



Concurrent Planning for Timely Permanence

Concurrent planning is an approach that seeks to shorten a child or youth's stay in foster care by promoting more than one permanent family solution at a time. While returning a child to his or her family of origin is the primary case plan for a child in foster care, concurrent planning involves the parallel pursuit of an alternative permanency goal (e.g., adoption) that would best serve the child in the event reunification fails. By considering all reasonable options for permanency as soon as a child enters foster care, and pursuing those that would best meet his or her needs, concurrent planning works to advance the child's best interests and achieve timely permanence.

This bulletin outlines the development of concurrent planning practice, its use in casework practice today, and the important role of the court system. It provides information on how to evaluate a family for likelihood of reunification, how to prepare foster/adoptive families for concurrent planning, and State and local examples of successful concurrent planning.

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Brief History of Concurrent Planning Practice

Since the 1970s, child welfare agencies have sought to reduce the amount of time that children spend in foster care and to expedite permanency. One method developed at this time was the foster-adoptive program—also referred to as “legal-risk” or “at-risk” adoption—that placed children with preadoptive families while their parents retained legal rights. The preadoptive family would agree to adopt the child in the event parental rights were terminated (Rycraft & Benavides, 2011). In the 1980s, Lutheran Social Services in Washington State adapted this concept to develop the first concurrent planning model. This shifted the primary focus from adoption to a plan that works toward reunification and an alternative permanent family at the same time to expedite permanency. A key feature of the concurrent planning model is the high expectations and trust it places on preadoptive parents to support the child, the reunification efforts, and the family of origin (Edelstein et al., 2002; Rycraft & Benavides, 2011).

Two Federal laws have influenced concurrent planning as practiced today: the Adoption and Safe Families Act of 1997 (ASFA) (P.L. 105-89) and the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351). ASFA mandates shortened timelines for achieving permanency for children in foster care and stipulates that efforts to place a child in an adoptive home or with a legal guardian “could be made concurrently.” The Fostering Connections Act provides timeframes in which States must contact adult relatives of children entering foster care to notify them of their eligibility to become placement resources. Both statutes address the central tenets of concurrent planning, including the simultaneous pursuit of two permanency placements and a commitment to timeliness.

Child and Family Services Reviews

A review of archived Program Improvement Plans (PIPs)¹ from round 2 of the Child and Family Services Reviews (CFSRs) shows that 40 States, the District of Columbia, and Puerto Rico addressed the need to improve concurrent planning in their plans. The PIPs included the following measures to strengthen concurrent planning efforts (Children’s Bureau, 2011):

- Simultaneous reunification services and efforts to identify an adoptive resource family
- Open communication with birth parents about permanency and adoption
- Ability to quickly shift focus to the concurrent plan of adoption when reunification fails
- Concerted efforts to support concurrent planning

Challenges included the following:²

- Failure to practice formalized concurrent planning or inconsistent practice county to county
- Failure to complete concurrent planning activities early in case goal-setting
- Failure to involve birth and resource families in identifying or pursuing concurrent permanency goals, especially when reunification within 12 months of removal appears unlikely
- Need to develop internal policies and procedures to guide concurrent planning practice
- Lack of clearly delineated roles and responsibilities for concurrent planning stakeholders

¹ PIPs and other CFSR reports can be found at the Children’s Bureau’s web page, Reports and Results of the Child and Family Services Reviews (CFSRs), available at https://library.childwelfare.gov/cwig/ws/cwmd/docs/cb_web/SearchForm.

² Challenges are based on a review of the PIPs on the Children’s Bureau’s website (https://library.childwelfare.gov/cwig/ws/cwmd/docs/cb_web/SearchForm).

Since fiscal year (FY) 2000, the Children’s Bureau has awarded several rounds of discretionary grants to promote concurrent planning efforts that stem from ASFA and the Fostering Connections Act, including activities that seek to do the following:

- Develop practice models for implementing concurrent planning
- Increase the availability of concurrent and adoptive resource families to support the needs of a diverse population of children in care
- Facilitate concurrent planning through the Family Finding Model, which seeks to locate and engage family members of children in foster care

Specific examples of this work are included in the Examples From the Field section later in this bulletin.

