children and youth in foster care?

State law requires school districts to monitor the unexpected or excessive absences of dependent youth. Schools should proactively support the student's school work so the student does not fall behind, and districts should avoid exclusionary discipline based on truancy⁸.

10.What should schools do to facilitate grade progression and/or on-time graduation for students in foster care?

State law requires school districts to facilitate the on-time grade progression and graduation of students in foster care. The Washington State Legislature specifically suggests the following strategies:

- Waiving specific courses required for graduation if similar coursework has been satisfactorily completed in another school district;
- Providing an alternative means to complete required coursework necessary for graduation;
- Consolidating unresolved coursework and providing opportunities for credit accrual; or
- Facilitating the graduation from the sending district where graduation requirements were met.

ESSA⁹

New requirements under Title I, Part A of ESEA as amended by ESSA, highlight the need to provide educational stability for children in foster care, with particular emphasis on collaboration between SEAs, LEAs, and child welfare agencies to ensure that students in foster care have the opportunity to achieve at the same high levels as their peers.

These provisions emphasize the importance of limiting educational disruption by keeping children who move in foster care (due to entering the foster care system or changing placements) in their schools of origin, unless it is determined to be in their best interest to change schools.

These provisions also ensure that if it is not in their best interest to remain in their schools of origin, children in foster care are enrolled in their new schools without delay.

11.Will my district be required to designate a Foster Care Liaison?

Yes. ESSA contains key protections for students in foster care to promote school stability and success. ESSA requires SEA and LEAs to collaborate with child welfare partners in an effort to improve the educational outcomes of children and youth in foster care.

⁸ <u>RCW 28A.225.023</u>–Review of unexpected or excessive absences–Support for youth's school work

⁹ This portion of the Q&A was adapted from <u>http://www2.ed.gov/policy/elsec/leg/essa/edhhsfostercarenonregulatorguide.pdf</u>

OSPI will be sharing information with the field through the district designated Foster Care Liaison, and they will be a critical partner while planning for full implementation. For the 2016–17 school year, districts will identify this point of contact through their district's Title I, Part A application, iGrants Form Package (FP) 201.

To update this contact information in the future, districts will do so through the <u>Foster Care</u> <u>Education Program</u>. The Foster Care Education Program Supervisor at OSPI will maintain a database of contact information for each of the designated school district Foster Care Liaisons. Keeping a current database is critical to the timely dissemination of information related to training and professional development opportunities, as well as updates related to the implementation of the federal law.

12. What will be the duties of the Foster Care Liaison?

Due to changes in the McKinney-Vento Homeless Assistance Act, as reauthorized by the Every Student Succeeds Act, a school district should carefully consider the roles of each position before assigning the Foster Care Liaison position to staff. *It is critical that staff designated as the Foster Care Liaison have the time and capacity to fulfill their responsibilities.*

The general role of the district Foster Care Liaison is to facilitate district compliance with state and federal laws as they relate to children and youth in foster care, and to collaborate with the DSHS/CA in an effort to address educational barriers that prevent children and youth in foster care from being identified, enrolled, attending, and succeeding in school. Some of the roles and responsibilities of the Foster Care Liaison may include:

- **1.** Coordinating with the corresponding child welfare agency point of contact on the implementation of the Title I, Part A provisions.
- **2.** Coordinating with the Foster Care Program Supervisor at OSPI.
- **3.** Attending training and professional development opportunities to improve district implementation efforts.
- **4.** Serving as the primary contact person for DSHS/CA and social workers.
- **5.** Leading and documenting the development of a process for making best interest determinations.
- **6.** Facilitating the transfer of records.
- 7. Facilitating immediate enrollment.
- **8.** Facilitating data sharing with the child welfare agencies, consistent with FERPA and other privacy protocols.
- **9.** Developing and coordinating local transportation procedures.
- **10.** Managing best interest determinations and transportation cost disputes.
- **11.** Ensuring that children in foster care are enrolled in and regularly attending school.
- **12.** Providing professional development and training to school staff on the Title I, Part A provisions and educational needs of children in foster care, as needed.

Educational Stability

13. To which children do the new Title I, Part A requirements to ensure the educational stability of children in foster care apply?

