Partnership Parenting Guide


Georgia Department of Human Services
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Atlanta, GA 30303

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Traditionally called foster parenting, Partnership Parenting is part of the agency wide shift to a Family Centered Practice approach to serving children and families. Partnership Parents will continue to provide care for children who have been temporarily placed in foster care. While still responsible for the day to day care, families will “partner” to meet the needs of children in their care.

Family centered practice acknowledges that among the “needs” of children is the need to continue relationships with their parents and the important people in their lives. The family centered approach acknowledges that children are connected to the families and communities from which they came. Birth parents will play a more natural role in the care of their children; placement in foster care will no longer cancel parental roles.

The health and safety of children remains the DFCS priority. Partnership Parenting does not shift responsibility from the agency to make prudent, qualified decisions that protect children from further harm nor does it allow for decisions to be guided by unqualified fears which limit opportunities for parent-child interaction.
1. Family Centered Practice

The Family Centered Practice Model is a philosophy rooted in the belief that the safety, permanency and well-being of children are interconnected with the well-being of the family. The family centered approach recognizes the interconnectedness of children and family.

According to the National Resource Center for Permanency and Family Connections and Permanency Planning, the four essential components of family centered child welfare practice are:

- The family unit is the focus of attention.
- Strengthening the capacity of families to function effectively is emphasized.
- Families are engaged in designing all aspects of the policies, services, and program evaluation.
- Families are linked with more comprehensive, diverse, and community-based networks of supports and services.

A family centered approach regards each family, however it is configured or defined, as valuable with inherent strengths. The family unit performs critical functions that are essential to the healthy development and functioning of its members, including children and youth. The shift to Family Centered Practice acknowledges the importance of family in the short-term achievement of child welfare goals and in the long term well being of adults who were in foster care. The family centered approach also acknowledges that government is not a good substitute for family. The shift is good for the community. Strengthening and empowering families has a positive impact on the community and the systems that are part of the community’s infrastructure.

**Wasn’t the Old Way Good Enough?**

The old foster care model split services into two tracks: services specifically aimed at the well-being of the child (placement) and services aimed at correcting the deficits of the birth parent. Foster parents were encouraged and empowered to provide all parenting to the children placed with them. “Treat them like your own” was the old adage. While the bond between children and their foster parents was strengthened, the bond between children and their birth parents was weakened. Though well intentioned, emotional disconnections and detachments are damaging to children and their parents. Birth parents were not expected or encouraged to parent or nurture the natural bond between parent and child. Parenting expectations were limited to scheduled visits and sometimes providing permission for out of town trips.

The old “two-track” system is like the parent and child going to the same place (reunification) on different trains. Consider being part of a group traveling to the same destination on separate trains running on parallel tracks. With no opportunity for communication except during stops planned by the train conductors, your group’s interactions would consist of brief interludes at rest stops. What would that do to the group’s relationships and cohesion, especially if it were a 12-15 month journey?

The parent – child relationship and connectedness suffers as a result of being on “two tracks” during their 12-15 month journey toward reunification. As with the two groups mentioned above, once the birth parent and child reach their destination (reunification), relationships have to be re-established, which in effect adds more time to their separate journeys. “Was the old way good enough?”

2. Change: Crisis or Opportunity?

Whether change represents a crisis or an opportunity almost always depends on your perspective. Change signals that something different and unfamiliar is coming. Reactions vary from outright panic to excitement and curiosity. Almost nothing is more important to an organization like DFCS than change (growth). The shift to a Family Centered Practice approach and the role that all families involved will play, may elicit fear of the unknown, fear of learning a new way of doing things and, in some cases, resistance to the value system the agency is embracing.

The crisis, for some, is the shift in practice, moving from one thought system to another. Leaving the old and familiar behind is an anxiety-producing proposition. As you read this guidebook, fears, real and imagined, may emerge. This is a part of the change process.

Changing to a Family Centered approach presents the opportunity to review and refine our continuum of child welfare services. It also presents the opportunity to examine interventions and touch points between DFCS and families, partners and the community to ensure that all services support our new values and principles. The foster parent program is a significant touch point with critical implications for the implementation of the new practice model.

Implementing and maintaining large systemic change takes planning and effort. One day, Family Centered Practice and Partnership Parenting will be the DFCS norm. Until then, the goal is to introduce the change and make the concepts stick. When our day-to-day practice consistently exemplifies Family Centered Practice and Partnership Parenting, it will send a clear message about how we operate and what we value.

New Names and Concepts

Name changes are a good way to shut off “auto pilot.” Foster Parents are now called Partnership Parents. The new name is an end to business as usual. To foster is to encourage or look after; to partner is to be a colleague or a companion or to connect. All foster parents automatically become Partnership Parents.

Along with the new name for foster parenting, a special category of Partnership Parents has been created. Resource Parents support Concurrent Planning* case planning, agreeing to serve as Partnership Parents supporting family reunification AND will adopt IF it becomes in the best interest of the child.

* Concurrent planning means providing family reunification efforts while simultaneously developing a permanent parenting plan for the child. Concurrent planning exemplifies the values of child-focused, family centered, and culturally competent practice philosophies.

While the Adoptive Parent category will not change, the Foster-To-Adopt program is eliminated. Foster-to-Adopt (FTA) parents who are waiting for or have a traditional foster care (reunification case plan) placement will need to assess their interest in serving in one of the three categories. Those FTA families with adoptive placements will be supported in completing their adoptions.

**Peach Point: Foster Parents are Partnership Parents.**
**Full Disclosure**

“The biggest illusion with communication is that it has been accomplished.”—G. Bernard Shaw

Full disclosure is a planned and purposeful effort to communicate fully, accurately and regularly. Full disclosure is an open, honest, and respectful discussion between all involved parties including the birth family, relatives, partnership and resource families. Everyone needs to understand the impact of foster care on children, what is happening and what is likely to happen next.

<table>
<thead>
<tr>
<th>Type</th>
<th>Resource Parent</th>
<th>Foster-To-Adopt Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information</td>
<td>Full Disclosure</td>
<td>Adoptive Parent</td>
</tr>
<tr>
<td>Placement Matching</td>
<td>Works in partnership with the birth parent toward reunification AND will adopt, <strong>IF</strong> it becomes in the best interest of the child.</td>
<td>Accepts legal risk placements</td>
</tr>
<tr>
<td>Expectations</td>
<td>Expects reunification unless notified otherwise</td>
<td>Expects to adopt</td>
</tr>
<tr>
<td>Family Visitation</td>
<td>Increased</td>
<td>Standard</td>
</tr>
<tr>
<td>Recruitment</td>
<td>Specialized Recruitment, Training &amp; Support</td>
<td>Standard Recruitment &amp; Training</td>
</tr>
<tr>
<td>Life Plan</td>
<td>Potential “Gentleman’s Agreement” for Open- Adoption</td>
<td>“Closed-Adoption”</td>
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</table>

**Goodness of Fit**

“Goodness of Fit” is a purposeful consideration of the placement fit, parent to parent AND child to Partnership Parent. There is a Goodness of Fit when parent characteristics align well to allow both families to master the expectations and opportunities of Partnership Parenting.

These characteristics include:
- Proximity to school and community of origin;
- Investment in mentoring;
- Partnership Parenting relationships being managed (the number of children placed);
- Ability to meet the needs of the child;
- Adult temperaments;
- Child temperaments;
- Future motivations for permanent connections; and,
- Access to resources and supports.

**Peach Point: Ask the question, is it good fit?**
Traditionally, while birth parents have carried out the activities of rehabilitation (completing the case plan), their parental responsibilities were effectively cancelled. The bond between parent and child was loosened, disturbed and in worst cases, eliminated. The expected transactions (communications, connections) between parent and child were interrupted and new transactions were prevented because of limited interactions. Birth parents were expected to work on their case plans in order to be reunited with and parent children with whom their primary relationship had been cancelled or interrupted.

Parenting interruptions are not good for the parent or the child. The child exhibits increased behavioral and clinical issues as a result of grief and loss. The parent who retains the title of “parent” but none of the responsibilities, never really confronts their parental shortcomings. When the child is removed from the home, proof of parental shortcomings is also removed. The birth parent may become increasingly tolerant of having the “title” of parent in name only, which may lead to the surrender of that as well.

As with children in placement, birth parents experience grief and loss when their children are removed, the stages are generally: ¹

**Shock.**
Parents are in disbelief. The only thing on their mind is that their child is gone. Behaviors of parents may include: shaking, screaming, crying, or swearing. Parents may be in denial and are sure the child will return tomorrow.

**Protest.**
The parents may feel sadness or anger and the symptoms could be upset stomach and low or no appetite. Parents may have headaches, insomnia, and exhaustion. They may be angry at everyone. It may be easier to blame others for the situation than to accept their responsibility. This could be a way of coping with despair and depression.

**Adjustment.**
This phase occurs sooner if the parents have allies, such as the social worker and foster parent. The parents do not worry about their children's safety or loyalty if trust in the foster parent has developed. The child becomes the focus of the team. The parents build their parenting skills and actively participate in co-parenting their children with the foster parents. The social worker, foster parent, and birth parent develop a strong Shared Parenting team. The parents fulfill their obligations and meet the case plan goals.

Partnership Parenting: What it is and is not

Partnership Parenting is a Family Centered approach which, continuing the train track analogy, reduces the dual-foster care (placement and rehabilitation) track to a single track. Birth parents work on rehabilitation and share in parenting responsibilities. Rather than regarding birth parents as deficient, Partnership Parenting emphasizes their role as parents charged with doing two things well and at the same time: continuing their parenting responsibilities in a co-parent relationship and taking the corrective steps necessary to support reunification.