Concurrent Planning Today

Current State statutes differ substantially in how they define concurrent planning and guide its implementation. Some States require concurrent planning under certain circumstances—in accordance with diligent recruitment efforts, for example, or they require the State agency to establish a concurrent planning program. As of November 2016, approximately 24 States and the District of Columbia allow, but do not require, concurrent planning. Twenty-four other States require concurrent planning under certain circumstances (Child Welfare Information Gateway, 2017b).

For more information, see Information Gateway’s *Concurrent Planning for Permanency for Children* from the State Statutes series (<https://www.childwelfare.gov/topics/systemwide/laws-policies/Statutes/concurrent/>).

Successful concurrent planning depends on clear goal setting and time limits in engaging with families whose children are in out-of-home care. It begins with a caseworker’s initial contacts with all involved parties and continues throughout the case. It involves the continuous reassessment of the likelihood of reunification or the possibility of an alternative permanent placement for a child, as well as ongoing engagement with the child’s family regarding progress toward reunification or concurrent planning.

Concurrent Planning Goals

The goals of concurrent planning include the following (CWDA, 2010):

- Expediting sustainable permanency through reunification, kinship care, adoption, or guardianship
- Minimizing a child’s separation from parents, relatives, and caretakers while maximizing attachment and permanent connections
- Keeping siblings together
- Empowering parents by involving them in alternative placement plans when reunification is not possible
- Ensuring a child’s first placement is the last placement
- Engaging a family’s relatives and support system immediately for potential placement and permanency plan discussions and actions
- Communicating with parents directly at intake and throughout a case regarding their children’s need for permanence, case plan progress, and the agency’s concurrent planning policy

Concurrent Planning Benefits

Apart from cutting down on the amount of time a child spends in out-of-home care, the benefits of concurrent planning include the following (CWDA, 2010; Pennsylvania Child Welfare Resource Center, 2010):

- Quicker resolution and permanency for the child
- Reduced long-term court involvement
- Full disclosure/direct communication and clarity between the agency, birth parents, resource parents, the child, and kin regarding the plan for permanency, case plan time limits, and related consequences
- Fewer placements for a child in the event reunification fails
- Involvement of family members in identifying potential kinship placement options
- Ongoing relationship between birth parents and child’s caregivers seems to support child well-being

The National Center for Child Welfare Excellence (NCCWE) at the Silberman School of Social Work at Hunter College developed a toolkit for concurrent planning that lists the essential components of the practice and provides an online resource for States and Tribes with programs, practices, publications, and policies focused on concurrent planning. The toolkit, *A Web-Based Concurrent Planning Toolkit: The Core Components of Concurrent Planning*, is available on the NCCWE website at http://www.nccwe.org/toolkits/concurrent-planning/core_components.htm.

For more information on concurrent planning practice, visit the Information Gateway web section at <https://www.childwelfare.gov/topics/permanency/planning/concurrent>.

The Role of the Courts

The Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) entrusts juvenile courts with oversight of permanency planning and decision-making for children in foster care, and ASFA sets time limits and establishes juvenile and family court judges as the gatekeepers of foster care cases. These judges play an important role in introducing the subject of concurrent planning at the first hearing, giving courts the primary responsibility for ensuring that agencies implement it within ASFA timeframes (Gatowski, Miller, Rubin, Escher, & Maze, 2016; Hudson, 2017).

Concurrent planning begins as soon as the court and child welfare agency become involved with a family. At each hearing, the judge should inquire about the status of reasonable efforts³ to achieve reunification, as well as the well-being of the child (Hudson, 2017). Many courts are not able to meet these demands and the associated delays in legal proceedings can slow permanency efforts. It is also common for cases of child abuse and neglect to have related cases pending in other courts or before other judges, further slowing down the permanency process. It is best when the court system can arrange to

³ The term *reasonable efforts* refers to activities of State social services agencies that aim to provide the assistance and services needed to preserve and reunify families (Child Welfare Information Gateway, 2016). It implies that agencies provide services in a timely manner to achieve the case plan goal and there are no unnecessary delays in services. The judge determines whether reasonable efforts have been made (Hudson, 2017).

have related cases presided by a single judge or, when that is not possible, coordinate with other court officials to facilitate orders that do not conflict (e.g., not scheduling case hearings at the same time) and that all parties can support (Gatowski et al., 2016).

