Kinship Caretakers

How to Navigate Iowa's Child Welfare System

ifapa
a resource for families
Iowa Foster & Adoptive Parents Association

Funded By a Polk County Decategorization Grant
The Iowa Foster and Adoptive Parents Association (IFAPA) is a non-profit organization serving as a resource to foster, adoptive and kinship families in Iowa. Membership with IFAPA is free for Iowa’s foster, adoptive and kinship families. IFAPA’s mission is to empower, support and advocate for foster, adoptive and kinship families in Iowa. IFAPA provides training, peer support and resources to promote safety, permanency and well-being for Iowa’s children.

About this publication
The Iowa Foster and Adoptive Parents Association (IFAPA) developed this booklet to assist Iowa kinship families considering an Iowa Department of Human Services (DHS) placement of a child. Funding for this booklet was provided by Polk County Decategorization. It was developed in cooperation with Iowa Department of Human Services and Polk County Judge Carol Egly, chair of the Polk County Model Court Kinship Project.

Note to Non-Relative Caretakers
This booklet is written for kinship caretakers who are biologically related to the child. The Department of Human Services (DHS) provides Caretaker Family Investment Program (FIP) payments to relatives caring for eligible family members. DHS rules define which types of relatives can receive caretaker FIP for a child. A non-relative caretaker will have a difficult time receiving financial assistance for the child’s care. However, as noted throughout the booklet, some benefits are based on the caretaker’s eligibility for benefits, not on the relationship with the child.

When DHS has legal custody of the child a non-relative caretaker may apply to become a licensed foster parent for the child. If the child’s parental rights are terminated the non-relative caretaker may apply to become an adoptive parent for the child. Additional information and eligibility requirements are listed in the Foster Care and Adoption sections in this booklet. The Kinship Care and Family Involvement with DHS and Juvenile Court section is applicable to relative and non-relative caretakers.

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Funded By a Polk County Decategorization Grant
**Introduction**

A number of grandparents, other relatives and friends find themselves serving as caretakers for children whose parents are unable to care for them. Sometimes the arrangement (referred to as “kinship care”) is an informal, private arrangement between the parents and the caretakers; in other situations, the Iowa Department of Human Services (DHS), is involved. This booklet is designed to help kinship caretakers—including grandparents, aunts and uncles, and others who ‘take-in’ children they care about—to work effectively with Iowa DHS and juvenile court.

Working with DHS and juvenile court can be confusing for kinship caretakers who are trying to provide the best care they can for children whose parents cannot care for them. It may be helpful to keep in mind that DHS social workers and other provider staff are following Federal and State requirements to ensure the safety and well-being of all children. The DHS social worker may be the person who initially approaches a grandparent, other relative or person known to the child and asks that person to take care of the child. In other situations, the family may contact the DHS or juvenile court for help.

**Kinship Care and Family Involvement with DHS and Juvenile Court**

The Iowa Department of Human Service’s (DHS) involvement in kinship care situations varies from case to case, depending on the child’s age, safety needs, the legal custody, and the child’s legal situation. If children, who are Native American are involved, the Federal and Iowa Indian Child Welfare Acts must be followed.

In Iowa DHS cases where the child has been removed from his or her parents because a parent has been accused of child abuse, neglect, or abandonment, the following steps may occur:

- The DHS Child Protective Assessment worker (CPA) investigates the report of child abuse, neglect, or abandonment.
- If the DHS Child Protective Assessment worker (CPA) finds the child at risk or in danger, they may decide to contact the court to obtain an ex parte court order to remove the child from their home for the child’s own safety. The child may be placed with a kinship caretaker, who will then have physical custody.
- There is an emergency removal hearing before a judge. The DHS Child Protective Assessment Worker (CPA) presents evidence for the legal finding of abuse, neglect and abandonment. The court determines whether to temporarily allow the child to be placed elsewhere, such as with the kinship caretaker, until the next court hearing which is called the adjudicatory hearing.
- Within 30 days of the removal of the child, DHS will send a Notice To Relatives form to the child’s grandparents, aunts, uncles or other relatives identified by the child’s parents asking if they are willing to be considered for placement or provide assistance or support for the child.
- At the adjudicatory hearing the judge determines whether there is clear and convincing evidence of child abuse, neglect, or abandonment.
- If the judge determines that the child must continue to live outside of the parental home, the parties may immediately agree to a dispositional order, though generally a dispositional hearing is held weeks later.
- At the dispositional hearing the judge determines where the child should live for the time being and who will have temporary legal custody of them. For instance, the child may be placed in the custody of DHS (legal custody) for purposes of foster care or placed with a kinship caretaker (physical custody) subject to DHS supervision. Most frequently, legal guardianship of the child remains with the parent at this point in the proceedings.
- If a permanency hearing has not been held within six months of the dispositional hearing there will be one or more review hearings. The judge will determine how the parents are progressing with their case plan goals (e.g. being substance free, having stable housing and employment, no violence in the home, able to provide parenting free from abuse or neglect, etc). During this period the parents will be referred to services to assist them in correcting the situation that led to the child’s removal. These services may include substance abuse treatment, therapy, supervised parenting time, etc. The child may also need services such as therapy. The child’s well-being will be monitored.
• As a kinship caretaker you may be asked to support the child's family in many ways. One of the most significant supports may be to facilitate contact between the child and the parents—frequently with restrictions set up by DHS or juvenile court. In many situations this may be a difficult task. You need to communicate your concerns with the professionals involved with the family, including any reservations about what you are asked to do. During this period, professionals may also be exploring with the kinship caretaker whether they are willing and able to commit to providing a permanent home for the child if conditions do not change sufficiently for the child to be returned home.