Some of the fundamental values of Partnership Parenting are:

Partnership Parenting encourages foster parents to work with birth families as mentors and by sharing parenting responsibilities.

- Reduction in the “cancellation” of the parenting role;
- Engage foster parents fully in their role as temporary caregivers;
- Create mentoring and collaborative-parenting relationships between the birth and foster parents; and,
- Create expanded opportunities to monitor, observe and document the birth parent’s attention, care and attachment with their children.

Partnership Parenting Is…

- More information to support and make permanency decisions;
- Increased quality and quantity of interactions between parents and foster parents as well as parents and children;
- Creation of opportunities for birth parents to parent rather than just visit;
- Meaningful method of helping birth parents experience the day-to-day skills needed to manage and meet the needs of the child; and,
- Increased documentation, monitoring and case responsibility, particularly in support of the foster parent.
Partnership Parenting Is not…

• A change in ASFA timelines or court orders dictating contact or supervision;
• Reduction of supervised Visitation or caseworker contacts;
• Relinquishment of DFCS responsibility or foster parent expectations to ensure the safety, and well-being of children;
• Birth parents managing parenting tasks that are beyond their legal capacity or that are not in the best interest of the child; or
• Holding foster parents responsible for the successes or failures of the birth parents.

**Peach Point: Foster Care is temporary, family is forever.**

**Partnership Parenting Principles**

**Principle One**
The first principle of Partnership Parenting is also the foundation of Family Centered Practice: the child's health and safety are paramount. Partnership Parenting does not shift responsibility from the agency to make prudent, qualified decisions that protect children from further harm nor does it allow for decisions to be guided by unqualified fears which limit opportunities for parent-child interaction.

**Principle Two**
Partnership Parenting promotes permanency through “connectedness” and team accountability to the child and family. Connectedness is achieved through continuous contact and dialogue.

**Principle Three**
Partnership Parenting recognizes that even though agency intervention was necessary for the child’s safety and well-being, the elimination of the birth parent’s parenting role goes beyond what is needed to protect the child from further abuse or neglect.

**Principle Four**
Partnership Parenting emphasizes the temporary nature of fostering to foster parents through the presence and involvement of the birth parent. During the dual-track system, the involvement of birth parents with their children was largely esoteric and fleeting. Partnership is a central aspect of the single-track approach where foster and birth parents “partner” to ensure the well-being of the child. Additionally, foster parents are encouraged to be parenting mentors to birth parents.

**Principle Five**
Partnership Parenting emphasizes “parenting opportunities” in addition to visitation. There are many opportunities for parents to exercise parental responsibility even though their child is in foster care.
Partnership Parenting creates co-parenting relationships between the foster and birth parents. It requires “a clear definition and understanding of each person’s parenting role, an appreciation and respect for each role, a clear agreement as to the responsibilities of each role and a method for shared decision making among the partners.”

For even the most inclusive and open foster parents, some of the roles and responsibilities are going to feel forced at first. Foster families, even those who routinely reach out to birth parents upon placement of a child, might see the Parenting Plan as “one more thing the agency is making me do.” Still other foster parents will have concerns about participating in the development of or carrying out a plan that involves the birth parents.

The Parenting Plan is a planning tool to support families and staff through the initial stages of establishing communication between the parents. The plan meets families wherever they are along the continuum of emotions involved in beginning a new relationship.

What is the Parenting Plan?

Borrowing from concepts from the Family Court system, a Parenting Plan is an informal agreement between parents that describes how communication will occur, decisions will be made, an interaction plan, religious and other child-rearing preferences.

How is the Parenting Plan Developed?

Step One:
Early introductions set the tone for trust, accountability and partnership. Birth and foster parents must be introduced either in person or via phone with in the first 48 hours of a placement.

Step Two:
Complete the actual Parenting Plan during the Parent-to-Parent Meeting (P2P) which takes place within five days of any placement. The P2P is a face-to-face meeting to introduce the birth and foster parents. The P2P meeting is child-focused.

Step Three:
Maintain contact and collaboration. Collaboration means that the parents are in contact with each other regular and that they function as a network on behalf of the child, sharing parenting information, victories and defeats, and solving problems mutually. The Parenting Plan is a living document and therefore may require updates or changes.

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2 PRIDE Trainer’s Guide: Module 5, Session 3 “Becoming Partners in Parenting”
3 Parent to Parent Protocol Manual NY State
Key questions for the meeting:

- How will the parents maintain regular communication?
- What are the agreed upon parenting roles for each?
- What are the planned Parenting Opportunities for the birth parents?
- What are the needs, wants, routines, likes, dislikes of the child?
- Who is important to the child? What is important to the child?
- What is the parent’s general availability?
- How can we help each other?

