



Form 1960

August 2015
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BILL OF RIGHTS



FOR
NEW
HAMPSHIRE
YOUTH IN
CARE



Division for Children, Youth and Families
NH Department of Health
and Human Services
www.dhhs.state.nh.us/dcyf

The New Hampshire Division for Children, Youth and Families (DCYF) recognizes the following rights of youth in out-of-home care. These rights are intended to guide DCYF and its providers in the delivery of care and services to youth in out-of-home placement with the commitment to permanency, safety, and well-being. These rights provide youth with a “voice” regarding their Division involvement while ensuring opportunities for “normal” life experiences. This Bill of Rights was developed by the New Hampshire Youth Voices DCYF Youth Advisory Board.



PRACTICE MODEL BELIEFS

- Everyone deserves to be safe.
- All children and youth need and deserve permanency.
- Everyone needs and deserves a life of well-being.
- Everyone deserves to be treated with courtesy and respect.
- Prevention reduces child abuse, neglect and delinquency and promotes safety for children, youth, families and communities.
- All children, youth and families have strengths.
- All children and youth belong with family.

- Placement and Care
 - * Ensure safety from any exploitation
- Community Involvement
- Health and Well-Being

Youth Signature

CPSW/JPPO Signature

Placement Provider

Date

CASE PLANNING /PERMANENCY

- To be involved, as appropriate, in the development of the case plan, and to have a case plan that addresses your special needs.
- To request to the Division that up to two individuals, other than your foster parent or caseworker, become members of your case planning team and participate in the development of your case plan.
- To have one person that you select act as your advisor or advocate and to ensure that you have the opportunity to participate in age or developmentally appropriate activities.
- To understand and have a voice in the creation of your permanency plan and not to have it changed without your input.
- To participate in the creation of your treatment plan and have a say in treatment decisions.
- To object, in writing or directly to your caseworker, or treatment provider to any of the required actions in the case plan, permanency plan, or treatment plan that were not discussed with you.
- To attend court hearings and speak to the judge about what you want to have happen in your case.
- To be made aware of any and all meetings about your case and have opportunities to find a way to resolve potential barriers to your participation; like transportation or school.

NORMALCY

- To be able to participate in “normal” activities consistent with your age and developmental level, unless restricted by your treatment plan or case plan.
- To be able to advocate to appropriately utilize technology, such as social networking sites and cell phones, based on your level of maturity and responsibility and taking into account the environment in which you are living, the support of your treatment team, and your ability to maintain privileges.



Receipt for Bill of Rights For Youth In Care

The New Hampshire Division for Children, Youth and Families (DCYF) recognizes the following rights of youth in out-of-home care. These rights are intended to guide DCYF and its providers in the delivery of care and services to youth in out-of-home placement with the commitment to permanency, safety, and well-being. These rights provide youth with a “voice” regarding their DCYF involvement while ensuring opportunities for “normal” life experiences. This Bill of Rights was developed by the New Hampshire Youth Voices DCYF Youth Advisory Board.

The youth has been provided with their Bill of Rights which include the following heading area's:

- Case Planning/Permanency
 - * Involvement in Court Proceedings
- Relationships with Family/Friends
 - * Visitation
- Normalcy
 - * Access to age and developmentally appropriate activities
- Privacy/Personal Space and Belongings
- Communication with CPSW/JPRO
 - * Access to what you need when you leave care (medical and educational record, social security card etc.)
- Personal Appearance/Expression
- Education

Find additional resources:
on Facebook: Keywords — NH Youth
Voices (Resources)

DCYF Adolescent Program: [http://
www.dhhs.state.nh.us/dcyf/adolescent.htm](http://www.dhhs.state.nh.us/dcyf/adolescent.htm)

I have received and read the Bill of Rights For Youth In
Care.

Youth Signature

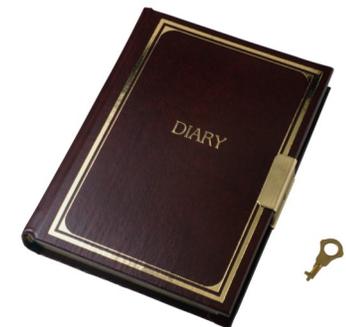
CPSW/JPPPO Signature

Placement Provider

Date

PRIVACY/PERSONAL SPACE AND BELONGINGS

- To be able to pack your own personal belongings and to have them secure and transported with you.
- To have your own space, in your placement, where you can keep your personal belongings.
- To have access to your personal belongings, personal space, and privacy, with allowance for safety.
- To have your privacy protected and your confidentiality maintained, unless you give permission to share information or you are in danger of harming yourself or others.
- To live in a safe and respectful setting where searches of person and belongings are done in a considerate and respectful manner and only when necessary.



RELATIONSHIP WITH FAMILY/FRIENDS

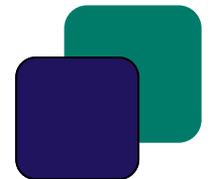
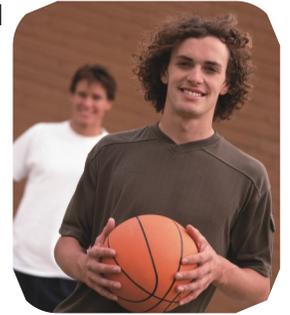
- To receive support from your Child Protective Service Worker (CPSW) or Juvenile Probation or Parole Officer (JPPO) and foster family/ provider in maintaining positive contact with significant people (relatives, friends, teachers, and community supports), including assistance with obtaining contact information and visitation.



