F.C.A.§§756-a; 756-b; Form 7-19

S.S.L. §§393, 409-h (Person in Need of Supervision- Extension of Placement and Permanency Hearing Order)

9/2021

At a term of the Family Court of the

State of New York, held in and for the

County of ,

at New York

on , .

PRESENT

Hon.

Judge

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the Matter of Docket No.

A Person Alleged to be a Person in EXTENSION OF

Need of Supervision, PLACEMENT AND

PERMANENCY

, Respondent HEARING ORDER

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DEADLINE:**  **IF THE RESPONDENT REMAINS IN FOSTER CARE, A PETITION FOR THE NEXT PERMANENCY HEARING MUST BE FILED NOT LATER THAN [SPECIFY]:[[1]](#footnote-1)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

The above-named Respondent having been adjudicated by this Court to be a person in need of supervision within the meaning of Article 7 of the Family Court Act, and an Order of Disposition, dated [specify]: , having been issued placing Respondent with [check applicable box]:

❑ a suitable person ❑ the Commissioner of Social Services of [specify]: County,

And the petition of [specify]: , for an

extension of placement and permanency hearing, sworn to on [specify date]: , having been filed in this Court [check applicable box]:

❑ not less than 15 days prior to the expiration of the period of placement;

❑ not less than 30 days prior to the expiration of placement where placement had already been extended at a permanency hearing.

And notice having been duly given to the following person(s), who appeared as follows:

[specify; check applicable boxes]:

❑ Respondent ❑ with counsel ❑ without counsel

❑ Parent(s)[specify]:

❑ Other person(s) legally responsible for Respondent’s care [specify]:

❑ Prospective adoptive parent(s)[specify]:

❑ Foster parent(s)caring for Respondent [specify]:

❑ Relative(s) caring for Respondent [specify]:

❑ Authorized Agency caring for Respondent [specify]:

❑ Other [specify]:

And the matter having duly come on to be heard, and the above-named persons appearing having been given an opportunity to be heard,

[Required if Respondent is Native-American; check if applicable ]:

❑ And the following having been duly notified [check applicable box(es)]:

❑ parent/custodian ❑ tribe/nation ❑ United States Secretary of the Interior;

And the tribe/nation having: ❑ appeared and participated as a party;

❑ appeared and declined to assume jurisdiction;

❑ appeared and requested transfer of jurisdiction;

❑ not appeared;

And the position and information provided by the Commissioner of Social Services of [specify]: County, having been considered by the Court;

The Court, after having made an examination and inquiry into the facts and circumstances of the case and into the surroundings, conditions, and capacities of the persons involved, finds and determines the following [Note: judicial findings must be made pursuant to I and II, below]:

**I. Required “Best Interests” and “Reasonable Efforts” Findings** [check applicable boxes and provide case-specific reasons in both A and B below]:

**A. “Best Interests” Finding**: Return of the Respondent to the home ❑ would ❑ would not

be contrary to the Respondent’s best interests because [specify facts and reasons]:

This determination is based upon the following information [check applicable box(es)]:

❑ Extension of Placement and Permanency Petition, dated [specify]:

❑ Case Record, dated [specify]:

❑ Service Plan, dated [specify]:

❑ Probation Department report, dated [specify]:

❑ Mental health evaluation, dated [specify]:

❑ The report of [specify]: , dated [specify]:

❑ Testimony of [specify]:

❑ Other [specify]:

**B. “Reasonable Efforts” Findings**:

1. Reasonable efforts, where appropriate, to return the Respondent home safely [check applicable box and state reasons as indicated]:

❑ were made as follows [specify]:

❑ were not made but the lack of efforts was appropriate [check all applicable boxes]:

because of a prior judicial finding that the authorized agency was not required to make reasonable efforts to reunify the Respondent with the ☐ parent(s) ☐ person(s) legally responsible for Respondent’s care [specify date of finding]:

❑ were not made.

This determination is based upon the following information [check applicable box(es)]:

❑ Extension of Placement and Permanency Petition, dated [specify]:

❑ Case Record, dated [specify]:

❑ Service Plan, dated [specify]:

❑ Probation Department report, dated [specify]:

❑ Mental health evaluation, dated [specify]:

❑ The report of [specify]: , dated [specify]:

❑ Testimony of [specify]:

❑ Other [specify]:

2. **[Required in cases in which the Respondent’s permanency plan is adoption, guardianship or permanent living arrangement other than reunification]**: Reasonable efforts to make and finalize the permanency plan of [specify]:

❑ were made as follows [specify reasonable efforts, including specific documents or evidence supporting findings]:

❑ were not made.