Peach Point: Ask...offer...suggest...support...embrace the opportunity!
**Partnership Parenting Plan Worksheet**

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<th>Child or sibling:</th>
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<table>
<thead>
<tr>
<th>Parent (s) Name:</th>
<th>Partnership Parent (s):</th>
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<th>Other Important Relations:</th>
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<tr>
<th>About the child or sibling group:</th>
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<tr>
<th>School (Issues or Concerns, Anticipated Appointments):</th>
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<table>
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<th>Holidays/Birthdays:</th>
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<table>
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<tr>
<th>Personal parenting preferences (Religion, hair, TV viewing…):</th>
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<th>Extracurricular Activities:</th>
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<tr>
<th>Needs or concerns of the parent:</th>
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<tr>
<th>Needs or concerns of the Partnership Parent:</th>
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<tr>
<th>Communication Plan (Parent to Parent and Parent to Child):</th>
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Signatures | Date Completed
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The Parent-to-Parent Meeting or P2P is key to establishing partnership parenting, positive relationships and enhancing the well-being of children. The P2P is not a case staffing or a Family Team Meeting. It is a child-focused conversation between parents to develop a shared-approach to meeting the child's needs while in foster care. The P2P meeting is a key component in practicing Partnership Parenting. It emphasizes that the child's parent are the experts, that parenting responsibilities are not cancelled because a child is in foster care and, builds a positive rapport between parents. The protocol outlines the roles and expectations of the meeting participants.

**P2P Protocol – Meeting Roles and Responsibilities**

**Case Manager:**
- Organizes the P2P meeting within five days of a placement, assesses on a case by case basis whether children/youth should attend, determines the parameters for the Parenting Plan (what is within limits based on case issues) and, ensures that the agreements made are within limits;
- Prepares birth parents and foster parents individually a few minutes prior to the meeting;
- Leads the introductions;
- Assists in keeping the discussion child-focused (the primary goal is to observe), intervening if participants stray from the goal of the meeting or if the participants have a hard time keeping the conversation flowing; and,
- Follows-up on any red flag issues that are presented by the parents.

**Foster Parent:**
- Reviews Parenting Plan information and the P2P meeting FAQ sheet prior to the meeting;
- Is non-judgmental;
- Encourages the birth parents to share information to help in the care of the child;
- Provides information about his/her family and the child as part of the family to help relieve the birth parent’s anxiety;
- Makes agreements within the context of the Parenting Plan guidelines;
- Reassures the birth parents that it’s the foster parent’s role to support the goal of reunification; and,
- Begins the process of developing a good working relationship with the birth parents.

**Birth Parent:**
- Reviews Parenting Plan information and P2P FAQ sheet before the meeting;
- Keeps discussion child-focused;
- Provides information to the foster parent that will make the child's transition as easy as possible;
- Does not discuss the reasons the child or children is in care or any other case planning issues;
- Reviews the “About My Child” questionnaire as a guide for sharing information about the care of the child; and,
- Begins the process of developing a good working relationship with the foster parents.
Parent 2 Parent (P2P) Meeting Agenda

Facilitator:
- Opening and Welcome
- Reviews the purpose of the meeting
- Introduces each participant, clarifies roles and responsibilities

Foster Parent: Shares information with the birth parent including:
- How the child is doing in their home so far
- Assurance that, “I am not trying to take your place”
- Other adults and siblings (birth/adoptive/foster) in the home
- Where the child sleeps
- What the child calls the foster parent
- Basic structure/rules of the home
- Daily routine
- Experience or goals as a foster parent

All:
The parent(s) have the opportunity to share information about the child using the “About My Child” questionnaire as a guide. (A sample questionnaire is included as an attachment to this guide.)

Child:
The child will be given an opportunity to ask questions or to express his/her desires regarding ongoing activities and contact with important people.

Social Worker: Communication and Short-term Visitation Plan
The social worker and participants will discuss a communication plan that is appropriate and comfortable for all parties, including the method(s) of communication. The arrangements for the short-term visitation plan also will be discussed.

Adjourn
Parenting does not require that parent and child live in the same home. Millions of divorced couples raise children while living in different homes, at least some of the time. Those families manage sometimes complicated co-parenting relationships because it is in the best interest of the child to maintain contact with both parents; cancellation of mom or dad's parenting role would not be in the best interest of the child.

As with children of divorce, the shared parenting of children in foster care takes work. The shift to Family Centered Practice and Partnership Parenting also means a shift or expansion in what is expected of birth parents. It requires consistent, deliberate and positive communication between the parents or care-takers. Parenting is often an exercise in multi-tasking, taking on many roles and responsibilities. These roles and responsibilities are called "Parenting Opportunities."

Parenting does not require living in the same house; many parenting activities can be shared with or carried out by the birth parent. Some of the activities may be new for the birth parent; introducing new activities is an excellent opportunity for the Partnership Parent to mentor the birth parent. A birth parent may not ask "are there parenting roles I can play while my child is in your home?"