- To have uncensored communication, including sending and receiving unopened communications and having access to a telephone, unless otherwise ordered by the court.
- To have the option to visit and talk with your parents, siblings, relatives, and other individuals important to you unless restricted by the court and/or DCYF.
- To be provided with an explanation for contact restrictions with your parents, siblings, relatives, and other individuals important to you.
- To be provided with assistance, as desired, in reconnecting with your family of origin.



- To receive individualized care and attention based on your unique skills, needs, and goals.
- To know exactly what is expected of you by the placement provider at the time of placement.
- To be made aware of the grievance process if you have concerns about your placement and to have access to an advocate to help with this process as needed.
- To be treated as a family member if placed in foster or relative care and, whenever possible, be included in the family's activities, holidays, and rituals, and to be able to freely discuss reason(s) with your CPSW/JPPO and caregiver if you are choosing not to participate.
- To be informed of, and prepared for, any and all placement changes before they occur, whenever possible
- To be able to continue relationships when exiting care with individuals who have helped you while in care, unless restricted by your treatment plan, case plan, or agency policy.



PLACEMENT AND CARE

- To have family and relatives explored first as potential placement providers.
- To be provided with information about potential foster family, relative, or program and be able to meet them in person before placement occurs whenever possible.
- To have a voice regarding what is the most appropriate placement for you.
- Whenever possible, have an immediate visit, within 24 hours of placement, with your family and to have regular visits with your parents and/or other relatives unless prohibited by court.
- To be treated with courtesy and respect, and to receive healthy food, adequate clothing, and appropriate personal hygiene products.
- To live in a safe, nurturing environment, where your permanency and well-being are supported and where your goals, interests and participation in social and school activities are encouraged.
- To be protected from physical, sexual, emotional or other abuse, including corporal punishment (hitting or spanking as a punishment) human trafficking or any other form of exploitation.



COMMUNICATION WITH CPSW/JPPO

- To be treated with courtesy and respect by DCYF staff, foster parents, residential staff, and providers without regard to race, ethnicity, sexual orientation, gender identity, religion, and/or disability.
- To be informed in a manner appropriate to age and developmental level of the reason(s) that DCYF became involved with your family and why you are in care.
- To receive honest information about decisions that DCYF is making that affect your life and to be notified of changes that affect your permanency, safety, stability, or well-being.
- To be informed of the name and phone number of your assigned CPSW or JPPO.
- To have regular communication with your CPSW/JPPO, at least once a month, which shall include meeting with



you alone and conferring with your residential treatment facility, relative or foster parent.

- To be made aware of the process for contacting your CPSW/JPPO's supervisor regarding any questions or concerns.
- To be informed of the names and phone numbers of your assigned guardian ad litem (GAL) and/or attorney and be aware that you can contact your GAL or attorney.
- To have access to information contained in your medical, dental, and educational records held by DCYF, as well as personal documents, such as your social security card and birth certificate.
- To be provided with copies of your medical, dental, and educational records held by DCYF along with your social security card and certified birth certificate prior to leaving care at the age of 18 or older.
- To obtain a non-driver's identification card or another suitable form of photo identification prior to leaving care at the age of 18 or older.
- To be provided with information about health insurance options prior to leaving care at the age of 18 or older.

COMMUNITY INVOLVEMENT

- Whenever possible attend religious services and activities of your choice and to preserve your cultural heritage.
- To attend school and participate in extracurricular and personal enrichment activities, consistent with your age and ability



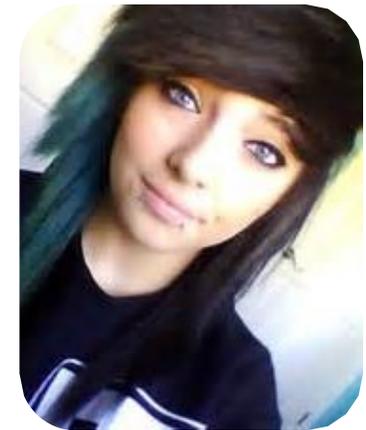
HEALTH AND WELL-BEING

- To have access to medical, dental, vision, mental and behavioral health services, for routine, acute, and emergency care, as needed.
- To be encouraged, if age and developmentally appropriate, to make your own appointments with medical and dental care providers.
- To be fully informed of the risks and benefits of recommended medications or medical procedures.
- To have a voice in decisions about prescription medications or medical procedures.
- To not receive a consequence for refusal to take medications or consent to a medical procedure, and to be made aware of health risks associated with your decision as well as the potential for activity restriction and/or increased supervision to ensure your safety and the safety of others.



PERSONAL APPEARANCE/EXPRESSION

- To be allowed to change your appearance, including hair, piercings, etc., if legal and with the consent of your parent or legal guardian and supported by your treatment team.



ADULT LIVING PREPARATION

- To be informed of any and all assistance that DCYF offers for youth related to permanency planning, education, employment, housing, and well-being.
- To have opportunities to earn an income through employment, allowance, etc.
- To open and maintain a bank account and manage personal income consistent with your age and ability.
- To receive assistance in acquiring life skills, education, training, and career guidance to accomplish personal goals, prepare for the future and be a self-sufficient adult after you transition from care.
- To have an achievable transition plan when you leave care that is created by you and your supports.



EDUCATION

- To receive a free and appropriate education, with minimal disruption to your education and retention in your home school if appropriate.
- To get a referral for special education services when applicable, including where appropriate, the appointment of an educational surrogate.
- To have all necessary information shared between the school and the Department, including information on attendance and educational progress.