• DHS may revise case plan goals at any time based on changing circumstances. At any time during this period, juvenile court may enter an order modifying the child's placement.

• In addition to the review hearings, a permanency hearing must be held within 12 months of the date the child was removed from the home. At the hearing, the judge will make decisions about a child's permanent living arrangement.

• At the permanency hearing, the law requires juvenile court to enter one of the following orders if the child can not safely be returned home that day.

• The juvenile court judge may order the County Attorney to file a petition to terminate the parent-child relationship so the child may be adopted [note: the petition to terminate rights may be filed, even before the court enters this order, by a number of persons authorized by statute]. The statutory requirements establish adoption as the preferred permanency option.

• Juvenile court may order additional time for reunification, but this is severely restricted by Federal and State law. The finding must be made that the need for the removal of the child from the home will likely no longer exist within six months or by the time set by the court.

• If juvenile court does not order the filing of a termination of parental rights petition or grant the extension, the court has several other options. These include: transferring guardianship and custody of the child to a suitable person; transferring sole custody of the child from one parent to another; or transferring custody of the child for the purpose of long-term care; or (and only if the DHS has documented a compelling reason that it is not in the child's best interest to enter one of the above orders) ordering “another planned permanent living arrangement” for the child.

Even if a parent's rights are not terminated by juvenile court, permanency is intended to identify the home in which the child shall reside until they are 18. After the entry of a permanency order, the child cannot be returned to the care of a parent over the objection of the child's attorney or Guardian Ad Litem (GAL) unless, after a hearing, the court finds that returning the child to a parent at that point, is in the child's best interest. Though rights are not terminated, the court may still restrict contact by the parent with the child based on the child's best interests.

• In most circumstances in which a child cannot timely be returned home, there will be a termination of parental rights hearing. Under Federal and State law, there are specific maximum times for parents to meet the goals in the child's case plan in order for their child to return home. For a child under four years of age this hearing will generally occur after the child has been out of a parent's custody for a maximum of six months. For a child who is older than four years of age, this hearing will generally occur when they have been out of their parent's custody for a maximum of 12 months. When the parental rights of a child are terminated in court, the parents no longer have any legal relationship to the child, and the child may be legally adopted by someone else. There is an exception in the law which permits the court to decide not to terminate a parent/child relationship if that is in the child's best interests and the child is in the legal custody of a relative.

Each court hearing may involve a number of individuals with an interest in the child. This may include parents, DHS caseworkers, extended family and friends, foster parents, attorneys, service providers, therapists, Court Appointed Special Advocates (CASA), medical people, and the child. It is normal for multiple attorneys to be present representing different parties in the case. The child may be represented by a court appointed attorney and/or a Guardian Ad Litem (GAL) who represents his or her best interests. DHS is represented by the County Attorney. A family may have multiple children who do not all have the same parents. In that situation each parent may be present and represented by an attorney. While the courtroom may get crowded, it is still important for the kinship caretaker to be present at the court hearings.
All caretakers have the right to attend court hearings. You should receive a notice of scheduled hearings and if you find that you have not, you should notify the court. Even if you are not asked to testify, a caretaker has the right to address the court. Sometimes it will seem as if you may be the only one in the room who does not have a lawyer. If important information has not been given to the court respectfully ask to be heard. It is important for caretakers to give their view of the situation and to have a full understanding of the court's decisions. If the child is attending the court hearing the caretaker will be able to provide vital support to the child.

Children may come to live with their grandparents, relatives or persons otherwise known to the child in a number of ways, and only some of these ways involve the child welfare system. The following describes the five main types of kinship care persons can provide children: voluntary—which includes informal kinship care (without court involvement) and formal kinship care (with court involvement); legal guardianship; foster care; subsidized guardianship; and adoption.

Types of Kinship Care

Children may come to live with their grandparents, relatives or persons otherwise known to the child in a number of ways, and only some of these ways involve the child welfare system. The following describes the five main types of kinship care persons can provide children: voluntary—which includes informal kinship care (without court involvement) and formal kinship care (with court involvement); legal guardianship; foster care; subsidized guardianship; and adoption.

Voluntary Kinship Care

Situation
You agree to care for a child in your home.

Voluntary kinship care can be an agreement made between the parents and other family members informally, without any involvement from the juvenile court. DHS may or may not be involved in an informal voluntary kinship care situation. Voluntary kinship care can take place formally with DHS and/or juvenile court involvement. If DHS and juvenile court are involved with the child’s placement, they may request the child live with relatives for a certain period of time or until a parent is able to care for the child.

The Child’s Legal Situation
If the child is placed informally with kin without DHS or juvenile court involvement, legal custody of the child remains with the parents, and the parents can legally take back the child at any time. Legal custody refers to the legal right to make decisions for the child. Parents have legal custody of a child unless they voluntarily give custody to someone else (e.g., the parent is in the military) or a court takes this parental right away and gives it to someone else. If the legal custody of the child is placed with DHS by a juvenile court order, the child cannot return to a parent until the court order is modified to return legal custody to the parent.