Rather than waiting for the birth parent to make requests in family centered terminology, the Partnership Parent can demonstrate family centered behavior by identifying and offering ways for the birth parent to be involved. For example, while the birth parent cannot be there to tuck the child into bed at night, he or she could, with some planning, read a bedtime story or blow a kiss on the phone. Shared parenting requires a willingness to be inclusive and included.

Here are some examples of parenting roles that do not require co-habitation:

- Sidelines Clapper
- Diaper Changer
- Picture Taker
- Bump/Bruiise Healer
- Hair Brusher
- Game Player
- Goodnight Wisher
- Clothes Mender
- Allowance Giver
- Heart Mender
- Homework Helper
- Advice Giver
- Cheek Kisser
- IEP Signer
- Face Wiper
- Schedule Planner
Birth Parent: Maintains an active co-parenting role; regularly consults with foster parent about child’s progress; issues; promotes positive relationship between child and foster parent; and, maintains communication with child through established channels.

<table>
<thead>
<tr>
<th>Education</th>
<th>Nurturance</th>
<th>Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attends PTA meetings, school</td>
<td>Provides regular parental support and nurturance</td>
<td>Attend medical appointments; stay abreast of</td>
</tr>
<tr>
<td>conferences and other meetings</td>
<td>in-person and via other channels (phone, text,</td>
<td>developmental changes and health issues.</td>
</tr>
<tr>
<td>related to education. Represents</td>
<td>email).</td>
<td>May participate in counseling with child; has</td>
</tr>
<tr>
<td>child on IEPs.</td>
<td>Participates in extracurricular activities;</td>
<td>regular contact with therapist regarding child’s</td>
</tr>
<tr>
<td>Helps with homework (by phone</td>
<td>attends parent meetings.</td>
<td>individual treatment.</td>
</tr>
<tr>
<td>or in person); monitors grades,</td>
<td>Avails self to participate in parenting</td>
<td></td>
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<tr>
<td>discipline and general progress.</td>
<td>opportunities.</td>
<td></td>
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<tr>
<td></td>
<td>Utilizes foster parent as a mentor.</td>
<td></td>
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<tr>
<td></td>
<td>Inquires and shares information about discipline,</td>
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<tr>
<td></td>
<td>child’s strengths and needs.</td>
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</table>
**Partnership and Resource Parents:** Responsible for day-to-day care and decisions regarding care, maintenance and welfare; actively consults with birth parent and agency on religious upbringing, discipline, education, moral training, social and recreational activities, and non-emergency medical and dental care.

<table>
<thead>
<tr>
<th>Education</th>
<th>Nurturance</th>
<th>Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registers child in school within two days of placement.</td>
<td>Shares decision-making about extracurricular activities with birth parent.</td>
<td>Ensures health needs are met; inform and consult with birth parent on developmental and health matters.</td>
</tr>
<tr>
<td>Serves as Educational Surrogate as needed.</td>
<td>Shares schedule.</td>
<td>Schedules health appointments; coordinates appointments with birth parent; manages health issues.</td>
</tr>
<tr>
<td>Attends PTA meetings, school conferences and other meetings related to education.</td>
<td>Models positive parent behaviors.</td>
<td></td>
</tr>
<tr>
<td>Helps with homework; monitors grades, discipline and general progress.</td>
<td>Discusses discipline, child strengths and needs with birth parent.</td>
<td>May participate in counseling sessions with child; has regular contact with therapist regarding child's individual treatment.</td>
</tr>
<tr>
<td>Coordinates educational monitoring with birth parent.</td>
<td>Provides pictures or other information about self for birth parent.</td>
<td></td>
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</tbody>
</table>
Mentoring is often a formal arrangement between mentor and mentee. The mentor is usually regarded as a wise and trusted counselor or teacher. The relationship is usually based on common or shared interests. A third party facilitator may bring the mentor and mentee together and monitor the relationship to make sure that conditions of the relationship are being met. In some cases the mentee seeks and finds a mentor for a specific reason, for a finite amount of time, as with a Life or Scholar Coach relationship.

As a component of Partnership Parenting, Natural Mentoring occurs between the two sets of parents, in the normal course of working together. There are similarities between foster parent – birth parent mentor / mentee and traditional mentor / mentee relationships. A third party facilitator, DFCS, initially brings the birth and Partnership Parent together. The common or shared interest is the well being of the child they now have in common. Though the relationship is finite, promised only for the amount of time a child spends in placement, the birth and Partnership Parent relationship may last well beyond reunification.

Natural mentoring doesn’t have to be an officially documented or pre-arranged meeting. Natural mentoring is the result of trust and relationship building between parents. Working together, the shared interest in the well being of the child and proximity will create “teachable moments.” A teachable moment is a time when a person is particularly disposed to learning something or particularly responsive to being taught or made aware of something. The thing learned in that instance is likely to make a deep impression.

