CHILDREN & FAMILY SERVICES HANDBOOK

REPLACES:

SECTION: PAGE NO.: ISSUED/REVISED:

REPRODUCTIVE AND SEXUAL HEALTH
EDUCATION AND RIGHTS FOR FOSTER YOUTH

SECTION: 31-925 PAGE NO.: 1

EFFECTIVE: 11-30-20

I. OVERVIEW

Existing law provides youth and nonminor dependents (NMDs) in foster care with certain reproductive and sexual health care rights. The passage of SB 528 in 2013 and SB 89 in 2017 added personal rights of foster youth to have access to age-appropriate, medically accurate information about reproductive health care, the prevention of unplanned pregnancy, and the prevention and treatment of sexually transmitted infections (STIs).

II. POLICY

For foster youth who are **10 years old and older**, the Social Worker (SW) is required to discuss with youth and NMDs their personal rights, including their reproductive and sexual health care rights, upon entry into foster care and at least once every six months.

State law mandates SWs to inform a youth or NMD in foster care of his/her rights regarding sexual and reproductive health care including:

- A. The right to receive medical services, including reproductive and sexual health care.
 - 1. The right to be provided transportation to reproductive and sexual health-related services in a timely manner.
- B. The right to **consent to, or decline, medical care** (without need for consent from a parent, caregiver, guardian, social worker, probation officer, court, or authorized representative) for:
 - 1. The prevention or treatment of pregnancy, including contraception, at any age.
 - 2. Abortion, at any age.
 - 3. Diagnosis and treatment of sexual assault, at any age.
 - 4. The prevention, diagnosis, and treatment of STIs, at age twelve (12) and older.
- C. The right to **access** age-appropriate, medically accurate information about reproductive and sexual health care without discrimination or harassment, including but not limited to:
 - 1. The prevention of an unplanned pregnancy, including abstinence and contraception, **at any age**.

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2. Abortion care and other pregnancy services, at any age.

3. The prevention, diagnosis, and treatment of STIs, including but not limited to, the availability of the Human Papillomavirus (HPV) vaccination, at age twelve (12) and older.

Case Plans also must be updated annually to indicate that SW has informed youth of the aforementioned services, their confidentiality rights, and offered to assist in removing any barriers to accessing sexual and reproductive health information and services.

III. **CONFIDENTIALITY/PRIVACY RIGHTS:**

- Α. If the youth has the right to personally consent to medical services, such services shall be provided confidentially and maintained as confidential between the provider and the youth to the extent required by HIPAA. Disclosure of services may only be provided through written consent of the youth or through a court order.
 - 1. When a youth has a right to consent, examinations and/ or treatment by a medical provider shall be private unless the youth specifically requests otherwise.
- B. The right to storage space and to be free from unreasonable searches of his/ her belongings. Contraception cannot be taken away as part of a disciplinary measure or for religious beliefs, personal biases and/ or judgments of another individual.
- C. The right to independently contact state agencies, including the Community Care Licensing Division of the California State Department of Social Services (CDSS) and the State Foster Care Ombudsperson, regarding violations of rights, to speak to representatives of these offices confidentially, and to be free from threats or punishment for making complaints.
 - 1. Depending on the type of facility and age of the child/youth/NMD, to have personal rights posted and/ or explained in an age and developmentally appropriate manner. and provided to the child/youth/ NMD.

III. **DOCUMENTATION**

Α. SWs must review Case Plans annually and update them as necessary to document that a youth or NMD (ages 10 and up) has received comprehensive sexual health education which meets the requirements established in the California Health Youth Act (CHYA) (Education Code sections 51930-51939).

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- B. If the child/NMD has not received or will not receive this instruction through school, at least one time in junior high and one time in high school, the Case Plan must document how the County has ensured the child/NMD received education through an alternative source that meets the standards of the CHYA.
- C. Information about collateral contacts made on the youth's behalf or assistance provided to a youth in facilitating their access to reproductive health care and services does not belong in the Case Plan document due to the protected and sensitive nature of this information.

Only the SW's efforts and actions to provide the youth with this type of information can be shared absent the youth's written consent. Legally protected information (i.e., whether or not the youth is sexually active, a youth's birth control methods, a youth's pregnancy, or a youth's decision to terminate a pregnancy) may not be documented in the Case Plan or elsewhere without the written consent of the youth (unless there is suspected abuse/exploitation).

D. In addition, the Case Plan for a child or NMD who is, or who is at risk of becoming, the victim of commercial sexual exploitation (CSEC), shall document the services provided to address that issue.

NOTE: For instructions on documenting and entering pregnancy-related information in CWS/CMS and the practice of capturing this information as either an observed condition or a diagnosed condition, please refer to ACL 16-32.

IV. **TRAINING**

With the passage of SB 89, all county SWs, group home and STRTP administrators, resource families, and juvenile court judges, commissioners, and referees shall receive training on the reproductive rights and sexual health care issues of youth in foster care.

V **RESOURCES**

A. **Forms**

The following Know Your Rights pamphlet is to be provided to youth in a regular basis no less than every 6 months.

PUB 490 Know Your Reproductive and Sexual Health Rights PUB 490 SPANISH Know Your Reproductive and Sexual Health Rights

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B. State Desk Guides

- Healthy Sexual Development Resource Guide for Children's Residential Facilities and Resource Families
- A Guide for Case Managers: Assisting Foster Youth with Healthy Sexual **Development and Pregnancy Prevention**
- C. Online Video-Based Curriculum for Sexual and Reproductive Wellness in Foster Care

VI REFERENCES

- All County Information Notice (ACIN) I-06-20 New Resources for Case Management Workers for Documenting, Protecting, and Sharing Reproductive and Sexual Health Information for Youth and Non-Minor Dependents (NMDs) in Foster Care
- All County Letter (ACL) 18-61 New Mandates Regarding Case Plan Documentation And Training Related To Reproductive And Sexual Health Care Needs And Rights Of Foster Youth
- ACL 18-44 New And Revised Resource Materials Regarding Healthy Sexual Development And Pregnancy Prevention For Youth In Foster Care
- ACL 16-88 California's Plan For The Prevention Of Unintended Pregnancy For Youth And Non-Minor Dependents (NMDS) In Foster Care
- ACL 16-82 Reproductive And Sexual Health Care And Related Rights For Youth And Non-Minor Dependents (NMD) In Foster Care
- ACL 16-32 Documentation Of Pregnancy And Parenting In The Child Welfare Services/Case Management System For Minor And Non-Minor Dependents
- ACL 14-38 New Health Rights And Social Worker And Probation Officer Responsibility To Educate Foster Children And Non-Minor Dependents On Foster Youth Personal Rights
- Senate Bills 528 and 89
- Civil Code Section 56-103
- Family Code Section 6923, 6926 and 6928
- Welfare and Institutions Code (WIC) 369, 16001.9, 16002.5, 16521.5

CONTACT PERSON: Persons with questions concerning this department manual section may contact the Program Analyst.

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