The requirements for ensuring educational stability for children in foster care under Section 1111(g)(1)(E) apply to all children¹⁰ in foster care enrolled in public schools.

14. By when must OSPI and school districts meet the Title I, Part A educational stability requirements?

ESSA amended Section 725 of the McKinney-Vento Homeless Assistance Act by removing "awaiting foster care placement" from the definition of "homeless children and youths" as of December 9, 2016.

Therefore, the Title I, Part A educational stability provisions take effect on **December 10**, **2016**. OSPI and school districts should begin planning for the implementation of these provisions, in collaboration with child welfare agencies, as soon as possible. For more information on the effective dates of the foster care provisions, see the June 23, 2016, joint ED/Health and Human Services Dear Colleague Letter on this topic¹¹.

15.What are the responsibilities of a school district in ensuring the educational stability of children in foster care?

A school district must collaborate with state and tribal child welfare agencies to implement the Title I, Part A educational stability provisions. (ESEA Section 1111(c)(5)). School districts should work closely with child welfare agency staff to tailor processes and procedures to the unique local context.

For example, the school district should decide with the state or local child welfare agency to establish criteria to be used in any decision-making process and identify a structure, such as regularly scheduled meetings, in which relevant individuals can participate in a particular process.

16.What responsibilities does a child welfare agency have in ensuring the educational stability of children in foster care?

A child welfare agency administering plans under Title IV-E and IV-B of the Social Security Act is required to include a plan for ensuring the educational stability of a child in foster care in the child's case plan (the educational stability plan).

¹⁰ Under Title I, Part A, the term "children" includes children through age 21 who are entitled to a free public education through grade 12 (34 CFR § 200.103(a)(1))

¹¹ The DCL is available at: <u>http://www2.ed.gov/policy/elsec/leg/essa/index.html</u>

This plan must include:

- 1) An assurance that each placement of the child in foster care takes into account the appropriateness of the current educational setting and the proximity to the school in which the child was enrolled at the time of placement.
- 2) An assurance that the child welfare agency has coordinated with the LEA(s) to ensure the child can remain in that school, or if remaining in that school is not in the child's best interest, an assurance that the child will be enrolled immediately in a new school and that the new school obtains relevant academic and other records.

These assurances relate to the circumstances at the time of the child's initial placement into foster care, as well as each time a child moves to a different foster care placement. (See Section 475(1)(G) of the Social Security Act.)

The educational stability plan must be a written part of the child's case record, which is jointly developed with the child's parents¹² no later than 60 days after a child's removal from the home, and every six months thereafter.

Many communities do not have enough foster homes to successfully place children near their school of origin. Districts may work with DSHS/CA to assist in foster parent recruitment efforts. Contact the Education Lead in your region to find out how you can help.

School of Origin

17. What is a school of origin?

The school of origin is the school in which a child is enrolled at the time of placement in foster care. An SEA and its LEAs must ensure that a child in foster care enrolls or remains in his or her school of origin unless a determination is made that it is not in the child's best interest. (ESEA Section 1111(g)(1)(E)(i)).

If a child's foster care placement changes, the school of origin would then be considered the school in which the child is enrolled at the time of the placement change.

18.What is the duration of time that a child is protected under the school of origin provision? What happens once a child exits foster care?

OSPI and school districts must collaborate with state and local child welfare agencies to ensure that each child in foster care remains in his or her school of origin if it is determined to be in their best interest for the duration of the child's time in foster care. (See ESEA Sections

¹² The definition of "parent" in ESEA includes "a legal guardian or other person standing in loco parentis (such as a grandparent or stepparent with whom the child lives, or a person who is legally responsible for the child's welfare)" (See ESEA Section 8101(38))

1111(g)(1)(E)(i) and 1112(c)(5)), consistent with the educational stability requirements under the Fostering Connections Act.

While these requirements no longer apply once a student has exited foster care, school districts are encouraged to prioritize educational stability for these children. In addition to benefitting academically from school continuity, during times of transition out of foster care, it is important for youth to be able to maintain connections with their peers, teachers, and other supportive adults at school.

For example, school districts should consider adopting policies that allow a child that exited foster care during the school year to continue in the school of origin through at least the end of the academic year, if appropriate.

Best Interest Determination

19.What factors should be considered in determining whether remaining in a child's school of origin is in his or her best interest?