What to Expect From DHS
If DHS is considering you for a formal kinship care placement of a child, they will assess your safety, protective capacity, and ability to manage the changing family roles. DHS requires the following activities for kinship caretaker placements:

- Home visit before placement or within 24 hours in case of an emergency placement to assess the physical safety of the child and placement, and identify all persons residing in the home.
- Complete local law enforcement and sex offender registry checks on all adults living in the home prior to placement.
- Complete child abuse checks on all adults living in the home. Adults living in the home may be fingerprinted if the department determines that a national criminal history check is warranted.
- Criminal history checks on all adults living in the home. For an emergency placement, a signed statement that indicates all adults in the home do not have a criminal record.
- Frequently a potential caretaker is asked to submit a sample for a drug screen.
The DHS social worker will evaluate and assess whether the kinship caretaker:

- Has demonstrated the ability to protect the child in the past while under similar circumstances and family conditions.
- Has adequate resources, skills, knowledge, and the ability to fulfill the care giving responsibilities; and meet the developmental needs and any exceptional needs of the child.
- Has a relationship with the child and the ability to protect, nurture and care for the child for an extended period of time.
- Has the ability to manage the changing roles and responsibilities of kinship placements to support positive family relationships.
- Has a need for additional support or information to safely care for the child.

**DHS Contact Information**

If you are applying for financial assistance, medical coverage or childcare assistance contact your local DHS office to apply. If you are applying for protective childcare or childcare for the special needs of the child, contact the child’s DHS social work case manager. The DHS office serving your county is listed in the State or County Government section of your local phone book, under "Department of Human Services" or just "Human Services" or on the DHS website at www.dhs.iowa.gov. You may also contact the Department’s Field Operations Support Division by calling 515-281-6899 or 1-800-972-2017.

**Financial Assistance**

If the kinship caretaker is a relative to the child, the caretaker may be eligible for Family Investment Program (FIP) payments. DHS rules define which types of relatives can receive caretaker FIP for a child. If you apply at your local DHS office for FIP only for the child, your income is not considered, there is not a work requirement for you, and there is no time limit on receiving caretaker FIP. However the child’s income (social security, child support, etc.) is considered in determining eligibility and the amount of the payments. If you apply for FIP for yourself as well as the child, your income will be considered and FIP work requirements and time limits will apply.

See page 11 of this booklet for additional information on DHS assistance program eligibility.

**Medical Coverage**

The child may be eligible for Medicaid. The caretaker’s relationship to the child is not an eligibility factor and the caretaker does not have to be biologically related. This program does not depend on the caretaker’s income or resources; however the child’s income is an eligibility factor (social security, child support, etc.).

A caretaker may be eligible for Medicaid if they meet financial eligibility. The caretaker must be a specified relative to be eligible for Medicaid. The kinship caretaker’s income is considered towards their eligibility as a needy caretaker but has no effect on the child’s eligibility.

**Child Care**

The child may qualify for childcare assistance through the DHS Child Care Assistance Program. The caretaker’s relationship is not an eligibility factor and the caretaker does not have to be biologically related. The caretaker’s income is not considered when determining eligibility for this program. The caretaker must have a need for service such as being employed 28 or more hours per week, attending academic or vocational training on a full time basis, have a temporary medical issue that makes the caretaker unable to care for the child, or seeking employment.

**The Kinship Caretaker’s Rights**

The parents make decisions regarding the child’s care. However, you can ask the parents to sign a notarized letter of permission to seek medical care or to authorize permission to treat the child. If the child will be attending a school different from their current school, ask the parents to assist you in getting the child enrolled in school by having them sign for the child’s school records to be transferred to the new school. The caretaker would have physical custody of a child placed in their home. Physical custody refers to where the child lives. The caretaker is responsible for the child’s well-being. This includes the responsibility to parent the child, feed and clothe them, help them with their homework, and take care of them when they are sick.
The Parent’s Rights
If the child is placed informally with relatives without DHS or juvenile court involvement, legal custody of the child remains with the parents, and the parents can legally take back the child at any time. If the legal custody of the child is placed with DHS by a court order, the parent would not have legal custody of the child until custody is returned by a juvenile court order. The child’s parents may be ordered to pay child support, which will go to the state if the child is receiving public assistance.

Legal Guardianship

Situation
You agree to care for a child in your home. A judge has awarded you legal guardianship through a court order. The parent’s rights have not been terminated.

The Child’s Legal Situation
When a grandparent or other relative becomes the child’s legal guardian, legal custody is transferred from DHS to the relative by a court order; therefore, in most circumstances there is no further involvement by DHS. In guardianship arrangements, parental rights are not terminated. Thus, the grandparent or other relative who becomes a child’s guardian has legal and physical custody to act as the child’s parent and make decisions about the child, but the parent often retains some visitation or other rights. Guardianship is especially appropriate if the child is older and wants to maintain close ties with their parents, or if the grandparent or other relative caretaker prefers not to have the parents’ rights terminated (as in adoption) but needs to establish a permanent legal arrangement with the children in order to make education, healthcare, and other decisions for the child.

What to Expect from DHS
DHS would not be involved in the child’s case unless ordered by the court.

DHS Contact Information
If you are applying for financial assistance, medical coverage or childcare assistance contact your local DHS office to apply. If you are applying for protective childcare or childcare for the special needs of the child, contact the child’s DHS social work case manager. The DHS office serving your county is listed in the State or County Government section of your local phone book, under "Department of Human Services" or just "Human Services" or on the DHS website at www.dhs.iowa.gov. You may also contact the Department’s Field Operations Support Division by calling 515-281-6899 or 1-800-972-2017.