The following resources prepared by the National Council of Juvenile and Family Court Judges, in partnership with the Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-CT), may help judges, attorneys, and other related court and child welfare professionals achieve timely permanency for children in the child welfare system:

- *Key Principles for Permanency Planning for Children* (<http://www.ncjfcj.org/sites/default/files/Key%20Principles%202011.pdf>)
- *Technical Assistance Bulletin: Questions Every Judge and Lawyer Should Ask About Infants and Children in the Child Welfare System* (http://www.ncjfcj.org/sites/default/files/NCJFCJ_ZeroToThree_Questions_Final.pdf)
- *Bench Card: Questions Every Judge and Lawyer Should Ask About Infants and Children in the Child Welfare System* (http://www.ncjfcj.org/sites/default/files/NCJFCJ_ZeroToThree_Benchcard_Final.pdf)

The QIC-CT provides training and technical assistance to further develop and expand research-based infant-toddler court teams based on the Safe Babies Court Teams (SBCT) approach, which features concurrent planning as a core component. SBCT membership is by open invitation and may include child welfare agency staff, local government agency leaders (e.g., public health, Medicaid, or housing authority officials), foster parent organizations, primary health-care providers, dentists, attorneys, court-appointed special advocates and guardians ad litem, mental health professionals, Indian child welfare agencies, law enforcement, substance use disorder treatment providers, early intervention specialists, Early Head Start and child care providers, domestic violence service providers, higher education representatives, faith-based groups, child and family advocates, court improvement program staff, State and local legislators, and volunteer community leaders.

To facilitate concurrent planning efforts, the QIC-CT has prepared concurrent planning sample scripts for judges, attorneys, social workers, and other providers (<http://www.qicct.org/sites/default/files/CP%20Scripts.pdf>). For more information, see <http://qicct.org/safe-babies-court-teams>. Families involved with the child welfare system can refer to *Understanding Child Welfare and the Courts* (<https://www.childwelfare.gov/pubs/factsheets/cwandcourts>) for additional information on the court system, including how to prepare for court hearings and frequently asked questions about court proceedings.

Safe Baby Court Teams

The Tulsa County Safe Babies Court Team (Tulsa SBCT), launched in 2015, seeks to ensure that every child's first placement is also the last when reunification with the birth family is not possible. This effort relies on the identification of prospective foster/adoptive parents who are willing to serve as mentors and a support team for the child's birth parents while reunification is pursued (S. Beilke, personal communication, September 13, 2017). In Oklahoma, where much of the foster care system is privatized, Tulsa SBCT cultivates relationships with the agencies responsible for recruiting and supporting foster families. Tulsa SBCT provides training, facilitates foster parent support groups, and explains concurrent planning in a way that engages birth parents and builds trust. Unlike traditional court teams that get involved in child welfare cases at adjudication, Tulsa SBCT gets involved with child protective services agencies as soon as a child is removed from the home to immediately explore the possibility of reunification and other appropriate permanency options (e.g., kinship care).

The SBCT approach includes an innovative preremoval conference where a trained facilitator leads a meeting with the birth parents before a child is removed from the home. The preremoval conference seeks to create a welcoming tone and assure birth parents that the common goal is to reunify them with their child. The meeting typically includes anyone the birth parents consider a part of their support network, a child welfare representative, and the foster care caseworker. Before court hearings and case reviews, the birth parents, foster parents, and other members of the SBCT, including a therapist, have monthly family team meetings to discuss the family's progress and other issues with the case. The preremoval conference and family team meetings help the birth and foster parents build trust and demonstrate whether the foster family can meet the child's needs and is willing to adopt the child if reunification is not possible. Another important SBCT component is the availability of, and collaboration with, therapists who are ready to step in and navigate any issues that may arise with the child, birth parents, or foster/adoptive family.

For more information, visit the website at <http://www.qicct.org/safe-babies-court-teams>, or contact court team coordinator, Sarah Beilke, L.C.S.W., at 918.513.2286.

Assessing Reunification Probability and Preparing Families

Concurrent planning requires caseworkers to conduct careful assessments to evaluate the probability of family reunification, while also preparing the foster/adoptive family for the likelihood of both reunification and adoption.