Teachable moments create mentoring and collaborative-parenting relationships between the birth and foster parents. Those moments also allow the observation of positive parenting in action. Everyone—parents, staff and partners—should regard themselves as natural mentors. Teachable moments pop up anytime. It isn't always possible to create teachable moments; they occur in the mundane and in unusual situations.

**Being Ready for the Unscheduled: Teachable Moments**

- Recognize that children and adults often learn lessons unconsciously, in casual moments.
- Be aware of situations that present moral choices.
- Demonstrate positive parenting especially when behaviors are challenging.
- Ask for help when you need it. Recognize the strengths in others.

**Peach Point: Natural Mentoring happens as trusting relationships are established.**
**From the Birth Parent’s Perspective:**

1. **What will we talk about at the icebreaker meeting?**
   The meeting is an opportunity for you to share your knowledge of your child to help the foster parents do their job. You will discuss things such as your child’s health, their likes and dislikes, hobbies, medical needs, school, sports, etc. You will also have an opportunity to ask the foster parents about themselves, such as who is in their family and what they enjoy doing as a family. Visitation arrangements for you and your child will also be discussed.

2. **How will the foster parents treat me during the icebreaker meeting?**
   They will treat you respectfully and will ask you questions about your child that will help with your child’s adjustment in the foster home. Foster parents take care of children because they enjoy children and want to see them reunited with their families.

3. **Do I have to answer all of the foster parent’s questions at the icebreaker meeting?**
   It is normal for you and the foster parents to be a little nervous about meeting for the first time. If you are unsure about answering a particular question, let the foster parent know that you need to think about the question and are not ready to answer it. Answering the foster parent’s questions will help them be sensitive to your child and provide him/her with the best care.

4. **How will my child and I remain connected?**
   Everyone involved will work hard to keep you and your child connected. You and your child will visit regularly, and you will receive updated information from the case manager and the foster parent. Your communication and relationship with the foster parents will help. When it is time for your child to return home, the transition back into your family will likely be gradual to give everyone an opportunity to make any needed adjustments.

5. **Can I tell the foster parent how to take care of my child?**
   Your child will have a smoother adjustment to his/her foster home if you and the foster parents communicate openly about your child. If you have a specific request, the foster parents will give you an honest response about what they are able to do. You can use your social worker to help you work through any major differences.

6. **I am worried that the foster parents will turn my child against me.**
   Foster parents understand how difficult and emotional it is for children and their parents to be separated. They also know how important it is to be non-judgmental toward birth parents so that the child will not suffer from conflicted feelings about the two families. Your child will miss you and continue to love you. Your relationship with the foster parents will keep your child from having divided loyalties to two families. Your child’s heart will be big enough to embrace two families who care about him/her.

7. **Will the foster parents support my value system (religion, racial/cultural, food, etc.)?**
   Yes, but there may be differences. It will be important for you and the foster parents to discuss those differences and the accommodations that can be made. The foster parents are raising their own family within their own cultural and value systems, so it may take compromising to reach a mutual understanding.
8. **Will the foster parents take my child to their school, sports events, etc.?**

They will incorporate your child into their family routine and will also support your child’s special interests. Your child will go to the public school assigned to the location of the foster home. When you meet the foster parents, ask them what activities they enjoy doing and tell them what the child enjoys. We will attempt to maintain your child’s school placement and special activities when possible.

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**From the Partnership Parent’s Perspective:**

1. **How is the Parent to Parent (P2P) meeting structured?**

   The meeting is a chance for you and the birth parents to begin to get to know each other. This first meeting will most likely be held within the first week of placement and last about thirty minutes. The meeting is facilitated by the child’s case manager. You will be told in advance who will be attending and what will be on the agenda. The meeting typically includes the foster parents, the birth parents, the case manager and possibly the child. In general, the meeting is an opportunity for the birth parents to provide you with information about the child. You can exchange information about your families, the short range visitation plan may be discussed, and any other questions or concerns relating to the care of the child.

2. **Is the Parent to Parent (P2P) meeting mandatory?**

   Foster parents are important treatment team members and contribute greatly to the child’s well-being. If you have general or safety concerns you should tell the case manager in advance so they can be addressed. The P2P meeting is important and held early in the placement. The meeting will give you important information to help you care for the child. The meeting will also help allay worries which may result from unanswered questions. This meeting is the first step toward building a comfortable and respectful relationship between you and the birth parent. That relationship will serve the child well throughout his or her placement.

3. **What if I have concerns about meeting the birth parents?**

   Your social worker will assess the advisability of holding a P2P meeting in person. With rare exceptions, birth parents will not pose a danger to foster parents. Experience has shown that when treated with dignity and respect, birth parents will respond in kind. The case manager will be present to facilitate and assure that everyone is respectful and appropriate. The meeting will be discontinued if at any time it becomes unsafe or unproductive. Although you may have concerns, it is important that you engage the child’s birth family to begin forging a relationship with them for the well-being of the child. Children adjust better to their foster home placement when they feel connected to their birth families. They see this connection not only through visitation but also through the relationship among all the parents.
4. What if the birth parents ask a question that makes me uncomfortable?