Financial Assistance
If the caretaker is a relative to the child, the caretaker may be eligible for Family Investment Program (FIP) payments. DHS rules define which types of relatives can receive caretaker FIP for a child. If you apply at your local DHS office for FIP only for the child, your income is not considered, there is not a work requirement for you, and there is no time limit on receiving Relative caretaker FIP. However the child’s income (social security, child support, etc.) is considered in determining eligibility and the amount of the payments. If you apply for FIP for yourself as well as the child, your income will be considered and FIP work requirements and time limits will apply.

See page 11 of this booklet for additional information on DHS assistance program eligibility.

Medical Coverage
The child may be eligible for Medicaid. The caretaker’s relationship to the child is not an eligibility factor and the caretaker does not have to be biologically related. This program does not depend on the caretaker’s income or resources; however the children’s income is an eligibility factor (social security, child support, etc.).

A caretaker may be eligible for Medicaid if they meet financial eligibility. The caretaker must be a specified relative to be eligible for Medicaid. The kinship caretaker’s income would be considered towards their eligibility as a needy caretaker but has no effect on the child’s eligibility.
Child Care
The child may qualify for childcare assistance through the DHS Child Care Assistance Program. The caretaker’s relationship is not an eligibility factor and the caretaker does not have to be biologically related. The caretaker’s income is not considered when determining eligibility for this program. The caretaker must have a need for service such as being employed 28 or more hours per week, attending academic or vocational training on a full time basis, having a temporary medical issue that makes the caretaker unable to care for the child, or seeking employment.

The Kinship Caretaker’s Rights
With legal guardianship, the kinship caretaker will have legal authority to make decisions in every aspect of the child’s life. For example, the kinship caretaker may sign a school permission form, register the child for camp, and seek medical treatment for the child.

The Parent’s Rights
The child’s parents may be ordered to pay child support, which will go to the state if the child is receiving public assistance. The parents’ rights have not been terminated. The parents would need a court order to resume custody of the child.

Foster Care

Situation
You are a licensed foster parent and relative to a child who is placed with you as a foster care placement, or the child is placed as a formally voluntary kinship care placement and you decide to become a licensed foster parent to care for the child.

The Child’s Legal Situation
The child is removed from the parents and placed into the physical custody of DHS. DHS, in collaboration with the family, the child and juvenile court, is responsible to make placement decisions for the child. DHS is also responsible for ensuring that the child is safe and stable, attends school, and receives medical care and needed services.

If the court has approved visitation with the child’s parents, DHS is responsible to ensure that the visits occur. In foster care, the child’s kinship caretakers have rights and responsibilities similar to those of non-relative foster parents.

What to Expect from DHS
As with guardianship and formal voluntary kinship care, DHS will have to ensure that the home and prospective foster parents meet State standards for the safety and well-being of the child.

Requirements to become a licensed foster parent include:
• Completion of PS-MAPP training, a ten-week series of three-hour classes that prepare participants to provide foster care.
• Completion of a home study. This will involve a social worker evaluating your home and environment.
  You will be required to:
  • have a criminal records check for each person in the home over age 14
  • have a criminal records check for the applicants if they have lived in another state in the last five years
  • have a child abuse record check
  • have an Iowa sex offender registry check
  • be fingerprinted (other adults living in the home may be fingerprinted)
  • submit a physician’s report
  • provide verification of a drivers license and auto insurance
  • provide verification of income
  • provide verification of vaccinations for any pets
  • provide several character references
In addition, your home must:

- be clean, safe, properly lighted, well ventilated and free from vermin and rodents
- provide adequate space for a foster child to sleep
- provide a safe outdoor space for active play
- provide a safe water supply
- provide for safe storage of any firearms you possess

All adults in the household who will be co-parenting the child must participate in all aspects of the licensing process, including completion of the PS-MAPP training. A foster care license is effective for one year and must be renewed each year. All foster families must receive ongoing in-service training to maintain a foster care license.

A kinship caretaker may contact Iowa KidsNet (800-277-8145 or www.iowakidsnet.com) for foster parent licensing requirements and information.

**Financial Assistance**

Once PS-MAPP training is completed, DHS requires an approved foster care home study prior to signing agreements placing the child in the caretaker’s home for foster care. The child will be eligible to receive foster care payments, respite care, a clothing allowance, free school lunches and school enrollment fees, free driver’s education, and up to $50 in school fees per year. A child who receives foster care payments is not eligible for Family Investment (FIP) payments. For additional information on foster care payments and assistance please contact DHS.

**Medical Coverage**

The child is eligible for Medicaid. A DHS income maintenance worker will process eligibility and set up coverage.

**Child Care and Respite Care**

Foster parents may qualify for child care reimbursement through the foster care program if they are pre-approved by the service area manager for child care, when the provision of child care is included in the child’s case permanency plan as a need of the child, the child is not in school, and if the foster parent is employed outside the home. Childcare for the foster child must be provided by a licensed or registered childcare provider. A child who receives foster care payments is not eligible for payments from the Child Care Assistance program. The foster parents will also be eligible to receive 24 days (per calendar year) of respite care for the child that must be provided in a licensed foster home.

