

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 8: Out-of-Home Services Section 36: Expectant Youth and Youth with Children	
	Effective Date: September 1, 2024	Version: 6

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POLICY OVERVIEW

It is important that all expectant youth and/or parenting youth in out-of-home care receive appropriate psychological, medical, legal, and financial services to ensure the safety and well-being of the expectant youth, parenting youth, and their children.

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PROCEDURE

The Indiana Department of Child Services (DCS) will ensure a youth who is a parent and the youth's child are placed together in the same home, unless extenuating circumstances exist (e.g., medical needs, psychological needs, home environment) that prevent the parenting youth from caring for the child.

DCS should not file a Child in Need of Services (CHINS) case on or remove the child of a parenting youth who is in out-of-home care unless there is endangerment that warrants DCS to file proceedings with the court for the safety of the child. If the parenting youth's child is determined to be a CHINS and DCS is granted wardship of the child, DCS will create a separate case in the case management system. DCS will also complete a separate Title IV-E eligibility determination (see policy 4.28 Removals from Parents, Guardians, or Custodians).

Note: DCS recognizes that parenting youth, both male and female, have the same rights and responsibilities as all parents; therefore, all expecting and parenting youth in out-of-home care may be referred for services to assist in developing the youth's parenting skills (e.g., fatherhood classes, counseling, parenting classes).

Pregnant Youth

For all pregnant or expecting youth in out-of-home care, the Family Case Manager (FCM) will:

1. Ensure the parent, guardian, or custodian of a pregnant youth who is entering out-of-home care is aware the youth is pregnant, or inform the parent, guardian, or custodian of the pregnancy if the youth becomes pregnant while in out-of-home care;
2. Notify the DCS Staff Attorney if a youth is pregnant when the youth enters out-of-home care or becomes pregnant while in out-of-home care, to ensure the court is notified and to request the appointment of a Guardian ad Litem (GAL) or Court Appointed Special Advocate (CASA) to represent the pregnant youth's interests to the court;
3. Ensure that a pregnant youth has access to prenatal care and is connected to pregnancy options counseling services;

Note: Youth, 16 years of age or older, may consent to the youth's own health care concerning pregnancy, delivery, and postpartum care for 60 days after the birth of the child. A health care provider must make a reasonable effort to contact the parent of a youth, who is 16 years of age and older, before providing treatment concerning pregnancy, delivery, and postpartum care. If the youth's parent cannot be reached, the youth may consent to treatment; however, the health care provider must act in a manner that is in the best interests of the youth and the fetus.

4. Hold a Child and Family Team (CFT) Meeting to assist the youth with critical decisions regarding the youth's pregnancy and develop an action plan to address prevention services, placement and/or concurrent planning (see policies 5.07 Child and Family Team Meetings and 5.15 Concurrent Planning/Second Permanency Plan - An Overview);
5. Contact the Indiana Department of Health (IDOH) Maternal and Child Health (MCH) MOMS Helpline (1-844-624-MOMS[6667]) to connect the pregnant youth to an appropriate home visiting program (also see 4.G Tool: Community Resources and Prevention Services);
6. Ensure the expectant youth's Case Plan/Prevention Plan includes information regarding services being offered to prevent removal of the minor parent's child;
7. Consult with the DCS Staff Attorney regarding the appointment of counsel for the expectant youth; and
8. Offer family services to the expectant youth and the expectant youth's parent, guardian, or custodian to address any issues related to the pregnancy (see policy 5.10 Family Services).

Expectant Fathers

For all expectant fathers in out-of-home care, the FCM will:

1. Ensure the youth's parent, guardian, or custodian is aware the youth is an expectant father;
2. Notify the DCS Staff Attorney if a youth is an expectant father when the youth enters out-of-home care or becomes an expectant father while in out-of-home care, to ensure the court is notified and to request the appointment of a GAL or CASA to represent the expectant father's interests to the court;
3. Hold a CFT Meeting to assist the youth with critical decisions regarding the expectant father's child, and develop an action plan to address prevention services, placement, and concurrent planning, if applicable (see policies 5.07 Child and Family Team Meetings and 5.15 Concurrent Planning/Second Permanency Plan- An Overview);
4. Ensure the expectant father's Case Plan/Prevention Plan includes information regarding services being offered to prevent removal of the minor parent's child (see policy 5.08 Developing the Case Plan/Prevention Plan);
5. Consult with the DCS Staff Attorney regarding the appointment of counsel for the expectant youth; and
6. Offer family support services to the expectant father and the expectant father's parent, guardian, or custodian to address any issues related to the youth becoming a father (see policy 5.10 Family Services).