School districts and child welfare agencies should use student centered factors to determine whether or not it is in the best interest of a student in foster care to remain in their school of origin.

Though the specific factors may vary depending on context, in order to make a well-informed determination, a variety of factors should be considered. These factors may include:

- 1. How long is the child's current placement expected to last?
- 2. What is the child's permanency plan?
- 3. How many schools has the child attended over the past few years? How many schools has the child attended this year? How have the school transfers affected the child emotionally, academically and physically?
- 4. How strong is the child academically?
- 5. To what extent are the programs and activities at the potential new school comparable to or better than those at the current school?
- 6. Does one school have programs and activities that address the unique needs or interests of the student that the other school does not have?
- 7. Which school does the student prefer?
- 8. How deep are the child's ties to his or her current school?
- 9. Would the timing of the school transfer coincide with a logical juncture such as after testing, after an event that is significant to the child, or at the end of the school year?

- 10. How would changing schools affect the student's ability to earn full academic credit, participate in sports or other extra-curricular activities, proceed to the next grade, or graduate on time?
- 11. How would the length of the commute to the school of origin impact the child?
- 12. How anxious is the child about having been removed from the home or any upcoming moves?
- 13. What school do the child's siblings attend?
- 14. Are there any safety issues to consider?

Transportation costs should **not** be considered when determining a child's best interest.

20. What process should SEAs and LEAs use when making the best interest determination?

The law does not prescribe a specific process, but ED encourages SEAs to work with the state or tribal child welfare agencies to establish guidelines to be used by LEAs and schools in coordination with local child welfare agencies to guide the decision making process. OSPI is developing a best-interest checklist that should be used to guide the discussion of the advantages and disadvantages of staying in the school of origin or moving to a new school.

21.Who should be involved in making a best interest determination?

If they have not already done so, LEAs should work with local child welfare agencies to develop a clear policy or protocol on how to make best interest determinations, including making every effort to gather meaningful input from relevant parties, in addition to required child welfare and school representatives, in deciding what school placement is in a child's best interest. State and local foster care points of contact (Foster Care Liaisons) can play an important role in establishing these policies and protocols and facilitating the process.

The representative from the school of origin should be knowledgeable about the child and able to provide feedback on significant relationships that the child may have formed with staff and peers and how changing schools would impact his or her academic, social, and emotional wellbeing. Based on the individual situation, this person could be a teacher, counselor, coach, or other meaningful person in the child's life.

The LEA and local child welfare agency staff should consult other relevant parties, which may include the child (depending on age), foster parents, biological parents when appropriate, education decision maker(s), and other relatives for their perspectives on which school the child should attend during his or her time in foster care, consistent with the child's case plan. If a child has an IEP or a Section 504 plan, then the relevant school staff members would also need to participate in the best interest decision process. If the child is an EL, this may also affect the relevant school staff members who would need to participate in the best interest decision process.

22. How long do LEAs have to make the best interest determination?

Although Title I, Part A does not prescribe a specific timeline for making a best interest determination, the LEA should make this determination as quickly as possible in order to prevent educational discontinuity for the child. The LEA must ensure that a child remains in his or her school of origin while this determination is being made (See ESEA Section 1111(g)(1)(E)(i)).

23. How should disagreements over the best interest determination among parents, education decision makers, and other important stakeholders be handled?

OSPI has developed a dispute resolution process for school districts to use when there is a disagreement about school placement, the provision of educational services, or when there is a dispute between agencies. For more information, contact the <u>Foster Care Education Program</u> <u>Supervisor</u> or find the dispute process on the <u>Foster Care Education Program</u> website.

24. Must a child remain in his or her school of origin while disputes are being resolved?

An LEA must ensure that a child remains in his or her school of origin while disputes are being resolved to minimize disruptions and reduce the number of moves between schools. (See ESEA Section 1111(g)(1)(E)(i)).

Transportation

Some children in foster care will need transportation to remain in their school of origin when it is in their best interest to do so. To facilitate transportation for these children, an LEA receiving Title I, Part A funds must collaborate with the state or local child welfare agency or agencies to ensure that transportation for children in foster care is provided, arranged, and funded. (ESEA Section 1112(c)(5)(B)).

