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### Administrative Directive

<b>Transmittal:</b>	09-OCFS-ADM-16
<b>To:</b>	Commissioners of Social Services Executive Directors of Voluntary Authorized Agencies
<b>Issuing Division/Office:</b>	Strategic Planning and Policy Development
<b>Date:</b>	August 26, 2009
<b>Subject:</b>	<b>Transition Plan Requirements for Youth 18 and Older Aging Out of Foster Care</b>
<b>Suggested Distribution:</b>	Directors of Services Child Welfare Supervisors Staff Development Coordinators CONNECTIONS Implementation Coordinators
<b>Contact Person(s):</b>	See page 7
<b>Attachments:</b>	Yes
<b>Attachment Available Online:</b>	<p>Transition Plan Form-Part One-OCFS-4922  <a href="http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc">http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc</a></p> <p>Transition Plan Form-Part Two-OCFS-4923  <a href="http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc">http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc</a></p>

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
		18 NYCRR 430.12 (j)	Public Law 110-351, section 202		

## **I. Purpose**

The purpose of the Administrative Directive is to advise local departments of social services (LDSS) and voluntary authorized agencies of the new requirements for a Transition Plan for youth 18 and older aging out of foster care, and to transmit the required Transition Plan form.

## **II. Background**

The federal Fostering Connections to Success and Increasing Adoptions Act of 2008, Public Law (P.L.) 110-351, which went into effect on October 7, 2008, provides important supports for children and youth in foster care. Section 202 of P.L. 110-351 includes requirements for a transition plan for youth age 18 or older exiting foster care. The purpose of the transition plan is to help older foster youth make a successful transition from foster care to self-sufficiency. The Office of Children and Family Services (OCFS) filed emergency regulations to implement the standards required by the federal Fostering Connections to Success and Increasing Adoptions Act of 2008. Section 430.12 (j) of OCFS regulations implements Section 202 of P.L. 110-351 pertaining to the transition plan requirements. OCFS regulations require that whenever a child will remain in foster care on or after the child's eighteenth birthday, the agency with case management, case planning or casework responsibility for the foster child must begin developing a transition plan with the child 180 days prior to the child's eighteenth birthday or, where the child is consenting to remain in foster care after his/her 18<sup>th</sup> birthday, 180 days prior to the child's scheduled discharge date. The transition plan must be completed 90 days prior to the scheduled discharge, and must be personalized at the direction of the child. The transition plan must include specific options on housing, health insurance, education, local opportunities for mentors, continuing support services, and work force supports and employment services. The transition plan must be as detailed as the foster child may elect.

## **III. Program Implications**

Transition planning should begin on day one of a child's placement into foster care and occur over the life of the case. Transition plans will help older adolescents in care make a successful transition to self-sufficiency. To assist districts and agencies with the new transition planning requirements for older adolescents, OCFS developed the Transition Plan form. Districts and agencies are now required to document transition plans on the form for youth exiting foster care who are 18, 19 and 20 years of age. This new Transition Plan form is intended to assist districts and agencies in developing transition plans with youth that are youth driven and cover the areas that are required by law and regulations to be addressed prior to an older youth leaving care.

The Transition Plan form consists of two parts: Part One: Transition Plan Discussion (OCFS-4922) and Part Two: Transition Plan Update and Summary (OCFS-4923). A

Transition Plan is not considered complete until both parts of the form have been completed. When a trial discharge occurs, the Transition Plan form will need to be updated at final discharge.

The transition plan forms can be found under “forms” on the OCFS Internet site.

Transition Plan Form- Part One- OCFS-4922 can be found at:

[http://www.ocfs.state.ny.us/main/Forms/Foster\\_Care/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc](http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc)

Transition Plan Form- Part Two- OCFS-4923 can be found at:

[http://www.ocfs.state.ny.us/main/Forms/Foster\\_Care/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc](http://www.ocfs.state.ny.us/main/Forms/Foster_Care/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc)

These transition plan forms can also be accessed on the OCFS intranet site.