**Kinship Caretaker/Foster Parent’s Rights**

DHS, the courts, and the parents make decisions for the child. In most cases, the parents retain the right to sign for medical care, school activities, out-of-state travel, etc. Compared to voluntary kinship placement, kinship caretakers caring for a relative in foster care will find that they have more structured involvement with DHS. Kinship caretakers may find that some of this structure is helpful in dealing with the children’s parents, schools, or medical care arrangements; on the other hand, caretakers may have less freedom to make independent decisions about the children.

**The Parent’s Rights**

The parents remain the legal guardian of the child. In most circumstances, the parents’ rights have not been terminated. The parents work with DHS in collaboration with the kinship caregivers, agency providers and juvenile court, to reunite with the child. The child’s parents may be ordered to pay child support, which will go to the state to offset the cost of care.
Subsidized Guardianship

Situation
You have been the child’s kinship caretaker, and DHS has offered you the opportunity to choose a subsidized guardianship for the child. A judge awards you legal subsidized guardianship through a court order.

The Child’s Legal Situation
Subsidized guardianship provides financial assistance to support the child’s placement with a caretaker and allows the child to have a permanent family relationship. New federal legislation allows states to implement a subsidized guardianship program with standardized eligibility criteria though subsidized guardianship is not currently available in Iowa. Iowa is working to implement subsidized guardianship under the federal legislation.

When the subsidized guardianship program is available and the child is determined to be eligible for this program, the kinship caretaker may request to become the guardian for the child. After guardianship is awarded to the caretaker, the caretaker will negotiate with DHS on a subsidized guardianship payment amount that cannot exceed the daily basic foster care maintenance care payment plus $10. If this is an option you would like to consider, please ask DHS and the juvenile court if subsidized guardianship will available for the child in your care.

What to Expect from DHS
As with foster care and voluntary kinship care, DHS will have to ensure that the home and prospective guardians meet State standards for the safety and well-being of the child. A home study and record checks will be completed if not previously done.

DHS will provide payment for the child’s monthly subsidized guardianship payment and Medicaid. DHS will not have physical or legal custody of the child or provide services to the child. A yearly review is required in either juvenile court or district court, depending on which court ordered the guardianship. DHS will not be present at these reviews or provide the yearly report. That is the responsibility of the guardian.

Financial Assistance
The rate paid for subsidized guardianship is negotiated, and cannot exceed the daily basic foster care maintenance care payment plus $10. The child is eligible to receive this monthly stipend until he or she is 18 years old as long as the child remains in the care and guardianship of the appointed guardian. Payments do not begin until the guardianship is finalized.

Medical Coverage
The child may be eligible for Medicaid. A DHS income maintenance worker will process eligibility and set up medical coverage.

Child Care Assistance
The child may qualify for childcare assistance through the DHS Child Care Assistance Program. The caretaker’s relationship is not an eligibility factor and the caretaker does not have to be biologically related. The caretaker’s income is not considered when determining eligibility for this program. The caretaker must have a need for service such as being employed 28 or more hours per week, attending academic or vocational training on a full time basis, having a temporary medical issue that makes the caretaker unable to care for the child, or seeking employment.

The Kinship Caretaker/Guardian’s Rights
With legal guardianship, the kinship caretaker will have legal authority to make decisions for the child.

The Parent’s Rights
The child’s parents may be ordered to pay child support, which will go to the state if the child is receiving public assistance. The parents’ rights have not been terminated. The parents would need a court order to resume custody of the child.
Adoption

**Situation**
The parents voluntarily relinquish their parental rights or their parental rights are terminated by juvenile court. The kinship caretaker legally adopts the child.

**The Child’s Legal Situation**
The child can be adopted if the juvenile court has terminated all the legal rights of the parents or the parents have voluntarily surrendered all of their parental rights. A court must finalize the adoption. If the child is older, the judge may ask the child if they agree to the adoption.

**What to Expect from DHS**
As with foster care and guardianship, DHS will need to ensure that the home and prospective adoptive parents meet State standards for the safety and well-being of the child.

For children with special needs who have been in foster care, there may be ongoing adoption subsidy available for the care of the child. Additional services may be available for the child after the adoption. Contact your DHS Adoption Worker for additional information.

**Financial Assistance**
If you adopt the child from foster care, and the child has special needs, he or she may be eligible for adoption subsidy. Adoption subsidy may include a monthly subsidy payment, Medicaid and special services. The subsidy payment amount is determined by the needs of the child and the adoptive parent’s ability to meet these needs; and is negotiated with the DHS adoption social worker.

**The Adoptive Parent/Kinship Caretaker’s Rights**
Once the adoption is finalized, the kinship caretaker becomes the legal parent of the child.

**The Parents’ Rights**
The parents no longer have legal rights to the child.
Questions to ask DHS when considering placement of a child:

- What are the requirements for me and my home if I want the child to live with me?
- Are the requirements different if the child is with me just temporarily?
- What services are available for me and for the child, and how do I apply?
- What subsidies or financial assistance is available? What do I need to do to apply?
- Who has legal custody of the child?
- What rights and responsibilities does legal custody and physical custody include?
- When and where is the court hearing?
- What will be decided at the court hearing?
- Who will be present at the court hearing?
- Who will have a lawyer at the court hearing?
- Do I need a lawyer? If so, who can help me find one?
- Who will represent the child? May I speak to that person?
- May I speak at the hearing?
- May I receive a copy of the all signed court orders and legal documents?
- May I be involved in developing the case plan and receive a copy of the plan?
- Will the child or I be able to attend the entire court hearing?
- Who is responsible for enrolling the child in school, obtaining health insurance, granting permission for medical care and obtaining it, signing school permission forms, etc.?
- Will someone from DHS visit my home on a regular basis? How often?
- Are there restrictions on the discipline I can use (such as spanking) with the child?
- What resources are available for the care of this child?
- Am I eligible to become a licensed foster parent?
- What is the schedule of future hearings?

