

# **Sensitive Case Review Committee Findings and Report August 2014**

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## **Membership**

*Senator Jackie Winters*  
*Senator Laurie Monnes Anderson*  
*Representative Alissa Keny-Guyer*  
*Representative Vicki Berger*  
*Consul de Protección Dulce Claudia Helietta Gonzalez Hernandez*  
*Honorable Pamela Abernethy*  
*District Manager John Radich*  
*Child Welfare Director Lois Day*

## **DHS Staff**

Child Permanency Program Manager Kathy Prouty  
DHS Legislative Liaison Chris Edmonds  
CIRT and Sensitive Issue Coordinator Susan Lopez  
Child Safety Program Manager Stacey Ayers  
Assistant Child Permanency Program Manager Gail Schelle

The committee participated in two meetings on the following dates:

May 27, 2014

July 11, 2014

## **Introduction**

In February 2014, Erinn Kelley-Siel, Department of Human Services Director, convened a sensitive Review Committee comprised of legislator and child welfare/advocacy experts to review a child welfare case. The Sensitive Review Committee process is focused on cases that are closed and is intended to be a process by which lessons learned in one case can improve the dependency process going forward.

The case reviewed by this committee was complex, as are all Child Welfare cases, and involved international components that allowed the committee the opportunity to observe how DHS cases interact with not only local systems and agencies, but also foreign countries. This case afforded the opportunity for the committee to look into some of the barriers to permanency children face once they are in the foster care system, specifically to observe some of the causes for delays to child permanency.

## **Issues and Recommendations**

The case that was reviewed by the committee had several co-occurring issues that ultimately resulted in a significant delay to child permanency. Some of these issues are detailed below as conclusions, along with any recommendations for action based on those conclusions:

### **Issue 1:**

The committee determined there were judicial decisions in this case that led to the delay in child permanency. The most significant delay was due to an overturned judgment regarding the termination of the father's parental rights, and the subsequent processes the Department had to complete prior to freeing the child for adoption.

### **Recommendation:**

The committee did not make any recommendations related to this issue.

### **Issue 2:**

The Court dismissed DHS from the case and gave custody of the child to the foster provider with the expectation they would pursue independent adoption. In Oregon children who are adopted independently are only eligible for adoption subsidy and Oregon medical coverage if the child is on SSI or was previously adopted and receiving Adoption Assistance.

### **Recommendation:**

The committee recommends assessment and discussion, including discussion at the Court Hearing, of the prospective family's ability to financially support the child if not adopted through DHS. That would include assessment of the family's financial ability to care for the child as well as whether/how adoption assistance could be applicable and whether any other assistance was available to the child should DHS Child Welfare be dismissed from the case.

**Issue 3:**

In this situation the Court found the child had not been properly prepared for life in another country, and determined that a lack of transition planning by DHS was not in the child's best interest. The committee believes it is imperative to child wellbeing to have consistency; therefore it is in the child's best interest for the Department actively ensure a transition plan for children that takes current circumstances and future circumstances into account. This is especially critical when the plan is to transition the child to a different country where language and culture are vastly different from their current circumstances in their foster home.

**Recommendation:**

DHS should enhance caseworker training on how to transition children in a way that is inclusive for foster parents, family members, treatment providers, and others critical to the success of the child's transition. The transition process should be consistent with the child's developmental and mental health needs and respectful of a child's need for stability and consistency in their relationships across placements, with an effort on limiting placement transitions as often as possible.