25. Are school districts required to provide school of origin transportation to children and youth in foster care?

An LEA must collaborate with the state or local child welfare agency to develop and implement clear, written procedures governing how transportation to maintain children in foster care in their schools of origin, when in their best interest, will be provided, arranged, and funded for the duration of the child's time in foster care. These procedures must ensure that:

- **1.** Children in foster care needing transportation to their schools of origin will promptly receive that transportation.
- **2.** If there are additional costs incurred in providing transportation to the school of origin, the school district will provide such transportation if:
 - a) The local child welfare agency agrees to reimburse the LEA for the cost of such transportation;

- b) The LEA agrees to pay for the cost; or
- c) The LEA and local child welfare agency agree to share the cost. (ESEA 1112(c)(5)(B)).

Since children may be placed in foster care placements across district, county, or state lines, coordination among multiple LEAs and child welfare agencies may be necessary. Thus, in developing the transportation procedures, LEAs should also work with the state or local child welfare agency to establish inter-district and inter-state procedures that address potential transportation issues that may arise as students in foster care move from one district to another or across state lines.

26.What is the role of the child welfare agency in providing transportation for a child in foster care to his or her school of origin?

A child welfare agency administering plans under Title IV-E and IV-B of the Social Security Act must ensure that the educational stability plan of each child in foster care includes an assurance that the child welfare agency has coordinated with the appropriate LEA(s) to ensure the child can remain in the school of origin, or if remaining in that school is not in the child's best interest, an assurance that the child will be enrolled immediately in a new school.

Given the shared responsibility of child welfare agencies and LEAs to ensure educational stability, we encourage child welfare agencies to continue to work with the appropriate LEA(s) in exploring the full range of options for providing and funding transportation to maintain a child in his or her school of origin, consistent with the child's educational stability plan.

27. By when must an LEA develop and implement its transportation procedures?

An LEA must collaborate with the state or local child welfare agency to develop and implement local transportation procedures by **December 10, 2016** (one year after the enactment of the ESSA). (ESEA Section 1112(c)(5)(B)).

28.What is the duration of time that the LEA must provide a child with transportation services under ESEA Section 1112(c)(5)? What happens once a child exits foster care?

The transportation procedures developed by the LEA and child welfare agency must ensure that a child in foster care needing transportation to the school of origin receives such transportation for the duration of the time the child is in foster care. (ESEA Section 1112(c)(5)(B)).

When a child exits foster care, the LEA should continue to prioritize the child's educational stability, consider each child's best interest on a case-by-case basis, and when possible make every effort to continue to ensure transportation is provided through the end of the school year, if needed, when remaining in the school of origin would be in the child's best interest.

29.What constitutes "additional costs" incurred in providing transportation to maintain children in foster care in their schools of origin?

As part of developing and implementing its transportation procedures, an LEA must address any additional costs incurred in providing transportation to maintain children in foster care in their schools of origin. (See ESEA Section 1112(c)(5)(B)(ii)).

Districts should report their foster care transportation expenditures for ridership funding in the same manner that they report McKinney-Vento transportation. The expenditures should be reported in Program 99.

For more information regarding reporting expenditures to Program 99, contact OSPI's <u>School</u> <u>Apportionment and Financial Services</u> office. For additional information regarding ridership reporting of foster students, contact your <u>Regional Transportation Coordinator</u>.

30. What steps should an LEA and local child welfare agency take to ensure that transportation is provided if they face difficulty reaching agreement on how to pay for additional transportation costs?

Transportation is a central component of educational stability, and it may be needed to fulfill the requirements that both LEAs and child welfare agencies ensure educational stability for children in foster care. In light of this mutual mandate, both agencies must collaborate regarding transportation if it is necessary so that a child in foster care may remain in his or her school of origin, consistent with Section 475(5)(G)(ii)(I) of the Social Security Act.

We recognize that there may be occasions when an LEA and local child welfare agency face difficulties reaching agreement on how to fund any additional costs incurred to provide transportation to the school of origin. An LEA must collaborate with the state or local child welfare agency to develop transportation procedures that ensure that children in foster care promptly receive transportation, as needed, to their school of origin. (ESEA Section 1112(c)(5)(B)(i)). Therefore, the transportation procedures should address how this requirement will be met, even if the relevant agencies cannot reach agreement on how to fund any additional transportation costs.