Transition Plan Form-Part One- OCFS-4922 can be found at:

[http://ocfs.state.nyenet/admin/Forms/Foster\\_Care/forms/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc](http://ocfs.state.nyenet/admin/Forms/Foster_Care/forms/OCFS-4922%20Transition%20Plan%20FormPart%20One.doc)

Transition Plan Form-Part Two- OCFS-4923 can be found at:

[http://ocfs.state.nyenet/admin/Forms/Foster\\_Care/forms/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc](http://ocfs.state.nyenet/admin/Forms/Foster_Care/forms/OCFS-4923%20Transition%20Plan%20Form%20Part%20Two.doc)

## **Transition Plan Form**

### **Part One: Transition Plan Discussion (OCFS-4922)**

#### ***Identifying Information***

Part One of the Transition Plan form entitled Transition Plan Discussion begins with identifying information such as the name of the youth, the date the youth initially entered foster care, the date the youth was placed in his or her current foster care setting, and whether the youth is currently placed in a foster home or congregate setting. There is a place for the worker to document the youth’s scheduled discharge date, the date the worker began to discuss with the youth the youth’s transition plans, and the date of the 90-day notice as required by OCFS regulations for youth being discharged to another planned living arrangement with a permanency resource. There is also a place for the worker to identify all representatives by name who participated in the development of the youth’s transition plan.

#### ***Topic Areas***

Part One: Transition Plan Discussion is divided into Sections I-X (each including a series of questions) under the following topic areas: Trial Discharge; Housing; Health/health Insurance; Education/Vocational; Opportunities for Adult Permanency Resource(s) or Mentor(s); Continuing Support Services; Important Documents / Access

to Case Record; Workforce Supports and Employment Services; Pregnant/Parenting Youth; and Other (Safety).

### ***Regulatory Requirements / Good Casework Practice***

The “gray areas” at the beginning of each section of the Transition Plan Discussion form provides relevant regulatory requirements pertaining to each of the topic areas. For example, Section I Trial Discharge cites OCFS regulations pertaining to trial discharge, and Section II Housing cites OCFS regulations pertaining to local district responsibility for discharging youth to safe and appropriate housing. It should be noted that the standardized letter for youth on Medicaid coverage referenced in Section III Health/Health Insurance, question #3, will be transmitted by OCFS to districts and agencies under a separate ADM.

### ***Questions***

There are a series of questions under each section of the Transition Plan Discussion form that relate to the topic areas. The questions vary depending upon the topic area. The questions are intended to capture the options being explored with the youth related to the specific topic area, the youth’s input, the steps being taken to address any issues, the decision, the actions that need to be addressed, and the youth’s comments/feedback.

The questions on the Transition Plan Discussion form are intended to be used by a worker, over a period of time, beginning 180 days before the youth’s scheduled discharge from care, to engage and guide a youth in discussions about the youth’s plans after leaving care on either a trial discharge status or final discharge status. The questions are intended to direct the worker’s discussion with the youth and guide the worker in developing and documenting the youth’s discharge plans in areas that are important to address to help a youth make a successful transition from foster care to self-sufficiency. The questions will enable the worker to develop and document a discharge plan that is youth driven and is as detailed as the youth elects. Each of the questions provides a space for the worker to document the youth’s comments/feedback on the discharge plans and the role the youth played in developing his/her transition plan. All areas of the Transition Plan Discussion form must be completed 90 days prior to the youth’s scheduled discharge date.

### ***Signatures***

The Transition Plan Discussion form provides for the signature of the case manager / case planner / caseworker, the supervisor and the youth. When a youth does not sign his/her transition plan, a note must be entered in place of the youth’s signature indicating the reason that the youth did not sign the form. For example, it might be noted that the youth refuses to sign. The youth must be given a copy of the completed Transition Plan Discussion form and a copy must be placed in the youth’s case record.

**Part Two: Transition Plan Update and Summary Form (OCFS-4923)**

Part Two: Transition Plan Update and Summary form provides a comprehensive snapshot of a youth's transition plans at 90 days prior to the youth's scheduled discharge date with regard to: trial discharge (if applicable); housing; health insurance; education/vocational; opportunities for adult permanency resource(s) or mentor(s); supportive services; important documents / access to case record; workforce supports and employment; pregnancy/parenting (if applicable); and other (safety) concerns. The Transition Plan Update and Summary provides a place for the worker to document the youth's discharge plans/decision at 90 days prior to the youth's scheduled discharge (trial or final) in each of the areas and any actions needed to implement the discharge plan. For example, during the 180-day period prior to a youth's scheduled discharge (trial or final), the worker may have explored several housing options with the youth when the youth exits foster care, including the possibility of the youth living with his/her uncle or an older sister and the possibility of the youth securing their own apartment. On the Transition Plan Update and Summary form, under the heading Decision, at least 90 days prior to the youth's scheduled discharge, a worker would document the actual plan/decision. In this situation, the Decision was for the youth to move in with his uncle. Under the heading "Actions Needed Prior to Discharge," the worker might indicate that the uncle needs to purchase a bed for the youth. The Transition Plan Update and Summary also enables a worker to document the outcome with regard to each of the areas within 30 days of the youth exiting foster care on a trial discharge or final discharge status. For example, under the heading "Outcome at Trial Discharge," the worker might document the youth went to live with an older sibling. The form also provides a place for the worker's and the youth's initials. The youth should be given a copy of the Transition Plan Update and Summary form and a copy must be placed in the youth's case record.

The Transition Plan Update and Summary form may be separated from the more lengthy Transition Plan Discussion form to provide a quick picture, 90 days prior to discharge (trial or final), of the current plan and actions needed and of the outcome at trial and/or final discharge. The update and summary form may be used for various purposes, including: by a worker, a worker's supervisor or a youth to see what areas still need to be addressed for the youth to make a successful transition from foster care to self-sufficiency. Also, the form could become part of the Permanency Hearing Report.

**IV. Required Action**

Districts and agencies are required to develop transition plans with youth who will be exiting foster care at ages 18, 19 and 20, whether through trial discharge or final discharge. Districts and agencies must document a youth's transition plans on the attached Transition Plan Form, which consists of two parts (Part One: Transition Plan

Discussion and Part Two: Transition Plan Update and Summary), as prescribed below.

- A. One hundred and eighty (180) days prior to the youth's scheduled discharge date, the worker must begin discussing with the youth the questions contained on Part One of the Transition Plan Form (OCFS-4922) and developing and documenting the youth's plans for discharge pertaining to: Discharge (trial or final); Housing; Health/Health Insurance; Education/Vocational; Opportunities for Adult Permanency Resource(s) or Mentor(s); Supportive Services; Important Documents/Access to Case Record; Workforce Supports and Employment; Pregnancy/Parenting (if applicable); and Other (Safety) Concerns.

The worker must use the questions on Part One: Transition Plan Discussion to guide the worker's discussion with the youth in the areas listed above. In addition, the worker must ask the youth for input on the questions on the Transition Plan Discussion, follow the youth's direction, and allow the youth to determine the level of detail that will be included and documented in his/her Transition Plan.

- B. Ninety (90) days prior to the youth's scheduled discharge date, a worker must complete both parts of the Transition Plan Form (Part One: Transition Plan Discussion (OCFS-4922) and Part Two: Transition Plan Update and Summary (OCFS-4923)). The worker must include the youth's input and comments/feedback in the spaces provided on Part One: Transition Plan Discussion. In addition, the worker and the worker's supervisor must sign the Transition Plan Discussion. The worker must offer the youth the opportunity to sign his/her Transition Plan Discussion. If a youth refuses to sign, in the space provided for the youth's signature, the worker must document the reason the youth refused to sign his/her Transition Plan.

In addition, 90 days prior to the youth's scheduled discharge, the worker must complete the documentation required on Part Two of the Transition Plan Form (Transition Plan Update and Summary (OCFS-4923)) which includes documenting the Decisions and Actions Needed Prior to Discharge pertaining to the identified areas. The worker must initial the Transition Plan Update and Summary and encourage the youth to initial the completed form.