Evaluating the Likelihood of Reunification

Concurrent planning models frequently use an assessment checklist to identify families who are unlikely to reunify—using tools that assess family strengths while at the same time checking for family dynamics or circumstances that make family reunification unlikely. Such an approach strives to balance a child’s need for permanency with the recognition that parents have the capacity for change. Under ASFA, reasonable efforts for reunification are not required when the court has determined certain circumstances would make it unsafe for a child to return to the family. Such circumstances are often described as “poor prognosis indicators” in assessment checklists and other tools used to assess the probability of reunification. Poor prognosis indicators recognized by several States include the following parental characteristics or history (Child Welfare Information Gateway, 2016):

- Prior child abuse or neglect
- Felony conviction for murder or sexual assault of a child
- Rights to a sibling involuntarily terminated
- Mental illness
- History of substance use and refusal to seek treatment or failure to respond to treatment
- Human trafficking conviction
- Demonstrated lack of interest in reuniting with the child

Several States have developed prognostic tools and guidelines for differential assessment that look at a variety of family strengths and needs. Examples include the following:

- Kansas’ *Concurrent Planning Guide*, which identifies children in need of concurrent planning in the Kansas foster care system based on a family assessment (http://www.dcf.ks.gov/services/PPS/Documents/PPM_Forms/Appendices/Appendix_3F.pdf)
- Kentucky’s Poor Prognosis Indicators, which include prior abuse, dangerous lifestyle, and a history of involvement with child protective services (<http://manuals.sp.chfs.ky.gov/Resources/Related%20Resources%20Library/High%20Risk%20Indicators%20Which%20May%20Prevent%20Reunification%20Worksheet.doc> [Word document])
- Massachusetts’ *Permanency Planning Policy*, which includes a permanency planning differential assessment tool to help determine the prognosis for reunification based on family strengths and other indicators (<http://www.mass.gov/eohhs/docs/dcf/policies/permanency-planning-policy.pdf>)

For additional information on reunification, including strategies for preventing reentry into foster care and promising practices being implemented by States and localities, see *Supporting Successful Reunifications* (<https://www.childwelfare.gov/pubs/supporting-successful-reunifications/>) or the Information Gateway webpage on the topic at <https://www.childwelfare.gov/topics/permanency/reunification>.

Child welfare professionals can refer parents of children in foster care to *Reunification: Bringing Your Children Home From Foster Care* (<https://www.childwelfare.gov/pubs/reunification>) for a general overview of the reunification process.

Preparing Foster/Adoptive Families

Well-prepared foster/adoptive families help ensure that concurrent planning is a success. Foster families who agree to take part in concurrent planning should be ready for all possible permanency outcomes and be aware of their ability to manage anxiety, stress, and loss. They should also assess what supports they may have available from families and friends. Some families considering concurrent planning support work may decide they are unwilling to live with the ambiguity of not knowing whether a child in their care will ultimately return to the birth family, be adopted by kin, or be adopted by them (North American Council on Adoptable Children [NACAC], 2017).

Children who have been separated from their parents often experience profound losses, including loss of family, possessions, community, sense of safety and security, and sense of self (Resnick, 2011). Foster/adoptive parents are expected to bear the emotional burden of the children in their care and may need help comforting a child and managing related challenges. To prepare for this, many prospective foster/adoptive families benefit in learning from experienced resource families. The following are tips from experienced resource families for prospective foster/adoptive families:

- **Meet the birth parents.** Establish a relationship with the birth parents as soon as possible. It is important to show respect and genuine concern and understand that families often have different life experiences.
- **Mentor the birth parents and participate in visitation.** Prepare to participate in the visitation plan, coordinated by the social services agency, and serve as a mentor for the birth parents. Be willing to have contact with the child's extended family also.
- **Remember that this is a foster placement.** Keep in mind that in most cases the child will be reunited with the birth family. Foster parents are expected to support and work with the birth family and agency on family reunification plans (Resnick, 2011).
- **The juvenile court will determine the best interests of the child.** Only when the court terminates parental rights are foster parents considered as prospective adoptive parents who can move forward to finalize plans. There are no guarantees this will happen (Resnick, 2011).
- **There is grief and loss for concurrent planning families.** This is inherent in the foster care system. Despite the well-established fact that reunification is the most common permanency case plan goal for children in foster care (U.S. Department of Health and Human Services, 2017), many resource families experience feelings of grief when a child they have loved and nurtured leaves their home (Hebert, Kulkin, & McLean, 2016).
- **Identify potential respite care.** Find someone willing to provide respite care even if not immediately necessary. Extended family or friends asked to provide respite care should attend trainings with the resource parents.