OSPI has developed dispute resolution procedures under the authority of our overall duty to ensure educational stability under Section 1111(g)(1)(E) of ESEA. The dispute resolution process should be used to address these issues as they arise. For more information, contact the <u>Foster</u> <u>Care Education Program Supervisor</u> or find the dispute process on the <u>Foster Care Education</u> <u>Program</u> website.

31. Is an LEA required to transport children in foster care to and from their schools of origin while transportation cost disputes are being resolved?

An LEA must ensure that children in foster care needing transportation to the school of origin promptly receive such transportation in a cost-effective manner. (ESEA Section 1112(c)(5)(B)(i)). Therefore, the LEA must provide or arrange for adequate and appropriate transportation to and from the school of origin while any disputes are being resolved.

32. If an LEA does not provide transportation to children who are not in foster care, is it required to transport children in foster care to their schools of origin?

Yes. An LEA must ensure that transportation is provided for children in foster care consistent with the procedures developed by the LEA in collaboration with the state or local child welfare agency under Section 1112(c)(5)(B) of ESEA. These requirements apply whether or not the LEA already provides transportation for children who are not in foster care.

33.Can I use Title I, Part A funds to pay for the transportation of children and youth in foster care to their school of origin in the 2016–17 school year?

Yes. If a school district is not fully funded by the student transportation funding system, additional costs may be covered using Title I, Part A funds.

Please note however, that funds reserved for comparable services for homeless children and youth under Section 1113(c)(3)(A)(i) of ESEA may not be used to provide transportation needed to maintain children in foster care in their schools of origin.

Immediate Enrollment

34. What does it mean for a child to be "immediately enrolled" in a new school?

Immediate enrollment means that a child in foster care should be enrolled in, and attending, a new school as soon as possible.

Enrollment must not be denied or delayed because documents normally required for enrollment have not been provided. (See ESEA Section 1111(g)(1)(E)). The enrolling school must immediately contact a child's school of origin to obtain the relevant records and documentation (ESEA Section 1111(g)(1)(E)(iii)), and the school of origin should immediately transfer those records.

LEAs should also ensure that children in foster care are regularly attending and fully participating in school and that their educational needs are being met. SEAs and LEAs should also take affirmative steps to revise policies that are barriers to enrollment and attendance for children in foster care.

Title I, Part A

35. How must a school district plan for serving children and youth in foster care under Title I, Part A?

The Consolidated Appropriations Act, 2016, generally requires an SEA or LEA to continue to operate its Title I, Part A program in the 2016–17 school year in accordance with the requirements of ESEA as in effect prior to the enactment of ESSA¹³.

Section 1112(c)(5)(B) of ESEA however, specifically requires that an LEA begin implementing the requirements regarding transportation to maintain children in foster care in their school of origin no later than one year after the date of enactment of ESSA (December 10, 2015). Thus, each LEA that receives Title I, Part A funds must develop and implement, in collaboration with the state or local child welfare agency, procedures to provide, arrange, and fund transportation to maintain children in foster care in their schools of origin by **December 10, 2016**. In addition, an LEA must identify a Foster Care Liaison and ensure immediate enrollment¹⁴.

For the **2016–17** school year, FP 201 includes an optional set-aside for services to students in foster care on Page 5. This optional set-aside comes off the top of the district allocation before allocations are made to the buildings according to rank order.

For a school district to receive Title I, Part A funds starting with the **2017–18** school year, its plan must describe the services the district will provide to children and youth in foster care, including but not limited to academic supports, transportation, and those services provided with the optional set-aside.

36. Are children and youth in foster care eligible for Title I, Part A services? What if they are succeeding in school?

Yes. All children and youth in foster care are categorically eligible for Title I, Part A services, whether or not they live in a Title I, Part A school attendance area or meet the academic standards required of other children for eligibility.

37. If a student in foster care attends a school that does not receive Title I, Part A funds, how does the student receive services?

Districts setting aside funds for students in foster care may serve students in all buildings, regardless of whether the building receives a Title I, Part A allocation.