- C. A youth must be given a copy of his/her Transition Plan (Part One: Transition Plan Discussion (OCFS-4922) and Part Two: Transition Plan Update and Summary (OCFS-4923)) and a copy must be placed in the youth's case record.
- D. Within 30 days of a youth exiting foster care (trial or final), a worker must document outcomes as required on Part Two: Transition Plan Update and Summary (OCFS-4923). When a youth is discharged on a trial discharge status, the Transition Plan Update and Summary form must be completed, and then updated at final discharge.

- E. When a youth's discharge (trial or final) is planned and both parts of the Transition Plan Form have been completed, a Plan Amendment indicating the foster care status change will **NOT** be required.
- F. When a worker completes the Transition Plan Form as prescribed by Section 430.12(j) of OCFS regulations and consistent with this ADM, the Transition Plan Form, Part One: Transition Plan Discussion and Part Two: Transition Plan Update and Summary, will be considered an official part of the case record.
- G. A worker is **NOT** required to complete the Transition Plan Form when a youth's discharge from foster care is unplanned and unscheduled. In this case, the worker would be required to complete the discharge protocol currently available in CONNECTIONS.

## V. Systems Implications

The Transition Plan Form is **not** currently available in CONNECTIONS.

## VI. Contact Information

Any questions concerning this release should be directed to the appropriate Regional Office, Division of Child Welfare and Community Services:

Buffalo Regional Office- Mary Miller (716) 847-3145  
[Mary.Miller@ocfs.state.ny.us](mailto:Mary.Miller@ocfs.state.ny.us)

Rochester Regional Office- Linda Kurtz (585) 238-8200  
[Linda.Kurtz@ocfs.state.ny.us](mailto:Linda.Kurtz@ocfs.state.ny.us)

Syracuse Regional Office- Jack Klump (315) 423-1200  
[Jack.Klump@ocfs.state.ny.us](mailto:Jack.Klump@ocfs.state.ny.us)

Albany Regional Office- Kerri Barber (518) 486-7078  
[Kerri.Barber@ocfs.state.ny.us](mailto:Kerri.Barber@ocfs.state.ny.us)

Spring Valley Regional Office- Patricia Sheehy (845) 708-2499  
[Patricia.Sheehy@ocfs.state.ny.us](mailto:Patricia.Sheehy@ocfs.state.ny.us)

New York City Regional Office- Patricia Beresford (212) 383-1788  
[Patricia.Beresford@ocfs.state.ny.us](mailto:Patricia.Beresford@ocfs.state.ny.us)

Native American Services- Kim Thomas (716) 847-3123  
[Kim.Thomas@ocfs.state.ny.us](mailto:Kim.Thomas@ocfs.state.ny.us)

**VII. Effective Date**

This release is effective immediately.