Helping Parents and Children With Loss and Grief

- A training to address the emotional needs of foster caregivers, *A Special Kind of Grief: A Foster Child Leaves the Home*, developed at Southeastern Louisiana University, informs child welfare workers how to listen to foster parents and ask about their feelings following a removal. It also encourages foster parents to connect with other foster parents who can identify with their feelings. The training has four goals (Hebert, et al., 2016):
 - Ensuring that participants understand basic theories of grief and loss
 - Emphasizing that resource parents deal with grief and loss when a child is removed, whatever the reason
 - Showing that there may be hurdles to a caregiver's ability to grieve (based on theories of ambiguous loss and disenfranchised or anticipatory grief)
 - Making child welfare workers aware that their relationship with foster caregivers and their ability to help them with the grief process can affect the retention of resource families
- As part of a 5-year Children's Bureau diligent recruitment grant, New Mexico's Children, Youth and Families Department partnered with the Adoption Exchange and La Familia in 2015 to implement Project Valor in several counties to provide grief and loss support to foster families. The monthly support groups help resource parents heal from their losses, remain committed to foster parenting, and help children process their own grief. A follow-up survey shows that respondents most valued sharing and hearing from others regarding their individual and collective experiences of loss and grief. Find more information on Project Valor on the NACAC website (<https://www.nacac.org/resource/project-valor/>).

To learn more about preparing foster/adoptive families for concurrent planning, visit the NACAC website (<https://www.nacac.org/resource/concurrent-planning>).

Examples From the Field

Evidence shows that concurrent planning can improve outcomes for children in out-of-home care. Following are examples from the field:

Denver, Colorado: From 2008 to 2012, Denver Human Services implemented a 5-year Children’s Bureau diligent recruitment grant to help increase the number of families available to care for children removed from their homes. The project included concurrent planning as one of its primary components and resulted in significantly expedited permanency times from an average of 50 months following home removal to an average of 27 months. In its first year, only 6 percent of the children who participated in permanency roundtables achieved legal permanency. As of April 2012, 20 percent were achieving legal permanency, with others moving toward permanency or establishing permanent connections. For more information, see <https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/families/denversvillage/>.

Ramsey County, Minnesota: The Ramsey County Community Human Services Department was the recipient of a Children’s Bureau diligent recruitment grant that promoted concurrent planning while seeking to increase the number of foster and adoptive homes for African-American and Hispanic children and youth ages 12 and older. Data indicate that the percentage of families referred to adoption agencies (who began the home-licensing process) rose from 9.8 percent during the first year to 26.3 percent by the fourth year. For more information, see <https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/families/rasmeyco/#tab=summary>.

Illinois: The Recruitment and Kin Connection Project, a 5-year Children’s Bureau diligent recruitment grant launched in 2010 as part of a Family Finding intervention, involved a rubric designed to assess the compliance of concurrent plans with Federal and State guidelines. The group that received the Family Finding intervention services found nearly 75 percent more relatives than the control group and also found many family members or individuals who were significant figures in the child’s life (Leon, Saucedo, & Jachymiak, 2016). For more information, visit the Children’s Bureau Discretionary Grants (CBDG) Library (https://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants/GrantHome) and search for Grant #90CT0156 (Initiative to Reduce Long-Term Foster Care/Permanency Innovation Initiative – PII/HHS-2010-ACF-ACYF-CT-0022).

California: The California Partners for Permanency (CAPP), a Children’s Bureau Permanency Innovations Initiative grantee (2010–2015), was developed to reduce the foster care duration for children vulnerable to long-term stays and featured specific concurrent planning practices and procedures. With community and Tribal partners, CAPP grantees developed the Child and Family Practice model, which included a Family Teaming approach. CAPP met its goal of improving permanency outcomes⁴ and established effective, compassionate ways of interacting with birth and foster parents while meeting the ASFA concurrent planning timeframes and achieving child safety and well-being. The Child and Family Practice model is now used in all counties across California as a model of helping children achieve permanency. For more information about CAPP, see <https://www.acf.hhs.gov/cb/resource/pii-capp>.

⁴ In two of five participating counties, children served by the practice model achieved permanency within 12 months at a 3 percent higher rate than historically matched children in the same county. In one county, CAPP-served children were placed with a permanent family within 12 months at a 9 percent higher rate. In another county, Hispanic children were placed into a permanent family at a 5 percent higher rate (This information was retrieved from a CAPP document titled *The Journey to Outcomes: CAPP Evaluation Overview*).