Note: If paternity needs to be established, see policy 5.05 Establishment of Paternity.

Parenting Youth

For parenting youth in out-of-home care, the FCM will:

1. Notify the DCS Staff Attorney that the youth has a child to ensure the court is notified;

2. Discuss with the parenting youth whether the youth desires to involve the CFT in decisions about the youth's child (see policy 5.07 Child and Family Team Meetings for further guidance);
3. Allow the parenting youth to make informed decisions about the youth's child, free from undue influences and/or coercion including ensuring the youth is able to make decisions regarding their child without undue influence or coercion from the youth's caregiver or members of the CFT;

Note: If there are concerns, the FCM will staff with the FCM Supervisor and DCS Staff Attorney.

4. Coordinate prevention or family services for the parenting youth including but not limited to parenting classes if the youth will be involved in parenting the child (see policy 5.10 Family Services);
5. Ensure the parenting youth has information about child support, Medicaid, and childcare;
6. Contact the IDOH MCH MOMS Helpline (1-844-624-MOMS[6667]) to connect the parenting youth to an appropriate home visiting program (also see 4.G Tool: Community Resources and Prevention Services);
7. Create a new Visitation Plan if the parenting youth and child will not be living together, and the youth plans to remain involved in the child's life (see policy 8.12 Developing the Visitation Plan); and
8. Ensure the parenting youth's Case Plan/Prevention Plan includes information regarding services being offered to prevent removal of the youth's child (see policy 5.08 Developing the Case Plan/Prevention Plan).

The FCM Supervisor will:

1. Ensure the FCM has notified the DCS Staff Attorney and the parent, guardian, or custodian that the youth is an expecting a child and/or has a child;
2. Staff any concerns for the expecting or parenting youth; and
3. Assist and/or attend any CFT Meetings and court hearings, when necessary.

The DCS Staff Attorney will consult with the FCM and/or FCM Supervisor as requested to discuss any issues which arise including but not limited to requesting appointed counsel to assist the youth with any legal decisions as applicable.

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RELEVANT INFORMATION

Definitions

N/A

Forms and Tools

- [4.G Tool: Community Resources and Prevention Services](#)
- Case Plan/Prevention Plan (SF 2956) - available in the case management system
- [IDOH Maternal and Child Health \(MCH\) MOMS Helpline](#) - 1-844-624-MOMS(6667)
- Visitation Plan - available in the case management system

Related Policies

- [4.28 Removals from Parents, Guardians, or Custodians](#)
- [5.05 Establishment of Paternity](#)
- [5.07 Child and Family Team \(CFT\) Meetings](#)

- [5.08 Developing the Case Plan/Prevention Plan](#)
- [5.10 Family Services](#)
- [5.15 Concurrent Planning/Second Permanency Plan – An Overview](#)
- [8.12 Developing the Visitation Plan](#)
- [8.31 Testing and Treatment for HIV, STDs, and Other Communicable Diseases](#)

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LEGAL REFERENCES

- [IC 16-36-1-3.5: Consent by pregnant minor for pregnancy health care; contacting minor's parent or guardian](#)
- [IC 16-41-6-8: Informing pregnant woman of information; documenting information given and a refusal of test; information if test results positive; confidentiality](#)
- [42 USC 672: Foster Care Maintenance Payments Program](#)

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PRACTICE GUIDANCE- DCS POLICY 8.36

Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.

Financial Support

Even when the Indiana Department of Child Services (DCS) does not have custody of the minor parent's child, additional foster care payments can be added to the per diem of the minor parent, to enable the child to be placed with that minor parent. These payments are authorized without DCS taking custody of the youth's child.

Human Immunodeficiency Virus (HIV) Screening for Pregnant Women

In accordance with Indiana Law (IC 16-41-6-8), all pregnant women are required to be tested for HIV infection. The woman does have the right to refuse such testing, and the refusal will be noted in the pregnant woman's medical records. For more information on HIV testing, see policy 8.31 Testing and Treatment for HIV, STIs, and Other Communicable Diseases.

Parents who are not the Primary Caregiver

In some cases, the youth who is a parent is not the child's primary caregiver. The child may live with the other parent, foster parent, or another family member. If the youth is not the primary caregiver, the youth may still be involved in the child's rearing. Any time a youth has a child and is involved in that child's life, the youth should be offered family support services, including parenting classes.

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