*/s/ Nancy W. Martinez*

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**Issued By:**

Name: Nancy W. Martinez

Title: Director

Division/Office: Strategic Planning and Policy Development

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**TRANSITION PLAN FORM**  
**PART ONE: TRANSITION PLAN DISCUSSION**

<b>PART ONE</b>			
<b>Identifying Information:</b>			
NAME OF YOUTH:		CIN:	DATE OF BIRTH: / /
DATE ENTERED FOSTER CARE: / /	COUNTY OF ORIGIN:		DATE OF CURRENT PLACEMENT: / /
PLACEMENT TYPE: <input type="checkbox"/> Foster Home <input type="checkbox"/> Group Home – Name of Agency: <input type="checkbox"/> Institution – Name of Agency:		PERMANENCY PLANNING GOAL:	SCHEDULED DISCHARGE DATE: / /
DATE OF LAST LIFE SKILL ASSESSMENT: / /	IMMIGRATION STATUS:		PREGNANT/PARENTING YOUTH: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of 90 day notice: / /		<b>Date Transition Plan Discussion Initiated (180 days prior to discharge) / /</b>	
1. Name ALL representatives involved in development of this transition plan:			
a. Youth		e. Community Service Provider	
b. Case Manager/Case Planner/Child's Case worker		f. Child Care Staff/Other Agency Staff	
c. Parent(s)/Adoptive Parent(s)		g. Attorney for the Child	
d. Adult Permanency Resource		h. Supportive Peer Resource	
<input type="checkbox"/> Foster Parent <input type="checkbox"/> Relative <input type="checkbox"/> Non relative resource		i. Other	
<p><b>Section I Trial Discharge:</b> OCFS Regulations section 430.12 (f)(4)(i)(a) requires every child discharged to <i>another planned living arrangement with a permanency resource (APLA)</i> and every child deemed to have this goal be placed on a trial discharge status for at least six months after discharge and must remain in the custody of the local department of social services during the entire trial discharge status. Trial discharge may continue at the discretion of the district, up to the age of 21, if the reassessment and service plan review indicates either the need for continued custody or a likelihood that the child may need to return to foster care. The purpose and implications of trial discharge are to enable a youth over the age of 18 to re-enter foster care, for example, should the youth become homeless. The youth must consent to a trial discharge.</p>			
1. Was the youth offered a trial discharge (if applicable) and explained the purpose of leaving foster care on trial discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No Status?			
2. Youth response to Trial Discharge :			
<b>Youth Comments/Feedback:</b>			

**Section II Housing:** OCFS Regulations section 430.12 (f)(3)(i)(c) requires that no child may be discharged to *APLA* unless the child has a residence other than a shelter for adults, shelter for families, single-room occupancy hotel or other congregate living arrangement which houses more than 10 unrelated persons and there is a reasonable expectation that the residence will remain available to the child for a least the first 12 months after discharge.

1. What safe and appropriate housing options have been explored?

2. What housing options has the youth suggested?

3. What specific steps are taking place to secure safe and stable housing (**for at least 12 months from discharge**)?

4. **Decision:** Where is the youth going to live?

5. What specific steps need to be addressed prior to discharge? What is the action plan?

6. In the event that the youth does lose his or her housing, what emergency housing plan has been discussed with the youth? Indicate what the youth would do, where they would go and who he or she would ask for help.

**Youth Comments/Feedback:**

**Section III Health/Health Insurance:** OCFS regulation section 441.22(n) requires that each child discharged to another planned living arrangement with a permanency resource must have a comprehensive medical examination prior to discharge, unless the child has undergone such an examination within one year prior to the date of discharge. Effective January 1, 2009, section 366 (3-a) of the Social Services Law (SSL) provides that youth who remain in care until age 18 or older are eligible to have his or her Medicaid coverage continued until the youth's 21<sup>st</sup> birthday without regard to income or resources. The youth must still meet Medicaid citizenship/immigration status and residency requirements. OCFS has developed a standardized letter with information about Medicaid eligibility and contact information specific to the youth that must be given to the youth at final discharge. (Refer to 09-OCFS-ADM15)

1. Indicate the date of the youth's last comprehensive medical exam and whether the youth will need a medical exam prior to discharge.
2. If the last medical exam indicates a medical condition that requires post discharge follow-up, what steps will be taken to address that need?
3. For youth under the age of 21, has post discharge Medicaid coverage been explained? Has the youth been given a copy of the standardized letter explaining the youth's right to receive medical coverage without regard to income and resources? Indicate the date the letter was given to the youth and identify the contact person provided on the letter in the event the youth needs assistance with his or her MA coverage.
4. Has the worker communicated the youth's discharge address to the appropriate parties to provide Medicaid coverage to 21? (Indicate the name of the person and title)  Yes  No
5. Is the youth aware that he or she must inform the local department of social services (Idss) or in NYC the Human Resources Administration (HRA) of any change in address for Medicaid purposes?  
 Yes  No
6. What steps have been taken by the worker to have Medicaid coverage for the youth:
7. Has the youth been informed when he or she should expect to be given his or her own Benefit (Medicaid) Card?
8. If applicable, have Managed Care Plans been explained to the youth and has the youth been informed when he or she should expect to be given his/her own Managed Care Health Plan card?