This determination is based upon the following information [check applicable box(es)]:

❑ Extension of Placement and Permanency Petition, dated [specify]:

❑ Case Record, dated [specify]:

❑ Service Plan, dated [specify]:

❑ Probation Department report, dated [specify]:

❑ Mental health evaluation, dated [specify]:

❑ The report of [specify]: , dated [specify]:

❑ Testimony of [specify]:

❑ Other [specify]:

**3. Required for Respondents 16 years of age or older with Alternative Planned Permanent Living Arrangement (APPLA) Goals [check applicable box(es)]:** **A.** **Required**

**for Respondents 16 years of age or older with Alternative Planned Permanent Living Arrangement (APPLA) Goals [check applicable box(es)]:**

1. ❑ Evidence ❑ has ❑ has not been provided to the Court that a “reasonable and prudent parent” standard of care has been applied to Respondent in the facility or home in which he or she resides;

2. ❑ Evidence ❑ has ❑ has not been provided to the Court that Respondent has been provided with regular, ongoing opportunities to engage in age or developmentally appropriate activities and has been consulted in an age-appropriate manner about the opportunities to participate in such activities;

3. ❑ Evidence ❑ has ❑ has not been provided to the Court, indicating compelling reason(s) that it would not be in the Respondent’s best interests to return home, be referred for termination of parental rights and adoption, placed with a fit and willing relative, or placed with a legal guardian. These reasons are as follows [specify compelling reason(s)]:

4. ❑ Evidence ❑ has ❑ has not been provided to the Court, indicating that intensive, ongoing, and, as of the date of this petition, unsuccessful efforts were made to return the Respondent home or secure a placement for the Respondent with a fit and willing relative, including adult siblings, a legal guardian, or an adoptive parent, including through efforts that utilize search technology including social media to find biological family members of Respondent.

5. The Court inquired directly of the Respondent regarding the permanency plan.

6. The following individual, with whom Respondent has a significant connection, is willing and is designated to be the Respondent’s permanency resource [specify]:

7. The Court has determined that APPLA with a significant connection to an adult willing to be a permanency resource for the Respondent is the best permanency plan for the Respondent because [specify]:

**II. Required Findings: Special Circumstances, Transitional Services, Out-of-State Placements, Indian Child Welfare Act and Qualified Residential Treatment Programs:**

❑ [Required where Respondent is 16 years of age or older and is placed]: The following special circumstances warrant placement of the Respondent [specify]:

❑ [Required where Respondent is 14 years of age or older and is placed]: The services, if

any, needed to assist the Respondent to make the transition from foster care to independent living are [specify]:

❑ [Required in cases in which the Respondent is placed outside New York State]: Placement outside New York State ❑ is ❑ is not appropriate and in the Respondent’s best interests;

**[Required if Respondent is Native-American; delete if inapplicable ]:**

❑ And the following having been duly notified [check applicable box(es)]:

❑ parent/custodian ❑ tribe/nation ❑ United States Secretary of the Interior;

And the tribe/nation having: ❑ appeared and participated as a party;

❑ appeared and declined to assume jurisdiction;

❑ appeared and requested transfer of jurisdiction;

❑ not appeared;

❑ **Required Findings if Placement in “Qualified Residential Treatment Program” is Requested [DELETE if inapplicable]:**

**This Court, upon examination of the motion papers and supporting affidavit(s); [initial placements only]: the Qualified Individual’s written assessment of the appropriateness of the requested placement; and any response thereto, including [specify]: ; and [specify other information considered]:**

**; and** ❑ **upon hearing testimony in relation thereto** ❑ **upon consent of all parties without a hearing, finds the following** [check applicable box(es)]:

A. The needs of the Respondent ❑can ❑cannot be met through placement in a foster family home because [specify facts and reasons]:

B. Placement of the Respondent in a Qualified Residential Treatment Program (QRTP)

❑ does ❑does not provide the most effective and appropriate level of care for the Respondent in the least restrictive environment because: [specify facts and reasons]:

C. Placement in [specify name of QRTP]:

❑is ❑is not consistent with the short-term and long-term goals for the Respondent , as specified in the Respondent’s permanency plan because [specify facts and reasons]:

D. The following efforts, if any, have been made to prepare the Respondent to return home, or to be placed with a fit and willing relative, foster family home, legal guardian or adoptive parent [specify]:

E. [Applicable to initial placements in QRTP; delete if inapplicable]: Where the Qualified Individual has determined that the placement of the above-named Respondent in the Qualified Residential Treatment Program (QRTP) is not appropriate, the Court nevertheless finds:

❑Circumstances exist that necessitate the continued placement of the above-named Respondent in the Qualified Residential Treatment Program (QRTP) as follows [specify facts and reasons]:

❑There is not an alternative setting available that can meet the above-named Respondent’s needs in a less restrictive environment; **and**

❑ It would be contrary to the welfare of the above-named Respondent to be placed in a less restrictive setting and continued placement in the QRTP is in the Respondent’s best interests because [specify facts and reasons]:

**NOW, after examination and inquiry into the facts and circumstances and after hearing the proof and testimony, it is, therefore,**

**A. Extension of Placement: Disposition of Petition** [Required; check applicable box]:

❑ ORDERED that the petition is GRANTED and the placement is extended to the following date [specify]: , subject to further orders of this Court.

❑ ORDERED that the petition is DISMISSED and the Respondent is discharged from the custody of [specify]: on [specify date no later than the date of expiration of the placement period]:

**B. Permanency Plan** [Required if placement extended; check applicable box(es)]:

ORDERED that Petitioner’s permanency plan for the Respondent [check applicable box]:

❑ is approved ❑ is modified,

as follows [check applicable box(es) and indicate time frame(s)]:

❑ reunification with the ❑ parent(s) ❑ person(s) legally responsible for Respondent’s care by [specify date]:

❑ placement for adoption upon filing of a petition to terminate parental rights by [specify date]: .

❑ referral for legal guardianship by [specify name and date]:

❑ permanent placement with the following fit and willing relative [specify name]:

by [specify date]: .

❑ **[Applicable ONLY to Respondents 16 years of age or older]**: permanent placement in the following alternative planned living arrangement [specify]:

(and it is further)

**C. Reasonable Efforts** [Check applicable box]:

[Applicable in cases in which the Respondent’s goal is reunification with the parent or guardian]:

❑ ORDERED that following reasonable efforts shall be made to make and finalize the Respondent’s goal of reunification [specify]:

; (and it is further)

[Applicable in cases in which the Respondent’s goal is adoption, guardianship or permanent living arrangement other than reunification; delete if inapplicable]:

❑ ORDERED that following reasonable efforts shall be made to make and finalize the child’s goal of [specify goal and describe efforts]:

; (and it is further)

**D. Service Plan** [Required]:

ORDERED that the service plan submitted by the Petitioner [check applicable box]:

❑ is appropriate ❑ should be modified as follows [specify]: ;

and shall be given by Petitioner to the ❑ parent(s) ❑ person(s) legally responsible for

Respondent’s care, along with a copy of this Order;

; (and it is further)

**E. Transitional Services:** [Optional in cases where the Respondent is 14 years of age or older; check box if applicable]:

❑ ORDERED that the Petitioner is directed to provide the following services determined

above to be needed to assist the Respondent to make the transition from foster care to

independent living [specify]:

; (and it is further)

**F. Out-of-State Placement**  [Required where the child has been placed out-of-state; check

box if applicable]:

❑ ORDERED that the placement of the child at [specify]:

❑ is appropriate and in the child’s best interests and is continued until [specify]:

❑ is not appropriate and in the child’s best interests and the child shall, therefore, be returned to New York State to be ❑ placed with [specify]: until [specify]:

❑ discharged to [specify]:

; (and it is further)

**G. Progress Reports, Notices and Visitation Plans** [Optional; check box(es) if applicable]:

❑ ORDERED that Petitioner shall make a progress report to the Court, the parties and the

attorney for the Respondent on the implementation of this order not later than 90 days from the

date of this order and every [specify period]: days thereafter

; (and it is further)

❑ ORDERED that if the above permanency plan for the Respondent is changed, notice shall

be provided to the Court, the parties and the attorney for the Respondent forthwith; (and it is

further)

❑ ORDERED that the ❑ parent(s) ❑ person(s) legally responsible for Respondent’s care be notified of the planning conference(s) to be held and of (his)(her)right to attend such

conference(s) with counsel or other person;

;(and it is further)

❑ ORDERED that Petitioner shall provide the ❑ parent ❑ person(s) legally responsible for Respondent’s care with visitation with the Respondent as follows [describe visitation plan]:

; (and it is further)

❑ ORDERED that Petitioner shall provide the following sibling(s) [specify]:

with visitation with the Respondent as follows [describe visitation plan]:

; (and it is further)

**H. Native-American Child** [Check box if applicable]:

❑ ORDERED that the following should be notified of this proceeding [specify]:

the ❑ custodian of the child; ❑ tribe/nation; ❑ United States Secretary of the Interior

❑ ORDERED that in light of the assumption of jurisdiction by the tribe/nation, this

petition is DISMISSED WITHOUT PREJUDICE.

1. **Notice of Absconding** [Required in all cases where child is placed with Commissioner of

Social Services]:

❑ ORDERED that if the child absconds from the above-named custodial person or facility, written notice shall be given within 48 hours to the Clerk of Court by the custodial person or by

an authorized representative of the facility, stating the name of the child, the docket number of

this procedure, and the date on which the child ran away; (and it is further)

**J.**❑ **Required Order if Placement in “Qualified Residential Treatment Program” is Requested [DELETE if inapplicable]:** A**fter examination and inquiry into the facts and circumstances [check box if applicable]:** ❑ **and after hearing the proof and testimony offered in relation thereto, it is therefore** [Check applicable box(es)]:

❑ORDERED, that the Petitioner’s application for placement of the Respondent in the “Qualified Residential Treatment Program” is GRANTED, and placement of the Respondent in [specify name of QRTP]: is hereby approved.

**OR**

❑ORDERED, that the Petitioner’s application for placement of the Respondent in the “Qualified Residential Treatment Program” is DENIED, and on or before [specify date]:

the above-named Respondent shall be [check applicable box and specify]:

❑ returned or released to the following parent [specify]:

❑ returned to or placed with the following legal guardian [specify]:

❑ returned to or placed with the following suitable adult/relative [specify]:

❑ returned to or placed in the following foster home [specify]:

❑returned to or placed in the following facility providing supports for pre-natal, post-partum and parenting youth: (specify]:

❑returned to or placed in the following residential program providing supportive services for youth suspected of being or at risk of becoming sexually exploited, as defined in Social Services Law §447-a (1) [specify]:

❑returned or placed in an available supervised setting, as defined in Social Services Law §371, that is approved and supervised by an authorized agency or the local social services district and that provides a transitional experience for older youth in which such youth may live independently [specify]:

**OR**

❑ On or before [specify date]: , Petitioner shall make such other arrangements for the above-named Respondent’s care and welfare that is in the best interests of the Respondent and in the most effective and least restrictive setting as the facts of the case require as follows [specify]:

**J. Deadline for Filing Next Permanency Petition** [Required if this is the first permanency hearing and placement is extended; not permitted if placement has already been extended twice]:

❑ **ORDERED that if the Respondent remains in foster care, Petitioner shall file a**

**petition for the next permanency hearing NO LATER THAN [specify date no later than 30 days before the expiration of the placement and the permanency hearing shall be**

**completed by [specify date]:**

; (and it is further)

ORDERED, that

).

ENTERED

Judge of the Family Court

Dated:

**PURSUANT TO SECTION 1113 OF THE FAMILY COURT ACT AN APPEAL**

**FROM THIS ORDER MUST BE TAKEN WITHIN 30 DAYS OF RECEIPT OF**

**THE ORDER BY APPELLANT IN COURT, 35 DAYS FROM THE DATE OF MAILING OF THE ORDER TO APPELLANT BY THE CLERK OF COURT,**

**OR 30 DAYS AFTER SERVICE BY A PARTY OR THE ATTORNEY FOR THE**

**CHILD UPON THE APPELLANT, WHICHEVER IS EARLIEST.**

Check applicable box:

❑ Order mailed on [specify date(s) and to whom mailed]:

❑ Order received in court on [specify date(s) and to whom given]:

1. The petition must be filed not less than 30 days prior to the expiration of the placement. [↑](#footnote-ref-1)