38. What are the limitations on use of Title I, Part A funds?

Title I, Part A states that funds cannot supplant other state or local funds. In other words, Title I, Part A funds cannot be used for services that are part of the core services provided by public

¹³ Dear Colleague Letter on Foster Care Timelines (June 23, 2016)

¹⁴ Dear Colleague Letter on Foster Care Timelines (June 23, 2016)

schools, or services that schools are required to provide even in the absence of Title I, Part A funding. Title I, Part A funds may be used in similar ways to those funds used for McKinney-Vento eligible students.

The homeless set-aside must remain intact and cannot be reduced or repurposed to serve children in foster care. The set-aside for homeless students must be based on the needs of homeless students in the LEA, and any change in the amount of that set-aside must be justified only by changes in the needs of homeless students.

39. What kind of services can Title I, Part A funds (including set-asides and other funds) pay for?

Title I, Part A funds, including those under the optional set-aside, can be used to serve students in foster care in both Title I, Part A and non-Title I, Part A schools. The services should support student success in school and should help students meet academic achievement standards. Districts opting to use Title I, Part A funds for this purpose need to provide a description in their Title I, Part A plan.

Title I, Part A funds can be used to provide services that are not ordinarily provided to other Title I, Part A students. For example, to help students effectively take advantage of educational opportunities, and when the items or services are not available from other sources, Title I, Part A funds can be used to provide:

- Items of clothing, particularly if necessary to meet a school's dress or uniform requirement.
- Clothing and shoes necessary to participate in physical education classes.
- Student fees that are necessary to participate in the general education program.
- Personal school supplies such as backpacks and notebooks.
- Birth certificates.
- Immunizations.
- Food.
- Medical and dental services.
- Eyeglasses and hearing aids.
- Counseling services to address anxiety related to foster care that is impeding learning.
- Extended learning time (before and after school, Saturday classes, summer school).
- Tutoring services.
- Parental involvement specifically oriented to reaching out to foster parents.
- Fees for Advanced Placement and International Baccalaureate testing.
- Fees for SAT/ACT testing.

School district Foster Care Liaisons or other staff should contact the student's case worker or foster parent as a first priority to meet that student's non-academic needs. For example, the basic needs of students in foster care such as clothing, birth certificates, immunizations, and medical services are first and foremost the responsibility of CA. School districts may however, use Title I, Part A funds if other sources are not available.

40. Can Title I, Part A set-aside funds be used to fund Foster Care Liaisons?

Yes. An individual paid, in whole or in part, with Title I, Part A funds may serve as the Foster Care Liaison. Districts opting to use Title I, Part A funds for this purpose need to explain this in their Title I, Part A plan.

Collaboration

Even though they serve the same children and have a shared goal of improved educational outcomes, in some cases child welfare and educational agencies may not have formal collaborative processes in place to ensure the educational stability of children in foster care.

Child welfare and educational agencies can work together to make informed decisions about children jointly and remove barriers that may hinder the implementation of the Title I, Part A foster care provisions. The questions below provide some ideas for establishing and maintaining this collaborative work.

41. How can child welfare and educational agencies work collaboratively to raise awareness and improve staff capacity to meet the unique educational needs of children in foster care?

Children and youth in foster care are often exposed to a multitude of challenges throughout their childhood including homelessness, domestic violence, abuse and neglect, chronic poverty, and other adverse childhood experiences. In addition, being separated from their families, even for a short time, is disruptive and potentially traumatizing, with damaging effects that may impact social and emotional development.

LEAs should collaborate with child welfare and other relevant agencies to ensure that all school staff are sensitive to the complex needs of foster youth, are informed about the impact that trauma has on a child's ability to learn, and that the appropriate interventions and strategies are in place to support them to succeed in school.

Schools districts may provide training to DSHS/CA staff regarding K–12 education, the services available to students, or how to navigate the public education system. LEAs are strongly encouraged to collaborate with DSHS/CA to assist with foster parent recruitment efforts in their communities.

42.What models or structures for collaboration should educational and child welfare agencies consider as part of the implementation of the new Title I, Part A foster care provisions?

Educational and child welfare agencies can choose to establish a structure to facilitate their collaboration, such as a work group, taskforce, or interagency committee, customized to the needs of the local community.