9. Has the youth been advised that they must go to a provider that accepts his or her health insurance plan?  Yes  No

Indicate who the youth's medical providers are and who they will be when the youth is discharged. Include the provider(s) name, address and phone number.

10. If the youth is approaching 21, what health insurance options have been explored?

11. **Decision:** Health insurance status:

12. What specific steps still need to be addressed prior to discharge? What is the action plan?

**Youth Comments/Feedback:**

**Section IV Education/Vocational:** Section 477 of the Social Security Act, targets additional resources specifically to meet the education and training needs of youth aging out of foster care. Under this program, eligible youth may receive up to \$5,000 per year to attend a post-secondary education or vocational training program. The federal law specifies that youth eligible for vouchers under this program include foster care youth and former foster care youth who have not yet attained the age of 21 years who are eligible for services under the Chafee Foster Care Independence Program (CFCIP), and youth adopted from foster care after the age of 16. A youth participating in the Education and Training Voucher (ETV) program when he or she attains 21 years of age may remain eligible until the youth attains 23 years of age.

1. What is the youth's current educational/vocational program status?

2. If applicable, what steps have been taken to maintain the current educational/vocational program status?

3. What are the youth's educational/vocational training goals?

4. What steps have been taken to address the youth's educational/vocational training needs and goals?

5. Has the Education and Training Voucher (ETV) program been discussed with the youth, and if appropriate, has the youth completed/resubmitted an on-line ETV application?

6. What other financial resources have been explored to support the youth in his or her current/future educational/vocational program(s)?

7. **Decision:** What educational/vocational program is the youth pursuing?

8. What specific steps still need to be addressed, prior to discharge? What is the action plan? Include whether the youth needs help in filling out financial aid forms (such as FAFSA, TAP, etc) and who they will go to for help if they need such assistance.

**Youth Comments/Feedback:**

**Section V Opportunities for Adult Permanency Resource(s) or Mentor(s):** OCFS regulations section 430.12 (f) defines an *adult permanency resource* as a caring committed adult who has been determined by a social services district to be an appropriate and acceptable resource for a youth and is committed to providing emotional support, advice and guidance to the youth and assisting the youth as the youth makes the transition from foster care to responsible adulthood.

1. Has an Adult Permanency Resource or Mentor(s) been identified?  Yes  No

2. **If No**, has the youth been given the opportunity to identify an Adult Permanency Resource(s) or Mentor(s)?

3. What opportunities have been explored with the youth surrounding the potential for developing other Adult Permanency Resource(s) or Mentor(s)?

4. **Decision:** Who is the youth's Adult Permanency Resource(s) or Mentor(s)? Indicate the *name, contact information and relationship to the youth and whether this person(s) is able to assist the youth with all the major areas that the youth may need assistance with.*

5. What specific steps still need to be addressed prior to discharge? What is the action plan? (Include steps being taken to identify other supportive adults, if needed).

**Youth Comments/Feedback:**

**Section VI Continuing Support Services:** OCFS regulations section 430.12 (f)(3)(i)(a) requires that for each child who will be discharged to APLA, the district must identify any persons, services or agencies which would help the child maintain and support himself or herself and must assist the child to establish contact with such agencies, service providers or persons by making referrals and by counseling the child about these referrals prior to discharge.