Making Child Safety the Priority

Child welfare professionals often walk a fine line between supporting reunification for the families they serve and the need to distinguish adoption/guardianship as a child-only plan. To address this dilemma, California Partners for Permanency (CAPP) agencies have focused their reunification and adoption/guardianship plans on child safety. This helps parents understand the importance of child wellness and safety needs and the reality that adoption or guardianship may be necessary. CAPP's safety framework is supported by a comprehensive concurrent planning training curriculum called Pathways to Permanence. Pathways to Permanence is hosted by the University of California, Berkeley School of Social Welfare (<https://calswec-archive.berkeley.edu/concurrent-planning-multiple-pathways-permanence>) and was developed by the California School of Social Work Education Center. Its advanced concurrent planning curriculum is for child welfare professionals, attorneys, care providers, and other community partners and comprises four components: modules for leadership, concurrent planning fundamentals, concurrent planning skill building, and concurrent planning partnerships.

For more information, contact Jessica Carrillo of Fresno County Department of Social Services at carrijb@co.fresno.ca.us or at 559.600.2355.

New Mexico: The Children, Youth & Families Department (CYFD) received a 5-year diligent recruitment grant in 2010 to enhance resource family recruitment of diverse populations and promote concurrent planning. To do so, CYFD developed a model called Partnering for Permanency to improve placement permanency in five targeted counties. The Partnering for Permanency project included the following:

- A concurrent planning curriculum that featured a risk-based assessment model; collaboration across child welfare staff, the courts, and service providers; written agreements and documentation; and recruitment, training, and retention of dually licensed resource families
- Training sessions and support groups for CYFD staff and concurrent foster parents to address feelings of grief and loss
- The incorporation of key concurrent planning concepts in trainings for family members and foster/adoptive parents
- A measurement of family participation in model components, outcomes for children in concurrent planning homes, and family satisfaction
- Digital stories about successful concurrent planning experiences to share with concurrent foster parents and staff

More information is available on this grant (Diligent Recruitment of Families for Children in the Foster Care System [HHS-2010-ACF-ACYF-CO-0012/Grant #90CO1050](https://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants/GrantHome)) through the CBDG Library (https://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants/GrantHome).

Concurrent Planning Training

Concurrent planning requires ongoing engagement with the family, open communication, and case planning with the goal of timely permanency. Several training resources are available to help prepare child welfare professionals to work collaboratively with children, families, and all systems involved in the concurrent planning process:

- The Spaulding Institute training course in concurrent planning assists child welfare professionals in balancing efforts toward family reunification with ongoing work toward an alternative permanency plan (<https://spaulding.org/professionals/spaulding-institute/training-curricula/concurrent-planning/>). Trainings teach professionals how to manage risk and support birth families, the importance of recruiting, developing, and supporting foster/adoptive homes, how to perform culturally respectful assessments, and more.
- The California Social Work Education Center's (CalSWEC) online course, *Concurrent Planning: Multiple Pathways to Permanence*, (<https://calswec-archive.berkeley.edu/concurrent-planning-multiple-pathways-permanence>) educates child welfare staff, attorneys, providers, and others about concurrent planning. The curriculum includes a leadership component and information on the essentials of concurrent planning. Participants learn to recognize best-practice models for concurrent planning and achieving timely permanency.
- CalSWEC's Common Core Online for Social Workers features an eLearning module on concurrent planning in its Engagement Block Online (<https://calswec.berkeley.edu/common-core-online-social-workers/engagement-block-online-elearning-downloads>).
- The Children and Family Services Training Center at the University of North Dakota offers the PRIDE Core Digital Curriculum, which features a Promoting Permanency Outcomes section on concurrent planning. Training exercises help child welfare professionals identify the challenges of concurrent planning and strengthen the supports needed to carry out the process (<http://und.edu/centers/children-and-family-services-training-center/pride/curriculum.cfm>).

Conclusion

Concurrent planning is a tool to help expedite permanency through the parallel development of an alternative solution for cases where returning to the family of origin might not be an option. Such an approach honors a child's attachments and best interests while also acknowledging that reunification is not always the safest or best option. When concurrent planning is well-supported and implemented effectively, it can provide an efficient and compassionate approach for helping birth parents and resource parents work together toward the best interests of the child and expedite permanency.

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