Both you and the birth parents may be a little nervous about meeting for the first time. If you are unsure about answering a particular question, let the birth parent know that you need to think about the question and are not ready to answer. Answering the birth parents’ questions will help lessen their anxiety over the loss of their child by satisfying their natural curiosity about you and the kind of care the child will be receiving. The birth parents may ask for your phone number or how they may reach their child. If you are not comfortable in giving the birth parents your phone number, tell them that you would like to get to know them better before sharing that information. Be sure that the case manager talks with all of you about how the child will communicate with the parents, at least for the near future.

5. What if the child has concerns about the meeting?

Most children will not be concerned about you meeting their parents, especially if they are younger and if the adults treat the P2P meeting as a normal occurrence. For children who have concerns, ask them to share specific concerns. Gently reassure the child that the meeting is going to help you and their parents work together. The child's anxiety will decrease as the two families connect and slowly forge a respectful relationship. If any behavioral problems appear to be the result of the P2P meeting, talk to the child to discover the causes for the behavior.

From the Child’s Perspective (Geared toward teens and older children):

1. What will be talked about during the very first meeting?

When your parents and foster parents meet for the first time, they will get to know each other a little bit and will talk about things that will help your foster parents take care of you. They may talk about how you have been doing in school or whether you need to see a doctor. They might discuss the things you like to do. The parents might also talk about rules they each have in their households. Your social worker will talk with you about whether you will attend the meeting. If you attend, think ahead of time about the questions you want to ask or what you would like your parents and foster parents to talk about.

2. What if my parents and foster parents do not get along?

All parents differ to some extent about parenting and how they take care of their households. When you are in foster care, you have two sets of parents who care for you and are responsible for your well-being. Sometimes, the adults will disagree about what is best for you. This is not your fault or your responsibility. If you are comfortable, talk to your foster parents, birth parents, and/or your social worker about how it makes you feel when they disagree. The adults need to know if you are troubled or worried so that they can work harder to get along.
3. **What if I don’t want my parents and foster parents to meet?**

When children (youth) must leave their families and move to a foster home, it is normal and important for the parents and foster parents to meet each other. This will give them a chance to exchange helpful information and begin to work together on your behalf. If your parents and foster parents are comfortable with each other, you will be able to stay better connected to your parents and relatives while you are in foster care. If you do not want your parents and foster parents to talk with each other, think about why that is and share those concerns with your social worker.

4. **Who will decide my visitation with my parents?**

Your case manager will be making most of the decisions about visitation in consultation with your parents, foster parents, and others who know you and your family, such as a therapist.

5. **Will my parents visit me in my foster home?**

At first, your visits with your parents will take place in the social services office. If the visits go well, the visits might take place in other locations. Your parents and foster parents may need some time to get to know each other and feel comfortable before visits take place at your foster home.

6. **Can my foster parents come with me to visit my parents in their home?**

At the point your case manager gives permission for visits to take place in your parents’ home, foster parents may go with you. This will happen if all the adults are comfortable and in agreement with the arrangement.

7. **I think my Mom is upset that I get along so well with my foster Mom. How do I deal with this?**

Your mother loves you and wishes that you were home. It may be difficult for her to share you with another mother. She may feel badly that you cannot return home right now. You cannot help how your mother feels. Let your case manager help you express your honest feelings to your mother and foster mother.
From the Case Manager’s Perspective:

1. Will the P2P meetings and other responsibilities of Partnership Parenting mean more work for me?

Organizing the P2P meeting, preparing the participants, facilitating the icebreaker meeting, and supporting the initial communication between the birth and foster families may be time consuming. However, it can greatly reduce the amount of time you spend later, as the go-between or in resolving conflicts. For example, foster and birth parents who are relating well might be able to make visitation arrangements without the direct involvement of the case manager.

2. What if the birth parent is emotional and volatile?

You will assess each case situation to determine the appropriateness of holding a face to face P2P meeting. With rare exception, birth parents will not pose a danger to foster parents at the P2P meeting. Experience shows that when treated with dignity and respect, birth parents respond in kind. Prepare the birth parents for the meeting, including what will be covered. If needed, help them formulate questions for the foster parents. If you have safety concerns, begin the contact through telephone calls or in writing. The important thing is that the contact occurs.

3. Do I have to attend the icebreaker meeting?

Yes. You will want to be there to facilitate the meeting and support the participants, but also to observe firsthand their interaction. You have a responsibility to help both families begin to open the lines of communication and establish a respectful relationship.

4. What if the birth parent and foster parent do not get along?

Some relationships are easier to form than others. Talk with each parent about why the relationship is not going well, and ways to improve it. Facilitate a discussion between the parents to share their thoughts and suggestions. Help them to take small steps and point out the benefits as they occur. If the birth parent is not open to forming a relationship or having open verbal communication, identify ways for the two families to communicate.

5. After the P2P meeting, may the foster family begin to supervise the visits between the child and birth parents?

The case manager will use good judgment in determining the supervision needed for visitation. The foster parents and birth parents will need to establish a relationship before visits are supervised by someone other than DFCS or its designee. This will take time. At the icebreaker meeting, talk with the parents about how they are most comfortable communicating. Revisit the nature and quality of their communication and relationship to determine whether visitation may be handled differently.
6. What happens to existing Foster to Adopt (FTA) parents?

Information on Family Centered Practice and Partnership Parenting will be shared with all current foster and foster to adopt parents. They will have the opportunity to identify how they want to serve going forward. FTA parents with adoptive placements will not be affected. In FTA placements where the child has a plan other than adoption, the parents will be expected to participate in Partnership Parenting with the child’s family. Ultimately, all parents will be re-assessed into the new categories.

7. How will this effect placement matching?

Families will be matched based on “Goodness of Fit.” Children and their families should be matched with matched based on foster parents’ strengths (such as locale or school zone), experience, training and ability to execute the principles of the program. The foster parent’s desired partnership participation should be reassessed at each placement (as warranted) or at least annually. Partnership Parenting also supports matching children with foster parents whose skill level meets their needs. The foster parent’s permanency expectations should also be compatible with the case plan for the birth family.

8. How will Partnership Parenting work with the Fostering Connections legislation which requires states to make ‘reasonable efforts’ to place siblings in the same foster, relative or adoptive home?

This will be an opportunity to move toward preparing Partnership Parents to embrace whole families in need of temporary support and care. The staff training component of Partnership Parenting should include matching foster families to birth families, rather than foster families to children, planning for and making sibling placements, and beds and slots vs. actual matching.

9. How many families will the Shared and Concurrent foster homes serve at any one time?

For Resource Parents, it would depend on the number of children the foster parent is ultimately willing to provide permanency (adoption) for, if it became in the children’s best interest. For Partnership Parents, it would have to be few enough (different parent sets) that the foster parent could reasonably manage Partnership Parenting expectations. There is no set number; the focus is on enhancing practices around placement matching.
**Instructions:**

This tool has been adapted for use as part of the information shared during the Parent to Parent Meeting (P2P). This tool is designed to help you and the Partnership Parents caring for your child share important information about your child's growth and development.

**Information to be completed by the parent / guardian.**

Fill in identifying information.

<table>
<thead>
<tr>
<th>My Child (Child's First Name or Nickname)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child's Name</td>
</tr>
<tr>
<td>Parent/Guardian</td>
</tr>
<tr>
<td>Home Phone</td>
</tr>
<tr>
<td>Address</td>
</tr>
</tbody>
</table>

The information contained is considered CONFIDENTIAL.

**Things my child does well:**

(Give examples of the things your child does well to include: physical activity, language, self-care, emotional and social. Examples could also include your child's problem solving ability, inquisitiveness, expression of thoughts, sharing ability, climbing skills, ability to use a spoon, fork, or drinking cup.)

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What my child likes and dislikes:

(Include favorite toys, objects, people, foods, and activities. Is fear associated with any dislikes? If so be sure to discuss those fears with the foster parent.)

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

Things I am working on with my child:

(What are the skills and activities you consider important for your child to learn and ones that you are working on at home or through school? These could include self-help skills, language skills, social skills, coordination, large muscle activities, and/or behavior skills.)

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

My child enjoys these physical activities:

(What are the activities your child most enjoys, such as circle games, climbing, running, or bike riding?)

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
My child has difficulty with these activities:
(Does your child dislike or have difficulty with certain activities? Is your child physically restricted from performing certain activities? Examples of this may include a dislike of playing games with balls, falling frequently when climbing, or a restriction from participating in strenuous exercise.)

My child will need the following equipment and/or routines:
(Does your child need eye glasses, a wheelchair, braces, crutches or other walking aids, a hearing aid, a helmet, a communication board, a nebulizer, special feeding utensils, and/or other adaptive devices? Does your child require any procedures or treatments?)

Things my child might need help with:
(Does your child need individual help or attention during certain activities? Does your child need help with tying shoes, help with cutting food, or encouragement to participate in group activities or to sit still, reinforcement of a behavior management program, or intermittent catheterization?)

Using the information gathered. The information shared is the beginning of ongoing communication between you, the child’s parent or guardian, and the Partnership Parents. This and other child specific information shared during the Parent to Parent Meeting (P2P) will be helpful as the partnership parenting relationship is established.

Adapted from “All About My Child,” developed by the Montgomery County, M, Department of Human Resources, Child Care Administration.