1. Identify current support services being utilized by the youth (Include support services for any medical issues identified in Section III Health/Health Insurance):

2. List the services the youth has identified that he/she needs.

3. Has an assessment been conducted to identify needed services? If so, indicate date of assessment(s).

4. What local/accessible/appropriate services have been explored with the youth? *(Check all that apply)*

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Mental Health            | <input type="checkbox"/> Transportation | <input type="checkbox"/> Housing                   |
| <input type="checkbox"/> Medical/Physical Health  | <input type="checkbox"/> Child Care     | <input type="checkbox"/> Banking Services          |
| <input type="checkbox"/> Substance Abuse          | <input type="checkbox"/> Education      | <input type="checkbox"/> Adult Services            |
| <input type="checkbox"/> Community Based          | <input type="checkbox"/> Employment     | <input type="checkbox"/> Adult Protective Services |
| <input type="checkbox"/> Food Pantries/Food Banks | <input type="checkbox"/> Financial      | <input type="checkbox"/> Applying for SSI Benefits |
|   |   | <input type="checkbox"/> Other                     |

5. Has the worker explained to the youth how to locate and secure necessary services including how to secure information on his or her rights?

6. **Decision:** What specific support services have been identified as necessary?

7. What specific steps need to be addressed prior to discharge? What is the action plan?

**Youth Comments/Feedback:**

**Section VII Important Documents/Access to Case Record:** The documents listed below are documents that youth need in order to make a successful transition from foster care to self-sufficiency. For example, in order for a youth who leaves care after age 18 to continue Medicaid coverage, the Medicaid office must have on file documentation of the youth's immigration status (birth certificate/green card), and social security number. In order to qualify for financial aid for college, a youth will need documentation of legal immigration status. Health insurance (MA card) medical records including immunization records are important to the youth's well-being. In addition, OCFS regulation section 357.3(j) requires that to the extent available, an authorized agency must provide a copy of a foster child's education record at no cost to the child when the child is discharged to his/her own care. OCFS regulation section 428.8 requires that a former foster child 18 years of age or older who has been discharged from foster care on either a trial or final basis and was not adopted, may receive access to his or her foster care records from an authorized agency.

1. Check off which documents listed below the youth has received a copy of for his or her records.

- |   |  |
|---|--|
| <input type="checkbox"/> Birth Certificate (Certified copy) | <input type="checkbox"/> Green Card (if applicable)        |
| <input type="checkbox"/> Social Security Number or Card     | <input type="checkbox"/> Photo Identification              |
| <input type="checkbox"/> MA Card                            | <input type="checkbox"/> Selective Service (if applicable) |
| <input type="checkbox"/> Medical Records                    | <input type="checkbox"/> Tribal Documents (if applicable)  |
| <input type="checkbox"/> Education Records                  | <input type="checkbox"/> Other                             |

2. What specific documents are still needed by the youth? What steps are being taken to secure these necessary documents?

3. Has the youth been given an explanation of the steps to take to replace lost documents?

4. Has the youth been informed of the right to apply for access to his or her foster care records upon trial or final discharge and the methods for requesting access to his or her case record?

**Youth Comments/Feedback:**

**Section VIII Workforce Supports and Employment Services:** Career preparation and work-based learning experiences are essential in order to form and develop aspirations and to make informed choices about careers. These experiences can be provided during the school day, through after-school programs and will require collaborations with other organizations, such as VESID. All youth need information on career options. In order to identify and attain career goals, youth need to be exposed to a range of experiences. Transition planning that provides students with both an understanding of and experiences in how academic skills are applied to their career goals empowers students to make informed and realistic career and life choices.

1. Has the youth had a career assessment(s) to help the youth identify his/her interests? If yes, indicate date(s) of such assessment(s).  No  Yes

2. What are the youth's career goals as indicated by the youth?

3. Has the youth had the opportunity to learn first hand about the his or her career choice(s) and the skills needed for the career(s)? Include participation by the youth in on the job training or other structured programs that the youth has been involved in related to his/her career choice(s).

4. Has the youth been exposed to career opportunities that ultimately lead to a living wage, including information about educational requirements, entry requirements, income and benefits?

5. What workforce supports and employment services have been explored with the youth? (Include whether the youth has a job and whether the youth will have sufficient income for rent, and other items upon discharge. Indicate any information about the youth's ability to manage credit.)

6. What ideas does the youth have about the kinds of workforce supports and employment services he/she will need?

7. Has the youth been informed where he/she can secure information on available employment?

8. **Decision:** What work supports and employment services have been identified for the youth?