Questions to ask the DHS social worker regarding long-term kinship placements:

- What is the current permanency goal for each child? (Siblings may not have the same goal.)
- What options are available to the child if they can not return to their parents?
- What are my options if the child cannot return to their parents?
- Under what circumstances can I receive a subsidy to help pay for the child’s care?
- Will the legal arrangement be affected when the child turns 18?
- How will DHS continue to be involved with my family?
- What resources are available for the care of the child?
What if I have questions?
Any county DHS office can answer questions about the programs and services described here. Contact the county
DHS office serving the county where you live. The DHS office serving your county is also listed in the State or County
Government section of your local phone book, under “Department of Human Services” or just “Human Services”. You
can also visit the DHS website: www.dhs.iowa.gov.

You may also contact the Department’s Field Operations Support Division by calling 515-281-6899 or 800-972-2017.

How do I apply?
To receive DHS services, you must fill out an application form. You can fill out the form online, print out an
application form and mail it in, or get an application form from any DHS office. The Health and Financial Support
application for FIP, Food Assistance Child Care Assistance and/or Medical Assistance is available at:
www.dhs.iowa.gov/Consumers/Assistance_Programs/CashAssistance/FamilyInvestmentProgram.html. Complete
the application then return it to the DHS office serving the county where you live. You may also apply on-line for
these programs at www.oasis.iowa.gov.

Family Investment Program (FIP)
The Family Investment Program (FIP) is Iowa’s Temporary Assistance to Needy Families (TANF) program. FIP provides
temporary cash assistance for needy families as they become self-supporting. There are time limits for how long a
family can receive FIP and work and training requirements. Relative caretakers who apply for FIP only for the child
can receive FIP regardless of their income; they are not subject to time limits or PROMISE JOBS work and training
participation. If the relative is interested in receiving FIP for their own needs DHS would look at their income,
resources and time limits when determining eligibility. The relative would also need to participate with PROMISE
JOBS in order to become self-sufficient.

Who can get help?
To receive FIP as a caretaker, you must:

• Be a U.S. citizen or legal qualified alien.
• Live in Iowa.
• Provide a social security number or proof of application for a number.
• Provide all information needed to determine eligibility and benefit level.
• Have a minor child (under age 18 or 19 and still in high school) in the home.
• Be related to the child or children for whom you are caring. DHS rules define which types of relatives can qualify
for caretaker FIP.

Your income does not matter when applying for caretaker FIP for the children. Your income does matter when
applying for yourself and the children.

Medicaid
Medicaid (also known as Title 19) is a program that pays for a wide range of medical and health care costs of people
who qualify. These services are covered only if they are medically necessary and provided by a Medicaid
participating provider. Medicaid members usually have free choice of a doctor, dentist, pharmacy, and other
providers of services. However, in many counties, some people covered by Medicaid are required to get certain
medical services through a managed health care provider (either a health maintenance organization (HMO or a
MediPass doctor). These people have the opportunity to select a provider; however, if they do not select one, they
will be assigned to a provider. A provider that chooses to participate in the Medicaid program must accept the
payments that Medicaid makes and make no additional charges to the recipient for services covered under the
program. However, some services covered by Medicaid do require a small co-payment be paid.
Who can get help?
If the caretaker is financially eligible they may be eligible for Medicaid. Relationship to the child is not an eligibility factor and you do not have to be biologically related. The kinship caretaker’s income would be considered towards their eligibility as a needy caretaker but has no effect on the child’s eligibility.

The child may be eligible for Medicaid, relationship is not an eligibility factor, and you do not have to be biologically related. This program does not depend on your income or resources; however the children’s income is an eligibility factor (social security, child support, etc.).

How do I apply?
You can fill out the application online, print out an application form and mail it in, or get an application form from any DHS office. You may apply on-line at www.oasis.iowa.gov or complete and print an application at: www.dhs.iowa.gov/Consumers/Health/Medical_Insurance/WhatsAvailable.html

Child Care Assistance
Child Care Assistance (CCA) is available to the children of income-eligible caretakers who are absent for a portion of the day due to employment or participation in academic or vocational training or PROMISE JOBS activities. Assistance may also be available for a limited period of time to the children of a caretaker looking for employment or when the caretaker who normally cares for the child is unable to do so due to hospitalization, or outpatient treatment for physical or mental illness.

Who can get help?
You may get help from the Child Care Assistance (CCA) program if you:
- Have a child who needs care who is:
  - Under the age of 13,
  - Under the age of 19 if the child has special needs, or
  - Age 13 up to the age 16 if there are special family circumstances that put the safety and well being of the child at risk if left home alone (the parent or guardian must apply for an exception to policy)
- The child must be a U.S. citizen or legal qualified alien.
- Live in Iowa.
- The caretaker must have a need for childcare services such as:
  - Employed 28 or more hours per week
  - Participate in academic or vocational training full time, as defined by the school (limited to 24 fiscal months)
  - FIP recipient participating in PROMISE JOBS activities
  - Medical absence or incapacity (temporary)
  - Seeking employment (limited to one 30-consecutive-day period in any 12-month period)
  - Protective child care, when the child has a case plan that identifies protective child care as a required service

Childcare services for a child with protective needs are provided without regard to income. To receive protective childcare services, the family must meet specific requirements; the service area manager must pre-approve childcare services, and the provision for childcare must be identified in the child’s case permanency plan as a necessary service.
**Who can provide childcare for my child?**
Depending upon the situation, you may choose a childcare provider from a variety of arrangements. You can choose:
- A licensed child care center,
- A registered child development home,
- A non-registered child care home,
- Someone who cares for your children in your own home,
- A before-and-after-school program, or
- A childcare program operated by or under contract to an accredited public or nonpublic school.

**What must my childcare provider do?**
Your provider must be approved by DHS in order to receive payment from the CCA program. Many providers are already approved by DHS to provide care for the CCA program. If you do not know whether your provider is approved, ask your DHS Child Care Assistance worker for assistance. If your provider is not yet approved, DHS will provide you with the necessary forms to take to your child care provider.

**How do I apply?**
You may apply on-line at https://secureapp.dhs.state.ia.us/oasis/ or you can fill out the form online, print out an application form and mail it in, or get an application form from any DHS office. A printable version of the CCA paper application is available at: [http://www.dhs.iowa.gov/Consumers/Child_Care/CCAssistance/CCaforConsumers.html](http://www.dhs.iowa.gov/Consumers/Child_Care/CCAssistance/CCaforConsumers.html)

**Food Assistance (formerly known as Food Stamps) Program**
The federal Supplemental Nutrition Assistance Program is the cornerstone of the United States Department of Agriculture’s (USDA’s) nutrition assistance programs. In Iowa, the program is called Food Assistance. The goal of the program is to help low-income Iowans meet their nutritional needs by supplementing the household’s food budget with benefits that can be used to purchase groceries.

**Who can get help?**
To determine your eligibility for Food Assistance, you must apply. Eligibility is determined by the number of people in your home, the amount of earned income, the amount of unearned income, and the amount of resources in your household. To determine if you may be eligible for Food Assistance, go to [www.oasis.iowa.gov](http://www.oasis.iowa.gov) or [http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Forms/470-0306.pdf](http://www.dhs.state.ia.us/policyanalysis/PolicyManualPages/Manual_Documents/Forms/470-0306.pdf)

**How do I apply?**
You can fill out the form online, print out an application form and mail it in, or get an application form from any DHS office. Call your local DHS office for help with applying for Food Assistance. To apply online, visit [www.oasis.iowa.gov](http://www.oasis.iowa.gov).

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**Definition of Terms**

- **DHS:** Department of Human Services
- **CPA:** Child Protective Assessment
- **FIP:** Family Investment Program
- **Formal kinship care:** providing care for a child with DHS and Juvenile Court oversight.
- **GAL:** Guardian Ad Litem. An attorney hired by the court to represent the child’s best interests.
- **IFAPA:** Iowa Foster and Adoptive Parents Association
- **Informal kinship care:** providing care for a child through an arrangement made by the parents without involvement with DHS or Juvenile Court.
- **Kinship Care:** “Kinship care” means a placement with a relative or suitable person, the full-time nurturing and protection of children by relatives, members of their tribes or clans, godparents, stepparents, or other adults who have a kinship bond with the child.
- **Legal Custody:** legal right to make decisions on behalf of the child.
- **Medicaid:** is a program that pays for medical and health care costs of people who qualify. Also known as Title 19.
- **Physical Custody:** where the child lives.
- **Non-relative caretaker:** A person who is not biologically related to the child and provided for the child’s care.
- **Relative caretaker:** a person who is biologically related to the child and provides for the child’s care.
What is Medicaid?

⇒ Medicaid (sometimes called Title 19) is a program that pays for medical and health care costs of people who qualify.

The following people can often get Medicaid:

• Pregnant woman
• Children under 21
• Parents
• Relatives caring for a child under age 18
• Children in foster care
• Children in subsidized adoption
• Resident of Iowa
• Citizen or legal permanent resident

⇒ The cost of Medicaid is based on family income, and size. You can get Medicaid even if you are working.

⇒ If you have other insurance you can still qualify. You should tell a Department of Human Services Income Maintenance Worker (IM Worker) if you have other health insurance when you apply. If you have changes in insurance, let your IM worker know within 10 days.

Medicaid could cover:

• Doctor visits
• Prescription drugs
• Vision care
• Speech therapy
• Physical therapy
• Ambulance services
• Hospital visits

• Some types of medical equipment
• Dental care
• Hearing services
• Hospice services
• Immunizations
• Well-child exams (medical check-ups)
• Transportation to medical appointments

How do I apply for Medicaid?

⇒ Fill out the application found at your local DHS office, WIC agencies, public health clinics and hospitals.

⇒ May involve a phone or personal interview with an IM worker.

⇒ Mail in the requested information:
  • Form of identification
  • Social security number (required only for person that Medicaid will cover)
  • Proof of income

Source: Visiting Nurse Services
**What is hawk-i?**

⇒ *hawk-i* (Healthy and Well Kids in Iowa) is part of Iowa’s State Children’s Health Insurance Program (SCHIP), that helps families get health insurance for uninsured children.

⇒ *hawk-i* makes health insurance easier to afford for families with incomes too high to qualify for Medicaid, but too low to afford private family coverage.

To qualify for *hawk-i* a child must:
- Meet the income guidelines
- Be under 19 years of age
- Be an Iowa resident
- Not receive Medicaid benefits
- Not be a dependent of a state employee
- Be a U.S. citizen or permanent legal resident

⇒ The cost of *hawk-i* is based on family income and size. The most a family will have to pay is $20 per month, even if there are more than two children in their family. You can get *hawk-i* even if you are working.

**What does hawk-i cover?**

- Doctor visits
- Prescription drugs
- Vision care
- Speech therapy
- Physical therapy
- Ambulance services
- Hospital visits
- Some types of medical equipment
- Dental care
- Hearing services
- Immunizations
- Well-child exams (medical check-ups)

**Do families have to fill out much paperwork?**

⇒ Enrolling in *hawk-i* does not involve a lot of paperwork.

⇒ The application is short and easy to fill out.

⇒ Families need proof of income.

⇒ Social security numbers are optional.

⇒ Applications can be downloaded from the *hawk-i* website at [www.hawk-i.org](http://www.hawk-i.org) or call 800-257-8563.

*Source: Visiting Nurse Services*
Websites for Relative Caretakers

For information on kinship care, visit the following websites:

AARP GrandCare Toolkit (Resources for Grandparents Raising Children) - http://www.aarp.org/family/grandparenting/articles/grandcare_toolkit.html

American Bar Association (Kinship Care Legal Research Center) - www.abanet.org/child/kinshipcare.shtml

Brookdale Foundation - RAPP (Relatives as Parents Program) - www.brookdalefoundation.org/

Child Welfare League of America - www.cwla.org/programs/kinship/

Children of Alcoholics Foundation (& other substance abuse) - www.coaf.org/family/caregivers/kinmain.htm


Generations United (National Center of Grandparents and Other Relatives Raising Children) - www.gu.org


Grandparenting - www.grandparents.com

Grandparents Raising Grandchildren - USA - www.usa.gov/Topics/Grandparents.shtml

Iowa Association of Area Agencies on Aging - www.iowafamilycaregiver.org/

Iowa Department of Elder Affairs - www.state.ia.us/elderaffairs/

Iowa State University / University Extension - www.extension.org/family+caregiving


National Center on Grandparents Raising Grandchildren - www.chhs.gsu.edu/nationalcenter/

National Committee of Grandparents for Children’s Rights - www.grandparentsforchildren.org

University of Georgia (Grandparents Raising Grandchildren Article Series) - www.fcs.uga.edu

University of Wisconsin Extension - Grandparenting Today (Over 100 Fact Sheets) - www.uwex.edu/ces/flp/grandparent/publications.cfm#5

IFAPA Website

The Iowa Foster and Adoptive Parents Association empowers, supports and advocates for foster, adoptive and kinship families. IFAPA provides training, peer support and resources to kinship families.

The IFAPA website (www.ifapa.org) is a great resource for kinship families. This website contains publications, information on support groups, training, events, publications, newsletters and links to other helpful websites.

www.ifapa.org
Additional Resources for Relative Caretakers

Reading Resources for Relative Caretakers

www.childwelfare.gov/pubs/factsheets/cpswork.cfm

http://gucchd.georgetown.edu

Grandparents as Parents: A Survival Guide for Raising a Second Family
De Toledo is a founder of the national support group “Grandparents as Parents,” or GAP. In this book, the authors describe the legal, medical and financial issues grandparents raising grandchildren face. They also discuss how to deal with drugs, counseling and special education needs. (Authors: Sylvie De Toledo & Deborah Edler Brown)

Raising Our Children’s Children
Doucette-Dudman is also a founder of the national support group “Grandparents as Parents,” or GAP. When her daughter-in-law was arrested on drug charges, she filed for custody of her grandson. In this book, the authors discuss why some birthparents don’t raise their children, the choices grandparents must make, the ongoing relationships with birthparents, and dealing with legal and social service systems. (Authors: Deborah Doucette-Dudman and Jeffrey R. Lacure)

To Grandma’s House, We...Stay: When You Have to Stop Spoiling Your Grandchildren and Start Raising Them
This book guides grandparents through the obstacle course of emotions, conflicts, and social considerations they face when raising a grandchild. (Author: Sally Houtman)

Second Time Around; Help for Grandparents Who Raise Their Children’s Kids
The author discusses her own, sometimes painful, experiences of raising her grandson. This book offers personal and practical advice for grandparents raising grandchildren. (Author: Joan Callander)

The Grandparent Guide: The Definitive Guide to Coping with the Challenges of Modern Grandparenting
The Grandparent Guide examines the countless ways grandparents and grandchildren interact. One section specifically looks at raising grandchildren and the difficulties and changes that come along with this new responsibility. (Author: Arthur Kornhaber)

Ticklebelly Hill: Grandparents Raising Grandchildren
The author says while she was happy to provide her grandchildren with a stable home, she was heartbroken and guilty that her daughter could not. She describes her book as a lighthearted yet serious look at life after the grandkids move in. (Author: Hilda Osborne)

Some of the information in this booklet was adapted from the Child Welfare Information Gateway’s Kinship Caregivers and the Child Welfare System fact sheet.
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