When identifying which entities should be represented as part of this collaboration, LEAs, tribes, and child welfare agencies are encouraged to work across state and district lines because it is likely that when implementing these provisions, an LEA or local child welfare agency will have to work with many partners. As such, establishing regional, inter-district, and inter-state collaborations prior to the effective dates of these provisions is critical.

Under this collaboration, the educational and child welfare agencies could engage community stakeholders, such as representatives from the court, community providers, tribal leaders, education advocacy groups, and parent mentor groups; create an open and transparent process, and work towards a shared vision of supporting the educational well-being of children in foster care.

The agencies could define the roles and responsibilities of member entities, including who will facilitate collaboration meetings, the frequency of such meetings (e.g., monthly or quarterly), resources to support the collaboration including the meeting location, and an effective process for communicating results with leadership and stakeholders. Ideally, this collaboration would be ongoing and outlast the initial implementation of ESSA, as appropriate, so that agencies can continuously improve their efforts to meet the academic needs of children in foster care.



2017 LEAD ADVOCACY PRIORITIES

Improve Opportunities and Access to Independence

Create a pilot program to help foster youth with paperwork and fees necessary to obtain a driver's permit, license, and insurance. Without this crucial credential, foster youth lose out on education and employment opportunities open to their peers in intact families. A successful pilot in Florida has tripled the number of youth in care (ages 16-17) who obtain a driver's license.

Projected cost: To be determined

Recruit and Retain Foster Parents

Renew the budget proviso funding the Mockingbird Family Model (MFM). In every MFM "Constellation," six to ten licensed foster families live in close proximity to a veteran foster care family—a Hub Home—that provides peer support, social activities, planned and unplanned respite or crisis care, and assistance in navigating child welfare systems. Currently, up to eight Hub Homes are publicly funded (plus an additional ten Hub Homes which are privately funded). A formal evaluation (conducted by WSIPP) is underway. In addition to the 118 families served in Washington state, the model has been implemented in California and the United Kingdom, with implementation pending in New York, Kansas, and Japan.

Projected cost: \$506,000 for 2017-2019 biennium

End Youth Detention for Status Offenses

Pass legislation to eliminate the Valid Court Order exception that allows minors to be placed in juvenile detention facilities for status offenses such as truancy and curfew violations. Despite federal legislation mandating deinstitutionalization of status offenders, Washington leads the way in the use of the VCO exception. In 2013, Washington state used the VCO exception 2,705 times—the next state, Kentucky, used the exception just 1,048 times, and 28 states did not use it at all.

No budget impact

Join us in Olympia for Youth Advocacy Day on Friday, February 10, 2017!

For questions or comments, please contact: Liz Trautman, Director of Public Policy & Advocacy| liz@mockingbirdsociety.org Annie Blackledge, Executive Director | annie@mockingbirdsociety.org



2017 Support Priorities

Provide Legal Representation to All Children and Youth in Foster Care

Pass legislation to grant legal counsel to all children and youth in foster care before their 72-hour shelter care hearings. Studies show that having an attorney early in the dependency process increases permanency rates for youth. Currently, requirements for attorneys vary from county to county, resulting in a "justice by geography."

Projected cost: To be determined

Improve Educational Outcomes for Foster Youth

Pass legislation to require consolidation of unresolved or incomplete coursework due to foster care placement transfers. This legislation will be coupled with funding support for educational advocacy and a program aimed at improved graduation rates for youth in care.

Projected cost: To be determined

Prevent and End Homelessness in Schools

Renew budget proviso for the Homeless Student Stability Program, which provides housing support and Improved services in schools for students experiencing homelessness.

Projected cost: \$4 million for the 2017-2019 biennium

Support At-Risk Youth and Families

Increase funding to improve and expand Family Reconciliation Services to support families with youth in crisis.

Projected cost: To be determined

Join us in Olympia for Youth Advocacy Day on Friday, February 10, 2017!

Updated₇<u>5</u>1/30/2016 **73**

SUPREME COURT COMMISSION ON CHILDREN IN FOSTER CARE

2017 Meeting Schedule

Date	Time	Location	
Monday, March 20, 2017	1:00 – 4:00 p.m.	Temple Reception Room	
Monday, May 15, 2017	1:00 – 4:00 p.m.	Temple Reception Room	
Monday, December 11, 2017	1:00 – 4:00 p.m.	Temple Reception Room	