**Youth Comments/Feedback:**

**Section IX Pregnant/Parenting Youth (If Applicable):** For guidance, refer to the *Handbook for Youth In Foster Care* and the Youth In Progress (YIP) Need to Know Series: "*Pregnancy and Parenting Issues for Youth in Care*".  
*In addition, refer to OCFS Helpful Tips to Keep Your Baby Safe: Safe To Sleep Publication 5008.*

1. Identify needs of the pregnant youth:

2. Identify needs of the parenting youth:

3. List minor children and dates of birth:

4. For youth who are parenting has an individual been adjudicated as the baby's father?

5. Has the custodial parent or local department of social services filed for child support?

6. Has the OCFS Publication 5008, Helpful Tips to Keep Your Baby Safe: Safe to Sleep been discussed with the youth?

7. What specific needs have been explored for the pregnant youth, parenting youth and child(ren):

8. **Decision:** List the services identified for the youth and/or child(ren):

9. What specific steps still need to be taken prior to discharge? What is the action plan?

**Youth Comments/Feedback:**

**Section X Other (Safety):** The purpose of this section is to identify if a youth is in immediate danger of serious harm. Evidence that there is an immediate safety concern for the child will need to be documented. Please identify the safety concern(s) and how they will be addressed.

1. Are there any safety concerns related to the youth's discharge from foster care?

2. Has the youth identified any safety concerns related to his/her discharge?

3. Are there any other comments or concerns related to the youth's discharge?

4. **Decision:** What is the resolution of issues identified in this section?

5. What specific steps need to be taken prior to discharge? What is the action plan?

**Youth Comments/Feedback:**

**Signatures:** The Transition Plan must be completed and signed by the Case Manager/Case Planner/Child's Caseworker and the Supervisor at least **90 days prior to a planned discharge**. When a youth does not sign his or her Transition Plan, next to youth signature, a note must be entered in the space for youth signature regarding the circumstances (for example, youth refuses to sign). The youth must be given a copy of his/her Transition Plan. A copy of the Transition Plan must be placed in the case record and will be considered an official part of the record.

Case Manager/Case Planner/Child's caseworker:	Date: / /
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Supervisor:	Date: / /
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Youth:	Date: / /
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NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES

**TRANSITION PLAN FORM**

**PART TWO: TRANSITION PLAN UPDATE AND SUMMARY**

**SECTION XI:** Ninety (90) days prior to the scheduled discharge date the “decision” and “actions still needed” must be recorded. The “outcome at discharge” must be recorded within 30 days of a trial and/or final discharge. A copy of this section of the transition plan must be placed in the case record and will be considered an official part of the child’s record.

<input type="checkbox"/> 90 Day	<input type="checkbox"/> Final Discharge	<input type="checkbox"/> Trial Discharge	<input type="checkbox"/> Worker’s Initials _____	<input type="checkbox"/> Youth Initials _____
NAME:		DOB: / /	CIN:	TODAY’S DATE: / /
Scheduled Discharge Date: / /		Youth Actual Discharge Date / /		

**Section I Trial Discharge**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:	Outcome at Final Discharge:
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**Section II Housing**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:	Outcome at Final Discharge:
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**Section III Health/Health Insurance**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:	Outcome at Final Discharge:
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**Section IV Education/Vocational:**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:	Outcome at Final Discharge:
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**Section V Opportunities for Adult Permanency Resource(s) or Mentor(s)**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:	Outcome at Final Discharge:
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**Section VI Continuing Support Services** *(Identify specific support services needed)*

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:

Outcome at Final Discharge:

**Section VII Important Documents/Access to Case Record:**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:

Outcome at Final Discharge:

**Section VIII Work Force Supports and Employment Services:**

Decision:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:

Outcome at Final Discharge:

**Section IX Pregnant/Parenting (If Applicable):**

Description:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:

Outcome at Final Discharge:

**Section X Other (Safety):**

Description:

Actions Needed Prior to Discharge:

Outcome at Trial Discharge:

Outcome at Final Discharge: