The Philadelphia Department of Human Services
Children and Youth Division
Procedural Guide

TO: **All CYD Social Work Staff**

FROM: **John McGee, Deputy Commissioner**
Pamela Mayo, Operations Director

RE: **Revised Voluntary Placement Agreement and New Instruction Sheet**

EFFECTIVE: April 3, 2006

The purpose of this Procedural Guide is to inform DHS staff of revisions to the Voluntary Placement Agreement (VPA) and to introduce the new VPA Instruction Sheet. Changes have been made to the organization of the Voluntary Placement Agreement and additional language has been added to clearly explain to parents/guardians/custodians their rights and responsibilities. Procedural changes for completing a VPA are included in the new VPA Instruction Sheet. The VPA itself must be kept in the child's DHS file.

The DHS social worker continues to be responsible for ensuring that parents/guardians/custodians have read and fully understand the information contained in the VPA before it is completed and signed. The social worker and supervisors' signatures certify that they have reviewed the form for completeness and are in agreement to the plan for placement.

Some of the major clarifications and procedural changes are as follows:

- DHS social workers should not use a VPA as a threat or to coerce a parent/guardian or legal custodian into placing their child.
- A VPA will no longer be used in cases of serious or severe abuse and neglect. A restraining order will be required in such cases to place a child in out of home care.
- The DHS social worker must explain to the parent/guardian/custodian that the Department requires full disclosure regarding the non-custodial parent and/or relatives, as they may be used as an alternate placement resource.
- If the parent is illiterate, unable to write, or has limited English proficiency, a witness signature is necessary to verify that the VPA was explained in its entirety.
- The DHS social worker should determine if the parent, legal guardian or legal custodian is employed or has the financial resources to contribute to the care of the child and advise the Law Department when preparing the shelter care petition.
- If there is a question as to whether or not a person has custody of the child and the authority to sign the VPA, the DHS social worker should contact the Law Department.
- The parent/guardian/custodian placing the child must complete the section concerning the reason for placement.

Copies of the revised VPA and VPA Instruction Sheet can be found on Forms Word and DHS Central.

Questions regarding this Procedural Transmittal may be addressed to:

Patricia Ripoll, Policy and Planning Administrator	x4112
Susan Weinberg, Program Supervisor	x4116
Jack H. Markowitz, Program Analyst	x4119

VPA INSTRUCTION SHEET

This document is an instruction sheet for DHS social workers only. It should be removed and not be given to the parent or legal guardian.

A Voluntary Placement Agreement (VPA) is a contract between a child's parent, legal guardian or legal custodian and the Department of Human Services by which the parent requests that DHS assume legal and physical custody of a child. A VPA is only valid for thirty days. A child should be placed on the date that the VPA is signed. When a child is placed via a VPA, the social worker must come to the Law Department within twenty four hours to file a petition with Family Court. A parent, legal guardian or legal custodian can revoke a VPA until such time that the court orders that DHS has legal custody of a child. If a parent revokes the VPA prior to the case coming to court, a social worker must call the Law Department immediately to determine whether the child should be returned to the parent or if a restraining order should be obtained.

When should a VPA not be used?

- A VPA should not be used as a threat or to coerce a parent. For example, it is not permissible for a social worker to tell a parent to sign a VPA and if he/she doesn't the social worker will request a restraining order.
- A VPA should not be used if there is a question regarding the parent's competency. (e.g. if a parent appears to be under the influence of drugs and/or alcohol or in the midst of an active mental health crisis). In these situations, if the child/ren are at imminent risk, a restraining order should be requested.
- A VPA will no longer be used in cases of serious or severe abuse and neglect.

What should the social worker know about completing the VPA?

- Before leaving the meeting with a parent, the DHS social worker should take the time to ensure that the VPA is completed in its entirety.
- A child must be placed on the date that the VPA is signed.
- Parents should fill out the reasons for placement not the DHS social worker.
- The DHS social worker should ensure that the VPA is signed (not printed) and dated by the parent.
- The DHS social worker and social work supervisor must sign and date the VPA.
- If a parent is illiterate, unable to write, or has limited English proficiency, a witness signature is necessary to verify that the VPA was explained in its entirety.
- If there is a question as to whether or not a person has custody of the child and therefore the authority to sign the VPA, the DHS social worker should contact the Law Department.
- The DHS social worker should ascertain whether the parent is working or has financial resources to contribute to the care of the child. If so, the social worker should advise the legal assistant when drafting the dependency petition.

For questions regarding the appropriateness or the completion of a VPA, please call the Child Welfare Unit in the City of Philadelphia Law Department during business hours at 215-683-5135. If there is a question after hours, the attorney on call can be reached through the hotline at 215-683-6100.

VOLUNTARY PLACEMENT AGREEMENT	**City of Philadelphia** - DEPARTMENT OF HUMAN SERVICES CHILDREN AND YOUTH DIVISION

Purpose: The purpose of this Voluntary Placement Agreement (VPA) is to confirm the mutual agreement between the Philadelphia Department of Human Services (DHS) and the child(ren)'s parent(s), legal custodian(s), or legal guardian(s) that DHS will provide placement and assume temporary legal custody of the child(ren) under the conditions stated in this Agreement.

Prior to signing the VPA, each point must be read and discussed with the parent(s)/legal guardian(s)/legal custodian(s).

- I/ We agree to accept financial responsibility for the child(ren) based upon my /our financial situation. DHS will immediately request a child support order in Family Court- Domestic Relations branch and/ or make an application to amend Public Assistance if the child receives such benefits.
- I/We understand that the Department will consider a goal other than reunification, such as adoption, if the child remains in the custody of the Department. By signing the VPA, legal custody of the child(ren) will be transferred to the Department of Human Services by the Court within 30 days of the signing of the VPA.
- I/We understand that the Department will require full disclosure regarding the non-custodial parent and/ or relatives' name(s), address(es), phone number(s), social security number(s) or other identifying information. These relatives may be used as an alternative placement for the child(ren).
- I/We understand that I/We have the right and obligation to visit the child(ren) as stated in the visiting schedule that is part of the Family Service Plan. I/We will have the opportunity to visit at least once every 2 weeks at a mutually agreeable time and place that permits as much natural interaction as possible.
- I/We understand that the DHS shall file a shelter care petition with Family Court-Juvenile Branch after the child(ren)'s placement. A court hearing will be held in Family Court-Juvenile Branch. DHS may request that the child(ren) be adjudicated dependent and that DHS continue to assume temporary legal custody of the child(ren).

***IN RE**: (family surname)*		**DHS # :**
SUF.	**CHILD'S NAME**	**BIRTHDATE**

(Parent(s)/Legal Custodian(s)/Legal Guardian(s) must state fully in this section the specific reason(s) placement is requested).
If this section is completed by a Parent Representative/Witness, then he/she must sign in the Witness Section on page 2.

I/We, _____ , request temporary
(Parent(s)/Legal Custodian(s)/Legal Guardian(s))

placement of _____ because
(Child/Children)

_____

_____

_____

_____

_____

_____

The alternatives to placement must be discussed with the parent(s)/legal custodian(s)/legal guardian before this VPA is signed. Please list the alternatives considered and the outcome of the discussion about the alternatives to placement:	
ALTERNATIVE TO PLACEMENT	**OUTCOME**

DHS agrees to provide placement, clothing, medical care and other needed services, and to arrange visitation. The goals of DHS are to maintain family relationships and to return the child(ren) home as quickly as possible. DHS will attempt to provide the necessary services to accomplish this goal, either directly or through referral to other community resources.

- I/We have the right to obtain information about the child(ren), and to be consulted about and approve all medical and educational decisions concerning the child(ren) while the child(ren) remain(s) in voluntary placement.
- I/We agree to work with DHS to plan for and adequately protect and serve the interests of the child(ren). I/We agree to meet regularly with the child(ren)'s DHS social worker and/or child care agency social workers. I/We realize that I/we have the right to be represented by legal counsel or other spokesperson during conferences with the DHS social worker about the child(ren)'s temporary placement.
- I/We agree to inform DHS of any change in my/our address, telephone number, and employment, and to maintain regular and meaningful contact with the child(ren).
- I/We understand that I/we may refuse to temporarily place the child(ren) with DHS. I/We may revoke this agreement and have the right to the immediate return of the child(ren) unless the Court orders that temporary legal custody of the child(ren) be transferred to DHS.

My/Our signature indicates that I/we have read and understand this Agreement and I/we have voluntarily requested that DHS place the child(ren). I/We have not been forced or offered any money or goods to sign this Agreement.

Signature of PARENT/LEGALCUSTODIAN/LEGAL GUARDIAN		DATE SIGNED:
ADDRESS		PHONE: ( )
Signature of PARENT/LEGAL CUSTODIAN/LEGAL GUARDIAN		DATE SIGNED:
ADDRESS		PHONE: ( )
Signature of WITNESS	Name of WITNESS	DATE SIGNED:
ADDRESS of Witness		PHONE: ( )
We certify that we have reviewed this document, agree that placement is necessary, and that placement will occur in the least restrictive setting available for the child(ren).		
Signature of SOCIAL WORKER		DATE SIGNED:
Signature of SOCIAL WORK SUPERVISOR		DATE SIGNED: