



SERVICE
ALTERNATIVES

CHILDREN & FAMILY SERVICES

FOSTER CARE MANUAL

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A. WHAT IS THE PHILOSOPHY OF THE SERVICE ALTERNATIVES FOSTER CARE PROGRAM?

Service Alternatives (hereafter referred to as SA) is committed to using a Family Centered Practice model in working with families and foster families. In using this approach, SA supports and strengthens families and communities through involvement, education, awareness, growth and support. A Family Centered Practice model embraces the following philosophy:

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- FAMILIES ARE THE PRIMARY INFLUENCE IN THE LIVES OF CHILDREN. CHILDREN GAIN THEIR IDENTITIES FROM THE FAMILY, AS THE FAMILY IS THE ONE CONSTANT IN A CHILD'S LIFE, WHILE STAFF AND SERVICES WILL CHANGE.
 - FAMILY CENTERED PRACTICE APPRECIATES FAMILIES AS FAMILIES, AND CHILDREN AS CHILDREN, RECOGNIZING THAT THEY POSSESS A WIDE RANGE OF STRENGTHS, CONCERNS, EMOTIONS, AND ASPIRATIONS. FAMILY CENTERED PRACTICE IS STRENGTH-BASED. THIS EMPOWERS PARENTS TO FOCUS ON WHAT THEY DO WELL, AND DISCOVER THE HIDDEN STRENGTHS AND TALENTS WITHIN THE CHILDREN THEY SERVE.
 - FAMILY CENTERED FOSTER CARE CREATES PARTNERSHIPS WITH FAMILIES. TRADITIONAL PARTNERSHIP MODELS PLACE FOSTER PARENTS IN A PASSIVE ROLE OF BEING INFORMED OR EDUCATED. FAMILY CENTERED PRACTICE PLACES FOSTER PARENTS IN A CREATIVE ROLE OF ESTABLISHING GOALS AND MAKING DECISIONS. IN FAMILY CENTERED FOSTER CARE, FAMILIES KNOW THAT FEEDBACK WILL FACILITATE CHANGE.
 - FAMILY CENTERED FOSTER CARE SUPPORTS AND TRAINS FOSTER PARENTS IN AN EFFORT TO MAINTAIN CONSISTENT, QUALITY CARE FOR CHILDREN. SPECIAL TOPIC TRAININGS ASSIST FOSTER PARENTS IN BECOMING CONFIDENT THAT THEY HAVE THE SKILLS TO SERVE HIGH NEEDS CHILDREN.
 - PROFESSIONALS, SUCH AS THERAPISTS, TRAINERS, AND PROGRAM STAFF, BRING INFORMATION TO PARENTS ABOUT CHILD DEVELOPMENT AND ABOUT THEIR EXPERIENCES WITH MANY CHILDREN. HOWEVER, FAMILY CENTERED FOSTER CARE RECOGNIZES THAT FAMILIES PROVIDE MUCH NEEDED INFORMATION ABOUT THE INDIVIDUAL CHILD, ACROSS TIME AND IN A VARIETY OF SETTINGS. FAMILY CENTERED FOSTER CARE ENCOURAGES FAMILY-TO-FAMILY SUPPORT AND NETWORKING IN ORDER TO COMMUNICATE THIS INFORMATION SUCCESSFULLY.
 - FAMILY CENTERED FOSTER CARE HONORS CULTURAL DIVERSITY, AND INDIVIDUALITY WITHIN ALL FAMILIES, INCLUDING ETHNIC, RACIAL, SPIRITUAL, SOCIO-ECONOMIC, AND EDUCATIONAL BACKGROUNDS.

Foster care is a vital part of SA's Children and Family Services division, and the Family Centered Practice model develops strategies to promote stabilization and learning. It is a program specifically designed to help children whose needs, for varying reasons, may not be able to be met by their biological family. Through supports from foster parents, in partnership with the biological family, program staff, and community programs, the foster care program aims to help all children reach the least restrictive, permanent home setting possible. Foster parents help children stabilize and assist them in reaching their permanent goal. For some children, this may mean a return home to biological parent(s) or a relative home; and for others, to a foster-adopt home to achieve permanence.

Foster Family as Primary Caregiver

The foster family home is viewed as the primary treatment setting, with the parent(s) trained and supported to implement the goals outlined in the child's service plan. These goals include permanency outcomes, community integration, meeting the medical (including mental health) and dental needs of the children, reducing/eliminating inappropriate behaviors, and supporting the child's educational needs. These goals are carried out under the direction of the foster parents, coupled with qualified family support staff, and various community members working to provide support to the family unit.

Foster Family as Team Member

Foster parents are expected to be active participants in the teams that develop the goals for the child, and to work in a partnership with all family support persons. Foster parents are expected to frequently transport the youth to academic, recreational, community activities, and medical appointments in order to help them develop community and social ties. Helping the child learn social and life skills will be one of the most enduring gifts you can give a foster child. Foster parent(s) are to provide consistency and structure to the children in their care, and provide a scheduled daily routine that the child can easily follow. This may include chore time, homework time, and family activities.

Foster Family and the Biological Family

Foster parents are also to work with a child's established team which may include the child's biological family. Whenever possible, teams will include biological family members, and regardless of a situation between a child and their biological parents you are expected to be respectful and professional towards them. All of the children's relationships with parents, siblings, and other family members should be actively supported and enhanced throughout the period of placement *unless such efforts are expressly and legally forbidden*.

Foster Family and Confidentiality

SA recognizes that foster parents will be asked many questions by friends, neighbors, natural supports and other foster parents about the foster children in their home. General information, such as the child's name, age, and grade in school are appropriate, but SA requires that foster parents not violate the confidence of the child regarding the personal information that they have learned about the child or his/her family. The child's privacy and the family's privacy is extremely important. Additionally, you may not disclose information or post pictures of foster children on social media sites; including but not limited to, Facebook, Instagram, and Twitter. If you have any questions regarding the use of social media please contact your SA Licensor.

B. WHO DO SA FOSTER HOMES SERVE?

Children that enter into our foster care program range in age from 0-17 years old and come from a variety of backgrounds. The children in our care face daily challenges, both behaviorally and developmentally. Their experiences range from unhealthy environments affected by drug and alcohol abuse, coping with sexual and/or physical abuse and neglect, as well as mental health diagnoses.

Children with developmental challenges often have very caring and involved biological families who are unable to cope with the 24-hour a day, seven days a week intensive support that their children may require. These children may need assistance with basic self-help skills such as eating and personal hygiene. They may not have a well-developed sense of safety (i.e., around traffic or strangers). SA foster parents can work with the biological family and provide them with respite and more assistance when needed.

Many of the children we serve have been in foster care for some time, and have therefore learned or exhibit a variety of behaviors. These may include, but are not limited to, defiance, stealing, physical aggression, running away, fire setting, and lying. Children served by SA require constant supervision. Children in foster care may find it very difficult and threatening to bond with adults, and they often have been placed in a multitude of settings resulting in unsuccessful placements. The foster parent who is most successful with these children has very clear, reasonable, and enforceable limits, and they are able to look to the child’s team for support and guidance.

II. HOW DO I GET A FOSTER CARE LICENSE WITH SA?

A. HOW DO I APPLY TO BE A FOSTER PARENT WITH SA?

The licensing process begins with the first contact a prospective foster parent has with SA, and the receipt of a completed application form, followed by criminal history forms for all persons in the household 16 years of age and older, fingerprints for all persons in the household 18 years of age and older and other required forms. The licensing process includes the SA Licensor coming to your home to complete the SA Orientation, home safety checks, any evaluations deemed necessary, interviews with you and your children, the home study, and initial trainings. This process may take up to 90-days to complete. Upon satisfactory completion of the above, SA will recommend to the Division of Licensed Resources (DLR) that the applicant be licensed. DLR will then review the licensing information and recommendation submitted by the SA Licensor and give approval for a Foster Care License. DLR will notify the SA Licensor when and if your family receives a Foster Care License. *Your Foster Care License is valid only under the supervision of SA.*

B. WHAT DOCUMENTATION DO I NEED TO COMPLETE?

The following chart outlines the general responsibilities and paperwork required of an applicant, SA Licensing, and DLR during your Foster Care Licensing process.

| Applicant(s) | SA Foster Care Licensor | DLR |
|----------------------------|-------------------------|--------------------------|
| Application (10-354) | | |
| References | | |
| Background check (09-653) | | Background check results |
| Fingerprints | | |
| Personal Information forms | | |
| Any additional evaluations | | |
| SA Policy Documentation | | |

| | | |
|-----------------------------------------------------------|-----------------------------------------------|----------------------|
| Home Study supporting documents | | |
| Fire Evacuation Plan (16-204) | Interviews of applicant(s) and family members | |
| Provide certificates for any relevant trainings completed | Home Study | |
| | Licensing File Checklist (10-182) | |
| | Foster Home Checklist (10-183) | |
| | Other supporting documentation | |
| | Certification Card (10-16) | |
| | | License, if approved |

C. WHAT ARE THE MINIMUM LICENSING REQUIREMENTS?

The Minimum Licensing Requirements (MLRs) are the rules Washington State has developed to make sure foster homes meet standards that are adequate for the care of foster children. MLR and WAC (Washington Administrative Code) are terms that are used interchangeably, as the Foster Family Home MLRs are excerpts of the WAC. Foster parents are required to read and understand the MLRs prior to receiving a Foster Care License. The SA Licensor will answer any questions you may have regarding the MLRs. Foster parents are responsible for following all the MLRs listed in the Licensing Requirements for Child Foster Homes. By providing foster care, you are acknowledging that you have read, understand and will comply with the MLR/WAC licensing requirements.

D. WHAT IS A CRIMINAL HISTORY CHECK (BACKGROUND AUTHORIZATION FORM)?

The Background Authorization form (DSHS 09-653-rev. 01/2008) and the Fingerprint-Based Background Check Notice (DSHS 27-089 rev.01/2013) allows DLR to research information that pertains to you in law enforcement files as well as any history with Child Protective Services (CPS). In addition, if you have resided outside of Washington State within the last five years you will be required to complete the Child Abuse and Neglect Information Request form. You will also be required to submit additional information about any arrests or convictions, with court dates, you may have on your record. In general, if you have any arrests or convictions, even if you believe that they are removed from your record, it is advisable to let your SA Licensor know about the circumstances and submit formal statements as requested. If it is discovered that you provided false information on your Background Authorization form, you may be withdrawn from the licensing process or if already licensed, jeopardize your Foster Care License.

During your licensure with SA, you will be required to submit new Background Authorization forms upon occasion, such as when re-licensing, or as requested by your SA Licensor. You are also required to notify your SA Licensor if you are charged with any crime or if any incident occurs that would cause you to change an answer on the Background Authorization form. This notification should take place within 24-hours of the charge or incident. Failure to notify your SA Licensor of any such changes may jeopardize your status as an SA Foster Parent.

The requirement to complete the Background Authorization form is not only specific to the Licensed Foster Parents. Your extended family members or natural supports may be required to complete this form as well.

E. WHAT ABOUT MY LIFESTYLE?

I work full-time...

Foster parent(s) must give SA a written outline of the plan for supervision of the foster child(ren) placed in their home while the caregiver is at work (see Workday Plan provided to you by your SA Licensor – WAC 388-148-0530). The plan must include an accurate schedule of times the foster parent will be at work or at other regularly scheduled events. This is to ensure adequate and appropriate supervision for times when you may be absent from your home. Approval of the proposed daycare provider is based on the needs of the child in care and the needs of the family. An adult with a criminal history clearance, who is approved by the child's legal guardian and team, may provide daycare in your home. If you choose to use a daycare facility, the facility must be licensed and provided with information regarding the child's behavioral concerns and development. You must confirm the daycare arrangements with your SA primary contact (your homes primary contact will be assigned to you and may be your SA Licensor, SA Case Manager, SA Program Manager, or another designee – see section VI.A) and the child's team prior to a child being placed in your home.

SA staff cannot meet childcare needs. If you are having trouble finding appropriate childcare you may ask SA for assistance in locating a provider, however, it is ultimately the foster parent's responsibility to locate and arrange daycare. If you are licensed under "Regular Care" (see Foster Care Level section) Children's Administration (CA) can pay for daycare expenses for working parents, upon authorization of the child's CA Social Worker. If you, as a Regular Foster Care parent, use daycare and are not working, any expenses associated with daycare are your responsibility. For foster parents licensed under the contract for Specialized or Therapeutic levels of care (see Foster Care Level section), daycare support is not a provided or reimbursed service. Foster parents are to be the primary caregivers of the children in their care. *No foster child(ren) should be in out-of-home care for more than 10 hours per day.* This guideline includes time spent at school, daycare, after school programs, and other day programs.

What if I need someone to provide care for my foster child when I need to be out of the home for up to a 24-hour period of time...?

Foster parents may, with SA authorization, allow a friend or relative to provide care to a foster child in the Licensed Foster Home (WAC 388-148-0541) for up to 24-hours. Anyone providing care for a foster child placed by SA must be at least 18 years of age, have a cleared Background Authorization and fingerprints (as described in Section D), Tuberculosis Test, and have completed both HIV/AIDS prevention and CPR/First Aid training. Any exceptions require SA and/or CA approval. The childcare provider must provide a copy of their driver's license and auto insurance to SA if they will be transporting the child, and sign an Oath of Confidentiality.

Foster parents must assure SA that they are familiar and comfortable with the individual who will be caring for the foster child. The foster parents must review with the substitute caregiver expectations regarding supervision and discipline of the foster child. The foster parents must also give the substitute caregiver, and SA, information on how they can be contacted while away from home. The foster parents must give the substitute caregiver all the necessary medical and crisis response information needed for the child, including the on-call crisis response number. The substitute caregiver must also provide SA with information as to how they can be contacted in an emergency.

We're not married...

Much like the children we serve, foster parents are from many different backgrounds and lifestyles. Successful foster parents have been single, married couples, life partners, and in other living arrangements. The focus of foster care is to provide a safe, stable, and nurturing environment for children. We ask that your household is stable, and that each member is committed to providing a positive environment for children that includes modeling healthy family relationships.

I am / am not religious...

Biological or legal parents of foster children retain the right to determine what, if any, religious affiliation the child will have.

You are encouraged to engage in your own religious expression, but you may not require or coerce foster children into following or engaging in your chosen religion or religious activities (WAC 388-148-0430).

Foster parents will create an atmosphere where children will have the opportunity to state and explore their religious beliefs. Foster parents will make arrangements for the foster child to actively participate in church attendance and ceremonial activities related to their chosen religion. If a child expresses an interest in religious practices of the foster parents that is contrary to those of the birth parent's beliefs, the parent and CA Social Worker will be notified and the decision postponed until those involved can come to some resolution of the conflict or concern.

If there are any questions about religious practices or age appropriateness of any activities, inform your SA primary contact.

I like to have a glass of wine with dinner...

Consumption of alcoholic beverages is permissible as long as you remain able to supervise the child(ren) appropriately and are able to exercise good judgment concerning their care. It is imperative that you are able to respond quickly and effectively to unexpected emergencies. Excessive consumption of alcohol can be sufficient grounds for losing your license (WAC 388-148-0180 (1)).

Children are not to have access to alcohol in the foster home. Foster parents must keep alcoholic beverages out of reach or in a locked storage area.

Is smoking cigarettes permitted around the children?

- You must prohibit smoking, including the use of e-cigarettes, in the living space of any home or facility caring for children and in motor vehicles while transporting children.
- You may permit adults to smoke outdoors away from children.
- Nothing in this section is meant to interfere with traditional or spiritual Native American ceremonies involving the use of tobacco. (WAC 388-148-0185)

Foster parents agree not to permit smoking in any of the living areas of their homes or in any motor vehicle transporting foster children. If there is any question regarding acceptable smoking areas, foster parents should contact their SA Licensor for clarification. SA recommends smoking a minimum distance of 10 feet away from doorways, open windows and children. Additionally, if the foster parents participate in or conduct traditional or spiritual Native American ceremonies involving tobacco within the living spaces of their home, they shall notify their SA Licensor in writing to document such ceremonies. The purpose of this documentation is to protect the foster parent from allegations and alleviate any questions should there be reports that smoking has taken place within the home.

F. HOW DO I KNOW IF MY HOUSE OR APARTMENT CAN BE LICENSED?

There are a number of very specific rules about the physical layout of a foster home that you can find in the published MLR/WAC. In general, if your house and grounds are sanitary, free of hazards, structurally sound, and adequate in size, it is likely that your home could be licensed. Specific questions need to be referred to your SA Licensor.

G. WHAT ABOUT THE USE OF, AND EXPECTATIONS OF, MY CAR?

In accordance with WAC 388-148-0210 all foster parents are required to have current auto insurance including liability and medical coverage to protect foster children who are passengers in their vehicles. Foster parents cannot receive a Foster Care License without proof of this coverage. Foster parents will submit current copies of their insurance cards to their SA Licensor as they become available. Foster parents will also submit a current copy of their driver's license to their SA Licensor as it is renewed.

The foster parent's vehicle is to be in safe operating condition and have adequate safety devices. Foster parents are required to comply with all safety requirements relating to their vehicles, specifically concerning small persons and airbag safety, small persons and shoulder straps, and proper positioning of child seats. Washington State Child Restraint Law RCW 46.61.687 states that all passengers in the foster parent's vehicle will wear seat belts, one passenger per seat belt. It is the foster parent's responsibility to ensure that any child under 4' 9" tall and eight years of age will be transported only in a secure booster seat or car seat. Children under 13 years of age must also ride in the back seat of the car, where it is practical to do so. Also, consult the child's Individual Behavior Management Plan (IBMP) and your vehicles manufacturer's air bag safety guidelines to determine the safest seating arrangement for the child.

It is the foster parent's responsibility to keep all automobile keys inaccessible to children in their care.

H. WHAT ARE THE HEALTH AND SAFETY PROCEDURES I NEED TO KNOW?

Reporting Child Abuse, Neglect, or Exploitation:

As mandated by RCW 26.44.020 (12) and WAC 388-148-0120, it is the policy of SA that any suspected abuse, neglect, or exploitation of a child by an employee or subcontractor (foster parent) of the agency or any adult, be immediately reported to Child Protective Services (CPS) or to a Law Enforcement Agency with jurisdiction. It is further required that an employee or subcontractor (foster parent) make a report to CPS or to a Law Enforcement Agency with jurisdiction if there is reasonable cause to believe that child abuse, neglect, or exploitation may have occurred. In addition, SA policy requires that any suspected child-to-child abuse would be reported immediately to your primary contact. When in doubt about any situation, call your primary contact as soon as possible if you have any questions about whether it is reportable. Complete an incident report immediately after making the appropriate notifications and notify your primary contact.

Reporting "immediately" means: *first*, intervene in order to stop the harmful situation. *Second*, provide medical care if needed, and *third*, make the call to the appropriate authorities. If interventions or medical treatment is not needed, the expectation of "immediately" is within 10 minutes.

All referrals made to CPS between 4:30 p.m. and 8:00 a.m. during the weekdays and 24 hours a day on weekends and holidays will be made to "Central Intake After-Hours Program." Foster parents can easily access the number on their Emergency Protocol Sheet to be posted in the home.

Foster parents must receive CPS/Mandatory Reporter's Training every year at minimum. Foster parents shall sign documentation of attendance and understanding of the training. The signature also indicates willingness to comply with the reporting guidelines.

Discipline and RIGHT RESPONSE™:

Foster parents are to ensure a positive discipline structure for foster children who lack the internal control to monitor and manage their own behaviors. The goal is that through the use of a structured environment and role modeling, the child will gain the skills necessary to improve his/her ability to self manage. Positive behavior supports will be the primary focus in all interactions between foster parents and foster children. The philosophy and working model regarding positive behavior support includes the decision to productively change or mold a negative behavior while increasing and replacing that behavior with a new and more functionally appropriate behavior. The choice of behavioral management interventions will be based on an understanding of the child's developmental stage and his/her behavioral needs. Actual disciplinary interventions will be used only when positive behavior support methods have not been effective, as a means to improve the foster child's ability to develop internal controls, acceptable behavior, and respect for the rights of others.

Foster Parents will clearly document the disciplinary practices that will be used within their family. This document is to be completed prior to being licensed.

RIGHT RESPONSE™ is available to and required for SA Licensed Specialized and Therapeutic foster parents. RIGHT RESPONSE™ training highlights the value of prevention, de-escalation, and preserving the dignity of the child when a child may become dangerous to themselves or others. When foster parents are properly trained in RIGHT RESPONSE™ techniques and the child's team has approved specific therapeutic physical interventions for the child, then only the approved RIGHT RESPONSE™ techniques are acceptable physical interventions. The specific type of therapeutic intervention must be approved in advance by the child's team and it must be used in accordance with the goals and objectives outlined in the child's support plan. In order to use a therapeutic physical intervention, an individual must have a current RIGHT RESPONSE™ certification. The person employing RIGHT RESPONSE™ must not attempt to recruit untrained or uncertified individuals to assist in a RIGHT RESPONSE™ therapeutic physical intervention.

Any situation requiring a therapeutic physical intervention will be promptly documented on a SA Incident Report and reported to the SA primary contact. Use of non-RIGHT RESPONSE™ physical interventions may injure a child and will be considered sufficient grounds to recommend termination of a Foster Care License.

Emergency Response:

Foster parents will treat all medical issues and incidents as serious and will provide professional medical attention as necessary and in a responsible and timely manner. When professional medical attention is needed, foster parents shall inform the SA Licensor and primary contact immediately; then submit a written incident report within 12-hours. The incident report shall include a copy of the medical statement and requires a report to CPS.

In addition, all homes are required to post a list of emergency numbers for quick access. This list shall include: all emergency phone numbers; the name and phone number of the nearest hospital, with directions; and a phone number for poison control. The Emergency Protocol sheet, provided to you by your primary contact, has all of these numbers, as well as Central Intake (for abuse and neglect calls), Missing Children's Clearinghouse (required for youth who run away), and Program Manager and Licensor numbers. This list shall be reviewed on a regular basis with all children placed in the home.

Evacuation Procedure:

Foster parents shall instruct all persons in care in emergency evacuation procedures. Foster parents are to conduct drills with all children in the home at monthly intervals to test and practice the procedures. A written floor plan of the home will be posted in the home and submitted to the SA Licensor that shows evacuation routes and meeting places. (WAC 388-148-0255)

Safety and Supervision Plan to Ensure Child's Safety around Water:

Foster parents shall ensure children placed in their home are safe around bodies of water (WAC 388-148-0170). You must daily empty and clean any portable wading pool that children use. Children under the age of 12 must be in continuous visual or auditory range by an adult with current age appropriate First Aid and CPR certification at all times when they are swimming or wading. Foster parents must ensure age and developmentally appropriate supervision of any child that uses hot tubs, swimming pools, spas, and around man-made and natural bodies of water. All safety devices and rescue equipment, such as personal flotation devices, must meet state and federal water safety regulations. Foster parents must lock or secure hot tub and spa areas when they are not in use. Foster parents with a pool must have a fence designed to discourage climbing and have a locking gate around a pool to ensure inaccessibility when not in use. In addition, foster parents with pools must have a written safety and supervision plan for each child placed in the home. Adults providing supervision in foster homes must know how and be able to use rescue equipment or have a current life-saving certification when children are using a pool on the premises.

Most children's individual safety and supervision plan includes a statement that a certified life guard must be on duty in order for a child to be in or around bodies of water. Please refer to this document, or contact your primary contact to ascertain the specific requirements for the child in your home around bodies of water.

Health and Safety Inspections:

SA and/or DLR will complete Health and Safety Inspections of your home at a minimum of quarterly. These inspections may include interviewing the foster parents, the foster child(ren), and other people in the home, along with walking through the entire house and property for an overall safety check. These inspections are to ensure that your home and family continues to meet all MLR/WAC for a Licensed Foster Home.

Health and Safety Inspections will usually be pre-arranged for a time that is convenient for the foster parents. On occasion, additional Health and Safety inspections may be completed on a drop-in basis due to various circumstances. It is the expectation that SA Foster Parents will participate in all scheduled inspections, and will comply with suggested follow through. SA may also conduct unannounced drop-in visits that are not related to Health and Safety Inspections.

Medications:

Foster Parents are responsible for complying with WAC 388-148-0350 and 0352. In addition, you are responsible for the following:

Foster parents shall administer all prescription medication only as prescribed by the child's physician. No changes to a child's medication shall be made without written consent from a physician, child's social worker, and other designee (i.e., biological parent). "PRN" or "as-needed" medications may be dispensed according to the guidelines/prescription/standing orders of the child's physician.

Non-prescription medication must be approved in writing by a physician before administering to a child, and administered only as directed by manufacturer's label and/or child's physician.

In adherence to RCW 13.34.0690(1) and DDA policy 5.17, all psychotropic medication (mind or mood altering medication) must have written approval by the child's biological parent(s), legal guardian, or child his or herself if 13 years of age or older. In some cases, the child's CA/DDA Social Worker may give the written approval.

| Type of medication: | Written approval from: | Administration: |
|---------------------|-----------------------------|----------------------------|
| Psychotropic | Bio parent/CA/DDA/Physician | As prescribed |
| Other prescription | Physician/CA/DDA | As prescribed |
| Non prescription | Physician | Label / Dr. recommendation |

No medication that is prescribed one child can be given to another child.

All medication shall be documented in writing each time it is administered. Documentation shall include the name of the prescribing physician, the name of medication, dosage, date and time it was administered, and initials of supervising adult. In addition, note reason and results for "PRN" or "as-needed" medications. A copy of the prescription must be made available to SA for initial prescriptions as well as any changes. This documentation shall be placed in the child's file.

The foster parents and the child's physician will develop a clear outline of the procedures to be followed in the event of missed medication. The child's team, including the CA Social Worker, and physician, must approve the procedure. A specific procedure is to be developed for each medication for each foster child in the home. An incident report with the physician's response will be submitted within 12-hours of any instance of missed medication.

Disposal of unused, expired, or discontinued medications shall be logged on the medication administration form, include date and reason discontinued as well as method of disposal. Dispose of medications by returning to the pharmacy for disposal, have the pharmacist give you a receipt for the medication, and attach it to the medication administration form.

Any instance in which a child took the wrong dosage, the wrong medication, or had unsupervised access to medications, shall be treated as a medical emergency.

Weapon Safety:

Any weapons and/or firearms are to be kept locked and unloaded. Ammunition is to be locked and stored separately from the weapons (WAC 388-148-0190). Your SA Licensor may require additional safeguards, depending on the weapon. The use of a firearm and/or weapon with a foster child is prohibited unless specifically addressed in the child's service plan and the child's team has approved the plan. The child, and their supervising adult, must have a current certificate from a certified state and/or federal firearm safety class prior to any firearm and/or weapon use.

At any time an unannounced inspection may take place by the SA Licensor to ensure proper storage of weapons and/or firearms. Weapons and/or firearms include, but are not limited to, BB guns, sling shots, rifles, handguns, bow and arrows, pepper spray or mace, hunting knives and any martial arts weapons.

Flammable Materials:

Flammable materials are to be kept inaccessible to foster children. Many children in care have a fascination with fire or actually engage in fire setting. Some may use petroleum products as inhalants. It is very important to keep matches, lighters, gasoline, and other combustible materials away from children.

I. WHAT TRAINING WILL I NEED?

Prior to Licensing:

Regular Foster Care:

| Provided by SA: | | Other: | |
|------------------------------|--------|----------------------|---------|
| SA Foster Parent Orientation | 3 hrs. | PRIDE/Caregiver Core | 24 hrs. |
| Safe Practices | 7 hrs. | First Aid/CPR/BBP | 7 hrs. |

Specialized Foster Care (1 year relevant experience)

| Provided by SA: | | Other: | |
|------------------------------|---------|----------------------|---------|
| SA Foster Parent Orientation | 3 hrs. | PRIDE/Caregiver Core | 24 hrs. |
| Safe Practices | 7 hrs. | First Aid/CPR/BBP | 7 hrs. |
| RIGHT RESPONSE™ | 14 hrs. | | |

Therapeutic Foster Care (2 years relevant experience)

| Provided by SA: | | Other: | |
|------------------------------|---------|----------------------|---------|
| SA Foster Parent Orientation | 3 hrs. | PRIDE/Caregiver Core | 24 hrs. |
| Safe Practices | 7 hrs. | First Aid/CPR/BBP | 7 hrs. |
| RIGHT RESPONSE™ | 14 hrs. | | |

Contact your licensor to find out the most efficient way to sign up for classes. All partners in a multi-parent household are strongly encouraged to attend all trainings, but are required to attend CPR/First Aid and Blood Borne Pathogens. Requests for exception to any required trainings must be submitted in writing to your SA Licensor. In some circumstances, you may be able to substitute trainings from other sources such as the Red Cross, or a College or University. Approved CPR and First Aid must be in accordance with a nationally recognized standard.

Continuing education/training:

SA requires Specialized Foster Parents and Therapeutic Foster Parents to receive an additional 30 hours of training per year. Regular Foster Parents are required, per DSHS Policy 45121, to receive 36 additional hours of training within the first three-year period. Including “So you have had your first placement” (3 hours). Continuing education/training is essential in order to successfully parent the children served by SA. Resources for additional trainings may be available in your local region through SA, in your community (i.e., community college courses, PTA sponsored activities and classes, mental health centers), and through DSHS.

If additional skills are needed to meet the needs of the children in your home, your SA Licensor may require you to take trainings not listed here.

As previously mentioned, CPS/Mandatory Reporting Training must occur at a minimum of every year. This training is available through the SA Licensor, or through any SA program. It is the responsibility of the SA Foster Parents to notify their SA Licensor when the training is due.

Foster parent meetings are held monthly to provide ongoing training as well as for sharing pertinent information, and informal support. **Attendance at monthly foster parent meetings is mandatory for Specialized and Therapeutic Foster Parent(s).**

CPR and First Aid certification is required to be current for all caregivers in the home. Any lapse in CPR certification will jeopardize your Foster Care License and will force SA to make alternate arrangements in order to safely care for foster children (additional cost to be deducted from your reimbursement).

There is a 90-day grace period extension for RIGHT RESPONSE™ recertification. A failure to recertify before expiration or within that 90-days, requires a full re-take of the two day course.

Training expirations are as follows:

| Training: | Expires: |
|---------------------------|------------------------|
| CPR | Date on card |
| First Aid | Date on card |
| RIGHT RESPONSE™ | 1 year |
| HIV / HepB / BBP | 1 year or date on card |
| CPS / Mandatory Reporting | 1 year |

J) HOW DOES THE LICENSOR DECIDE WHETHER TO RECOMMEND TO DSHS/DLR THAT OUR FAMILY BE LICENSED?

The SA Licensor completes a home study, which includes the written documentation you have submitted, the results of the background checks, the results of any additional evaluations you have completed, the recommendations of your references, the quality of interactions you have had with the SA Licensor and other SA staff, CA/DDA Social Workers, the

physical condition of your home, and any other relevant information they have received. Once the SA Licensor has assembled an accurate picture of how well your family is likely to provide care to the children we serve, and how well your family is likely to work with our agency, then the licensor will know whether or not to recommend that your family be licensed.

Moreover, recommending to DLR that you be licensed and the ongoing supervision of your license is strictly at the discretion of SA. At any point in the licensing process, and following licensure, the SA Licensor may decide that your family is not a good match for our program. That does not necessarily mean that you are not suited to be foster parents, but it does mean that you would need to seek licensure through another Private Agency or DLR directly.

III. HOW DOES A FOSTER CHILD THROUGH SA GET PLACED INTO MY HOME?

A. DO I HAVE A CHOICE OF CHILDREN COMING INTO MY HOME?

Yes. Let your SA Licensor know the age, gender, and behaviors you believe you can provide the best care for based on your experience and skill level, as well as what would be best for your family. You can have your license be valid for a specific gender and/or specific ages. You may decide to have a more general license, but indicate a placement preference to your SA Licensor.

Your SA Program Manager, Area Manager or SA Licensor will work with you when it comes to recommending appropriate matches. Sometimes they may suggest a child that meets some, but not all, of your preferences. Please remember that our primary goal is to serve children well and help find placements for all children in need.

B. WHAT DOES THE REFERRAL AND PLACEMENT PROCESS LOOK LIKE?

The process of receiving a referral for a child into your home can vary depending upon the urgency for placement. Each region for SA establishes a Regional Placement Protocol that outlines how you will receive referrals and how to proceed with placement. Generally, your SA primary contact or Licensor will contact you with referral information for you to consider. We will make any and all information we possess about a child available to you prior to a child being placed into your home. You will review the referral with your SA Licensor or primary contact to determine if the child may be accepted for placement in your household.

In the ideal process, or a planned placement, you will have the opportunity to meet the child and review the child's past history file. However, in most cases, referrals received are urgent or immediate, and arrive on the same day the child needs placement leaving little time to arrange a meeting with a child prior to placement. As an agency, we value the opportunity to develop relationships with the children, to help with transition, and to make sure placements are the most appropriate. We make every good faith effort to contact families upon receipt of referrals to provide as much time to assess the referral as possible. Remember, all information contained in the child's file is confidential and is not to be disclosed to unauthorized parties. Any concerns you have that may arise at the time of the referral review need to be addressed, and any questions unanswerable by the agency representative may be directed to another party involved in the child's team, such as the CA Social Worker.

Welcoming the child into your home and making him/her feel comfortable and safe is extremely important. However, before proceeding with this step, it is very important that you follow all the documentation requirements before accepting the placement. It is mandated that you review all materials and that you sign the Respite and Placement Documentation

form prior to accepting a child for placement. There may be additional regional protocols for you to follow prior to accepting a child for placement.

Do not accept a child into your home for even a few hours without sufficient information to allow you to determine whether or not the child is likely to be an appropriate match for your skill level and for your household. Our only way to ascertain that you have received available information to make a well-informed decision is to have the Respite and Placement Documentation form completed and signed prior to respite or placement.

C. WHAT ABOUT CHILDREN WHO NEED EMERGENCY PLACEMENT OR RESPITE?

Often we do not have as much time as we would like to have a smooth and long transition, especially when the need for placement is emergent. Children may need emergency placement for a wide variety of reasons, and the children may or may not be known to our agency. When you have an extra bed available, and your license allows, we may call you with a request for an emergency placement or respite. *You always have the right and responsibility to decline if you believe you are not able to take an additional child, even for a short period of time.*

If you accept a child into your home after normal business hours and with very short notice, make sure you have, at a minimum, the items in the respite section of the Respite and Placement Documentation form. We will ask you to sign the form after reviewing the child's referral, but before accepting the child into your home for placement.

D. ONCE I'M LICENSED, WHAT IF SOMEBODY BESIDES SA ASKS ME TO TAKE A CHILD?

You are only permitted to take children who have been referred to you by SA. If anyone, besides a representative of SA (including CA), contacts you regarding the placement of a child, immediately refer that person to your SA primary contact or Licenser.

There can be very serious consequences to accepting children from sources other than your licensing agency (SA). These can range anywhere from reimbursement issues to termination of your Foster Care License.

IV. WHAT SUPPORT AM I EXPECTED TO GIVE A FOSTER CHILD?

A. DO I NEED TO GIVE THE CHILD ALLOWANCE?

SA believes strongly that, for some children, having their own spending money is therapeutically recommended, empowering, and a good educational tool. Therefore, it is the expectation of SA that the subject of allowance be discussed at the child's initial team meeting. Portions of a child's allowance may only be utilized for damage compensation when it is stated in his/her signed service plan. Foster parent(s) are to document the disbursement of allowance and include any deductions made from the total amount of allowance.

B. DO I NEED TO BUY CLOTHING FOR THE CHILD?

Your reimbursement rate includes expenses for appropriate clothing for foster children. You are not to charge SA, CA, biological parents/guardians, or foster children for clothing and/or personal incidentals provided to foster children. This provision does not preclude voluntary contributions of clothing by parent(s) and other individuals.

It is your responsibility to provide appropriate clothing for children placed in your home (an average of \$40 per month is suggested for children in Specialized and Therapeutic Level Care) This includes appropriate clothing for all seasons, and

clothing that is comparable to the standard of clothing provided for other children in your home. Special requests may be made to the SA primary contact and CA prior to placement for reimbursement of exceptional clothing costs. Please note that the Program Manager and Administrator must approve exceptional cost reimbursements. Additionally, your primary contact can help you identify local resources to assist with clothing needs.

C. DO I NEED TO KEEP A RECORD OF EVERYTHING THE CHILD OWNS?

It is very important that you inventory all of a child's possessions when the child arrives in your home. Whenever there are occasions that the child receives a large number of gifts we recommend that you inventory the gifts. Under normal circumstances we recommend that you inventory everything at least annually, and when new items are received, gifted, or purchased. SA may request an updated inventory every 90-days to comply with contract requirements. It is always important to keep a record of personal items of importance. If there are special circumstances, such as a fear that the child is stealing or selling their possessions, it may be necessary to inventory more frequently.

If you are aware of possessions that are missing or broken, document what happened to the item. You can be held financially responsible for undocumented missing items, *including gifts and purchases that you have made for them on their behalf*. Gifts that children receive while in your care are to remain theirs even after departing your home. It is recommended that the child's belongings not be sold, traded, or discarded without a child's knowledge and consent.

D. AM I RESPONSIBLE FOR PROVIDING TRANSPORTATION FOR THE FOSTER CHILD?

You are expected to provide transportation for the child to most regular functions such as educational activities, visits to health professionals, recreational activities, and other activities appropriate to the age and needs of the foster child. If your foster child is approved to use public transportation, you will be expected to provide the fare necessary to access the transportation.

We acknowledge that there may be situations where the transportation needs of a child are too great to expect you to bear the entire cost. In such instances, we can grant exceptions to pay mileage only when you have received advanced approval from the Program Manager. In yet other situations, we will request exceptions from CA to reimburse mileage. Please remember that our agency cannot be expected to reimburse travel expenses that were incurred without our knowledge and approval.

E. ARE THERE VISITS WITH THE FOSTER CHILD'S BIOLOGICAL FAMILY?

Visits with family members and friends are strongly encouraged by SA and all means possible to support such visits are taken. SA Foster Parents are responsible to ensure that children attend court ordered visits when scheduled. The child's team, including the court, determines who the child may have visits with, including whether or not visits need to be supervised by another adult. Neither SA personnel nor Foster Parents independently make these decisions.

F. CAN THE CHILD HAVE PHONE CONTACT?

Phone contact with friends and family is an important part of maintaining relationships. For some children, it is the primary method of keeping in touch. Because of this, SA strongly supports frequent phone contact with friends, family and professionals involved in their life. The child's support team establishes a list of who the child may and may not contact. Phone contact will only be restricted when it is determined by the team to have an adverse effect on the therapeutic functioning of the child. The phone list shall be kept in a location in your home that is easily accessible to family members, the child, and staff working in your home. Phone calls will not be monitored unless monitoring is part of the child's supervision or safety plan.

G. CAN THE CHILD RECEIVE MAIL?

Children are allowed to send and receive mail, unless otherwise determined by the child's team. If it is suspected that a piece of mail may contain illegal contents, it should be given directly to the caregiver/parent, or other adult supervising the child. Please consult with your primary contact surrounding the next steps to be taken. A supervising adult should retrieve the mail from the mailbox to prevent mail theft or tampering.

H. CAN THE CHILD USE THE INTERNET AND SOCIAL MEDIA SITES?

If a child's team has approved the use of internet and social media, we request specific parameters be outlined by the child's legal guardian/parent(s). These plans should include length of time, sites approved, and approval for educational purposes. As foster parents and primary caregivers it is your responsibility and duty to ensure that children who have team approval to participate in internet and social networking activities are monitored and supervised.

I. HOW CLOSELY DO I NEED TO SUPERVISE THE CHILD?

It is expected that children in foster care will have age and developmentally appropriate supervision. A supervising adult must be authorized through a DSHS Background Authorization, and have approval from SA prior to providing supervision. Most children will have an individual supervision plan that will need to be followed at all times. You, as an SA Foster Parent, will be given a copy of a child's supervision plan to sign and date, and refer to when needed. A copy of this will be attached to the child's service plan, and the child's team must approve any changes. *No other children (biological or foster children) shall be placed under the care or supervision of a foster child at any time for any reason.*

Basic Supervision Guidelines:

If you find yourself in a situation where you are responsible for supervision of a child that is unfamiliar to you, you must supervise the child at a minimum of (WAC 388-148-0460):

IF CHILD IS WITH OTHER CHILDREN:

- ✓ 15 Minute Visual check
- ✓ Stay within earshot as much as possible

IN THE COMMUNITY:

- ✓ Maintain arms-reach proximity of child
- ✓ Allow restroom use by child only under direct supervision OR:
- ✓ If opposite gender, make sure child is alone in restroom by finding single room or checking beforehand.
- ✓ If you need a break, find another authorized adult to supervise in your absence, or separate child from other children and follow next set of guidelines.

IF CHILD IS ALONE:

- ✓ Maintain earshot supervision as often as possible. Under no circumstance may supervision lapse for more than 15 minutes while child is awake.

- ✓ Preschool aged children, under age six (6), and children with severe developmental disabilities must not be left physically unattended in bathtub or shower.

IF CHILD IS ASLEEP:

- ✓ If permitted by the DSHS Social Worker, set door and window alarms.
- ✓ Check on child as frequently as possible while still meeting your own sleep needs.
- ✓ Children under six years of age must sleep on the same floor of foster home as foster parents.

Please note: The use of recording devices and baby monitors is strictly prohibited unless they are approved by the child's CA Social Worker for therapeutic purposes.

J. CAN I SEARCH THE CHILD'S ROOM AND BELONGINGS?

It is important that children's rights to privacy be respected even though they are living in your home. If you suspect that a child has something in their possession that is not theirs or that poses a risk to themselves or others, you cannot search their room or their person without prior authorization. If you believe they possess an item that poses an immediate risk to health and safety for the child or others, you can contact the local police department to search the child. *Under no circumstances* are you to search a child yourself. SA Staff also cannot provide this search. Only law enforcement can perform a search of the child. It is possible to have permission to search the child's room, coat, and/or bag written into their Individualized Behavior Management Plan (IBMP) and ISTP. If you believe this is necessary, please contact your child's SA Case Manager to request this be discussed. The permission must come from the child's team. *SA cannot authorize any search of a child or their belongings.*

K. DO I NEED TO KEEP THE CHILD'S PAPERWORK CONFIDENTIAL?

Yes, you are expected to provide a secure area for information about any child placed in your home. Information in this area is to be inaccessible to other children in the home as well as to all unauthorized parties.

V. WHAT INFORMATION DO I NEED TO GIVE SA?

A. WHAT DOCUMENTATION DO I NEED TO COMPLETE ON A REGULAR BASIS?

Medication: Foster parents shall document when and who administers medication. Refer to the SA medication policy. A copy of all prescriptions must be given to your SA primary contact.

Placement: Placement summary that includes documentation of initial medical/dental visits, enrollment in school or other services. Placement summary forms will be provided.

Respite: A respite summary shall be completed by foster parents when providing respite for children.

Weekly: A weekly summary shall be completed by the foster parents discussing the events of the previous week. Such as appointments, visitations, and incidents.

Monthly (For Regular level care only): a monthly summary completed detailing the events of the previous month, any medical appointments, overview of visits, and noting any incidents.

Other: Allowance, inventory of child’s belongings, and child specific documentation.

B. WHAT OTHER WRITTEN DOCUMENTATION MIGHT I NEED TO COMPLETE?

Incident Reports: An incident report shall be completed for any incident involving, but not limited to, an injury to the child, a call to CPS, property damage, physical aggression, allegations, or disclosures. The report is to be written at the earliest time possible and made available to the SA primary contact within 12-hours after the incident.

Other required documentation may include monthly reimbursement request forms, medical visit forms, copies of all trainings and certifications, run debriefing interviews and prevention plans, and any required documents to maintain your licensing file.

C. IF I HAVE A FRIEND OR RELATIVE STAYING OVER, DO I NEED TO TELL ANYONE AT SA? WHAT ABOUT OTHER HOUSE GUESTS?

Relatives and Friends: Foster parents shall inform their SA Licensor **prior** to family members and friends staying in the foster home overnight. If the visitors are expected to stay longer than 14-days, a criminal history background clearance and fingerprints must be completed and cleared prior to arrival in the home (if possible). Under no circumstances may the houseguest supervise the child or have any unsupervised contact with the child without a cleared background check and approval by the SA Licensor.

Foreign Exchange Students: It is the clear understanding that foster parents with SA will not also be a host family for foreign exchange students. Unusual circumstances and/or exceptions must be approved by the SA Administrator and DLR personnel in writing prior to a student staying in the home.

D. WHAT OTHER CHANGES IN MY HOUSEHOLD DO I NEED TO INFORM THE LICENSOR ABOUT?

Foster parents must immediately report to their SA Licensor any change in residence, marital status, employment, significant changes in the household composition, a violent episode within the household, death or hospitalization of a member of the household, a member of the household getting arrested, and/or need of a substitute caretaker for the foster child. In addition, foster parent(s) must notify their SA Licensor prior to another individual moving into the home, and of any change of your health (i.e., a change in prescribed medication either new or discontinued, or change in dosage prescribed).

| Circumstance: | Type of report: | Report to: | Timeframe: |
|------------------------|------------------------|--------------------|-------------------|
| Child abuse or neglect | Verbal | CPS | Immediately |
| | Verbal | SA Primary Contact | Immediately |

| | | | |
|--------------------------------------------------------------------|------------|------------------------------------------------------|------------------------------------|
| | Verbal | SA Licenser | Immediately |
| | Written IR | SA Primary Contact | 12 hrs |
| Death or injury of child | Verbal | CPS | Immediately |
| | Verbal | SA Primary Contact | Immediately |
| | Verbal | SA Licenser | Immediately |
| | Written IR | SA Primary Contact | 12 hrs-injury Immediately-death |
| Child Missing from Care | Verbal | SA Primary Contact | Immediately |
| | Verbal | Police and Missing Children Clearinghouse | Immediately |
| | Written IR | SA Primary Contact | 12 hrs |
| | Verbal | CA Social Worker /CPS as directed by Primary Contact | 12 hrs |
| Arrest of child or member of household OR violent incident in home | Verbal | SA Primary Contact | 8 hrs |
| | Verbal | SA Licenser | 8 hrs |
| Receipt of summons, subpoena, or other legal notice | Verbal | SA Licenser | 12 hrs |
| You have visitors who stay overnight or who visit regularly | Verbal | SA | Prior to overnight stay |
| Someone moves in or out of house | Verbal | SA Licenser | Prior notice required (P.N.R.) |
| Change of marital status | Verbal | SA Licenser | P.N.R. |
| Structural change of house or grounds | Verbal | SA Licenser | P.N.R. |
| Change of residence | Verbal | SA Licenser | P.N.R. |

| | | | |
|------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Change of employment | Verbal | SA Licenser | P.N.R. |
| Taking children out of state or country (out of country for children on probation) | Verbal | DSHS Social Worker - need written authorization. Work with SA Primary Contact to obtain. Out of country approval, even Canada takes at least four weeks to obtain. | P.N.R. |
| | Verbal | SA Licenser | P.N.R. |

VI. WHAT SUPPORT CAN I EXPECT FROM SA?

A. WHO WILL BE MY PRIMARY CONTACT WHEN I HAVE QUESTIONS OR IDEAS ABOUT THE CARE OF MY FOSTER CHILD?

In most cases, the SA Case Manager will be the person directly responsible for supporting you in providing care. The SA Case Manager may or may not be your primary contact, however. As each program is structured differently, it is important to maintain open and clear communication with the person identified as your primary contact. Your primary contact may be your SA Case Manager, SA Licenser, support staff or other delegate personnel. Always attempt to communicate with your primary contact before calling anyone else.

B. WHAT REIMBURSEMENT CAN I EXPECT FOR HELPING THE CHILD BECOME MORE SUCCESSFUL?

This will vary based upon the level of care needed for the child and/or the contract under which they are referred to SA. The specific daily rate will be discussed with you at the time of referral and is detailed under the Foster Care Level section. The reimbursement paid to you covers all expenses for the child's room and board, transportation, clothing, and personal incidentals (i.e., hygiene products, school supplies, etc.). The reimbursement also allows for money for you to purchase endorsements covering foster children in your home or renters liability insurance. This reimbursement is intended for the care and provision of foster children in your home and is not to be considered a "paycheck".

It is your responsibility to consult with your own tax professional in regards to tax advice and/or guidance. Please note that WAC 388-148-0535 states that foster families shall have regular income to maintain their own family expenses without including the money received for reimbursements.

You must submit a monthly Foster Parent Request for Reimbursement form by the first day of the month for the previous month's services. Submit the form to your SA Licenser.

C. WHAT IF THE CHILD DAMAGES MY BELONGINGS?

The reimbursement rate is to cover all expenses, including incidental damage to your home caused by the foster child. We advise that you put some monies designated as "damage reimbursement funds" aside each month in order to cover future damages. If you endure excessive damage to your home or property (greater than \$450.00 per child per year) we will work with you in order to reduce future damages and to explore ways to repair existing damages.

Foster parents are partially covered under the state's Foster Parent Liability Plan. Please note that this coverage is not guaranteed by SA and is limited by the guidelines of the plan. Please request a Foster Parent Claim form 18-400A(X), should this occur. Your SA Licensor can provide you with the form and further information.

D. WHAT IF THE FOSTER CHILD DAMAGES SOMEONE ELSE'S BELONGINGS?

The most reliable insurance coverage for damage incurred by foster children is contained in your homeowner's insurance policy. It is your responsibility to obtain liability coverage. It is important that you establish that the policy covers acts of foster children that might result in property damage and other occurrences for which you may be held liable. If your homeowner's policy does not contain a specific provision covering foster children, we recommend that you contact your insurance agent to obtain such coverage. If you are renting, it is your responsibility to obtain renter's insurance that would cover any damage incurred by foster children.

E. HOW OFTEN CAN I EXPECT RESPITE?

Foster parents are eligible for respite based on what is specified in each individual child's service contract, and upon availability. Typically, foster parents are eligible for two days of out-of-home respite per month, a day is defined as an 8-hour period of time in most contracts. If a child goes to their biological family for a visit, it is considered respite for your family. In order to meet the high level of respite needs for all SA foster families, it is expected that you also provide respite for other SA foster parents. In addition, foster parents may be responsible for arranging their respite coverage. The SA primary contact will educate foster parents on how to arrange and coordinate their respite based on their eligibility. Unused respite care cannot be accumulated and can only be used during the month of eligibility for children served in Specialized and Therapeutic levels of care.

F. WILL THERE BE STAFF SUPPORT IN MY HOME?

Levels of support vary based on the needs of each specific child and what level of care they require. Your SA primary contact will communicate with you regarding the supports that are authorized to be provided in your home based on each individual child's contracted level.

G. HOW DOES SA STORE PAPERWORK ABOUT OUR FAMILY?

Each SA Licensor will have a locked file or cabinet to store protected information that will be maintained in your Foster Family File. This includes information about your family members, including, but not limited to: history and current status of medical conditions; therapeutic, psychiatric, and substance abuse treatment; and criminal background history. Lock and key will secure the file or cabinet.

Keys will be held by: The SA Licensor and SA Administrator (or designee).

DLR will be able to access your file as appropriate.

Some information, especially foster child specific information, may be kept separate from the Foster Family File by the SA Licensor and/or SA Case Manager. In all cases where information is stored separately, a notation may be included in the Foster Family File that states the type and location of the information.

Each region establishes how foster family phone lists and address lists are maintained for the purposes of SA personnel contacting you for placement, support, etc.

VII. WHAT IF WE WANT TO KEEP A CHILD LONG-TERM?

A. HOW LONG DO FOSTER CARE SERVICES USUALLY LAST?

The amount of time a child will stay in your home depends on the particular child and the parent's situation. The overall goal of foster care is to assist the child in developing those skills necessary to live in a permanent, family setting. Many of the services are tailored and intended to be short-term "rehabilitative" placements to stabilize the child and prepare him/her for more permanent options, which can include reunification with their biological family. A child could reside in your home for as short as one night, as long as a year, or longer. Long-term options for a child are explored upon initial placement and throughout the time the child is in your home.

B. WHAT OPTIONS ARE AVAILABLE FOR LONG-TERM CARE?

If you would like to be considered as a permanent option for children who will come to your home or for a child in your home, there are several types of care you may be able to provide:

Guardianship: You could potentially obtain legal authority to supervise the dependency of the child in your care until the child turns 18. This means that you will be obligated to provide care for the child and you will be able to give consent for medical, social, and school activities. If you are willing and able to continue to provide care to the child consistent with our agency's contractual obligations to DSHS, then our agency may be able to continue working with you as one of our foster families.

Adoption: When adopting a child, you legally establish a parent and child relationship. In some cases adoption support services may be available. It is unlikely that our agency will continue to provide you with services for your child once adopted.

C. HOW DO WE GO ABOUT EXPLORING THESE OPTIONS?

If you are interested in any of these options, consult with both your SA primary contact and your SA Licensor. Do not, under any circumstances, enter into direct negotiations with the child's CA Social Worker without the knowledge and approval of SA. The most successful plans have been well thought out and provide for contingency planning. Items that need to be addressed directly include legal status of the child, continuity of reimbursement, case planning, service provision, and supervision of your Foster Care License. Failure to address each one of these areas may jeopardize your license and our agency's ability to continue working with your family.

VIII. WHAT IF A REPORT IS MADE TO DLR/CPS REGARDING OUR FAMILY?

Occasionally, concerned community members and/or mandated reporters such as support staff, teachers, doctors, etcetera, may have concerns about your home or the children you serve. They will report these concerns to DLR/Child Protective Services (CPS), as required by law. DLR/CPS will screen the information and make a decision to refer the report to DLR as a licensing issue (violation of WAC), or to CPS as Child Abuse or Neglect, or both.

If the report is referred to DLR as a licensing complaint, the DLR Regional Licensor will contact your SA Licensor to determine how to resolve the issue. Frequently, your SA Licensor will be asked to research the matter and work with you to take the necessary steps to correct it, including but not limited to providing further documentation to clarify the situation, completing recommended trainings in specialized areas, and/or a formal compliance agreement.

If the report is referred to CPS as an allegation of child abuse or neglect, the following steps will be taken:

- CPS will notify the SA Licensor that a CPS referral has been made. SA and CPS will determine how you will be notified. SA will cooperate fully with CPS regarding any and all referrals. SA will not contact you with any information regarding the CPS referral until directed to do so by the CPS Investigator.
- A Stop Placement may be imposed on your home by SA and/or DLR, restricting future placements and respites and/or requiring current placement to be removed. If the foster child(ren) needs to be removed from your home due to the allegations, SA will be notified by DLR and arrangements will be made immediately.
- When a child is removed from your home, your foster care reimbursement may be suspended during the time of removal. A committee made up of the following individuals shall determine if payment will continue while your foster child(ren) is no longer under your care: SA Licensor, Program Manager and the Administrator of your region. You will be notified of the decision about reimbursement within five business days of notification of the CPS referral. In investigations lasting more than one month, the decision will be reviewed every 30 days. Reimbursement will not continue if the referral is due to clear noncompliance with the child's supervision plan or admitted abuse or neglect from the foster parent(s).
- Contact with your SA Licensor, Program Manager, and others shall be limited to guidelines established by DLR/CPS. You will be referred to any available advocacy support and resources. SA will work with DLR/CPS in every way possible to achieve resolution of the investigation.

In either instance, you are expected to professionally and promptly respond to all requests from DLR, CPS and SA in order to complete the investigation. Failure to do so forfeits ongoing reimbursements if your foster children are no longer under your care and may effect supervision of your license by SA. Any follow up and notification of findings of the investigation shall be provided to you in writing.

IX. WHAT IF I NEED A CHILD TO LEAVE?

You are expected to anticipate as much as possible any circumstances that may lead you to request that a child leave your home.

At SA we operate under the philosophy of **unconditional care**, meaning that we do not "give up" on children, nor do we deny services to them. When children struggle in foster homes, our first response is to assess the level of support provided to both the foster family and the child, and adjust as necessary.

We expect your first response to be a request for assistance and a willingness to try new and creative ways to better serve the child in your home. If it is clear that every reasonable effort has failed to produce an environment that helps the child become more successful, you may request the child be placed elsewhere. You must give us a written 30-day notice for us to seek alternate placement for the child. Please consider very carefully your 30-day notice request before you put it in writing. Once the process has started it may be very difficult to stop. A pattern of 30-day notices, asking a child be removed immediately without justifiable health and safety reasons, or an unreasonable 30-day notice request may cause us to re-evaluate your status with our agency.

In emergency situations where you have a family crisis or the child believably threatens serious harm and we are unable to provide sufficient support and supervision to reasonably assure all remain safe, we will assist in removing the child as soon as possible.

X. HOW DO I RESOLVE PROBLEMS THAT OCCUR BETWEEN MYSELF AND OTHER PROFESSIONALS?

Misunderstandings and disagreements occur in all organizations, and as subcontractors of SA you are not likely to avoid them. To ensure effective professional relationships, it is important that such matters are resolved before serious problems develop. Most incidents resolve themselves naturally. You should first try to resolve the problem with the other person or persons involved in the issue.

It is imperative that all involved in a disagreement or misunderstanding conduct themselves in a professional manner. It is our expectation that all SA employees and our sub-contracted foster parents communicate in a manner that does not portray hostility, disrespect, name-calling and/or abusive language. This type of behavior is counterproductive to any situation and must be avoided.

Any time you have a problem with an SA employee that seriously effects yourself or the child for whom you are providing care, and you are unable to resolve the issue by working directly with them, we have developed a grievance procedure for your use. All avenues to address conflict directly with the individual(s) need to be exhausted prior to initiating a formal grievance.

You may take the following steps if a conflict arises that is not resolved and/or a decision is made which is believed to adversely affect your ability to carry out your contractual responsibilities as a foster parent. Your failure to meet any of the time limitations shall constitute your withdrawal of the grievance.

- Submit a signed and dated letter to the Administrator within 10 calendar days of the aggrieved action or decision.
- If the Administrator does not resolve the grievance to your satisfaction within 10 business days of having received the grievance, you may request a review by the CFS Director. The finding of the CFS Director will be final.

XI. WHAT IF I WANT TO LEAVE SA?

Foster parents may need to withdraw their sub-contract with SA for a variety of reasons. If you wish to leave our agency, and you are in good standing, the contractual expectation is that you provide a minimum of 30-day written notice. In some instances, foster parents may be leaving the agency as a result of transitioning to a long-term commitment for a child, such as adoption. In such instances, SA will refer foster families to coordinating resources based on their needs. When receiving a notice to terminate the contract, our response will include efforts towards a smooth transition. SA consistently evaluates ways in which to grow and sustain the foster parent communities.

FOSTER CARE LEVELS

You may be trained and licensed to provide various levels of foster care. To provide any of the three levels of foster care, you must meet the requirements indicated for that level.

Reimbursement rates and correlating benefits for each level are paid only according to the level status of the child being served in your home, not according to your foster parent level. Consequently, you will only be reimbursed or receive correlating benefits during the time period that a child of that contracted level resides or respites in your home.

For example, if you are qualified to provide Therapeutic Care, you will only receive the Therapeutic Respite Reimbursement when serving a child who is contracted for Therapeutic Care. When serving a child who is contracted for Regular Foster Care in a Therapeutic Home, you will receive the Regular Foster Care Reimbursement Rate for that child.

CHILD PLACING AGENCY (CPA) FOSTER CARE – *REGULAR FOSTER CARE*–

This level of care is essentially the base service level that most foster children will receive when in foster care in Washington State. Foster Parents providing *Regular Foster Care* are providing a level of service specifically designed for children who are served through the Child Placing Agency contract. This may include children who are new to Children's Protective Services or children who have transitioned out of more moderate care situations and have reached more permanent living situations. This level of care allows families to consider placement for children between the ages of 0-17. SA will supervise the foster home license and your reimbursement will be paid by the placement agency (DSHS, SA, or other private agency). In some instances, DSHS will work directly with you on a child's planning and your SA Licensor will be the primary contact. In other instances DSHS may contract with SA and/or another private agency to provide additional support services to your family or directly to the child. This level of care may lead, depending on preference, to a more long-term placement with your family, including the option of adoption.

Reimbursement Rate:

The reimbursement rate for each child is dependent upon the child's age and identified needs and is child specific as authorized by DSHS. SA will reimburse Foster Parents the full amount authorized by DSHS to be paid for foster care reimbursements. The reimbursement process and rate will be provided in writing by SA, and/or the placement agency. The Reimbursement Rate is typically \$423-\$1377 per month, per child, but subject to change based on DSHS published rates.

Respite:

Respite is contingent upon the child's need, resource availability, and CPA Agreement specifications.

Services provided to Foster Family:

Placement for children being served under this level are based on the child specific contract with DSHS and can vary from child to child. Services could range from Case Management Services to In-Home Staffing and home specific training – depending on CPA Agreement Specifications.

Training Requirements for Foster Parents:

Training per WAC 388-148-0520 and DSHS Policy 45121. Additional Training hours required per three year licensing period. All required training certifications must be current. Training resources are available through your SA Licensor.

SPECIALIZED FOSTER CARE – BEHAVIORAL REHABILITATIVE SERVICES (BRS)

This level of care is specifically designed for children who require specialized support and services in order to achieve a successful living situation or transition to a permanent living situation. This level is for children between the ages of six and 17, and contracted through Behavioral Rehabilitation Services levels 1C and 1D. Typically, SA will supervise your license and contract directly with you to provide this specialized care to the children in your home. This level of care can be more intrusive than Regular Foster Care; however it provides your family with additional support and professional services to assist the child in reducing their need for specialized care. Families that choose this level of care should have at minimum one year of relevant experience.

Reimbursement Rate:

\$38 per day, per child and follows the child during respites, transitions to other placements, or any other transition out of your care. In situations where the primary foster parent retains responsibility for the child's care and is on-call for the child to return (such as when in detention or in the hospital) the primary foster parent is reimbursed.

This reimbursement paid to you covers all expenses for the child's room and board, transportation, clothing, and personal incidentals (i.e., hygiene products, school supplies). The reimbursement also allows for money for you to purchase endorsements covering foster children in your homeowners or renters' liability insurance.

Respite:

Children who are served under Specialized Foster Care receive two days of respite each month, if requested. Respite days are divided into ¼ day – 6 hour increments, for both the primary foster parent and the receiving/respite foster parent. In situations where the child is visiting their biological family, is admitted to a hospital, or is serving time in detention, the reimbursement following the child does not apply and the primary foster parent is reimbursed at the full day placement rate.

| Number of hours | Daily equivalent |
|-----------------|------------------|
| 0 to 6 hours | ¼ or .25 day |
| 6 to 12 hours | ½ or .50 day |
| 12 to 18 hours | ¾ or .75 day |
| 18 to 24 hours | 1 full day |

Example: If a child leaves your home for respite at 4 pm, you are reimbursed for a ¾ day of care – 12am to 4 pm = 16 hours or ¾ day (consistent with reimbursement rate traveling with the child). Likewise, when a child arrives at your home at 5 pm for respite, you are reimbursed at the ½ day rate – 4 pm to midnight = 8 hours or ½ day. The Foster Parent Reimbursement Request form has an additional column to indicate the time that a child leaves and arrives at your home.

Training Requirements for Foster Parents:

Initial Trainings as per WAC 388-148-0520 and requires 30 hours of annual training. All required training certifications must be kept current.

THERAPEUTIC FOSTER CARE – BEHAVIORAL REHABILITATIVE SERVICES (BRS)

This level of care is specifically designed for children who require highly intensive supports and services to live successfully in family situations. This level of care is for children between the ages of six and 17. Therapeutic Foster Care is for youth who are contracted through the Behavior Rehabilitative Services contract (1A and 1B level). This level of care will be most intensive, however, provides your family with wraparound support to ensure professional services and eventual reduction to less intensive and costly services. Families who choose to provide this level of care should have two years of relevant experience and must have an individual bedroom available for placement of a child. The length of stay of a child is typically three months to 18 months. Foster Parent(s) are required to meet additional state/private agency licensing requirements specific to this level of care.

Reimbursement Rate:

\$57 per day, per child and follows the child during respites, transitions to other placements, or any other transition out of your care. In situations where the primary foster parent retains responsibility for the child's care and is on-call for the child to return (such as when in detention or in the hospital) the primary foster parent is reimbursed.

The reimbursement paid to you covers all expenses for the child's room and board, transportation, clothing, and personal incidentals (i.e., hygiene products, school supplies). The reimbursement also allows for money for you to purchase endorsements covering foster children in your homeowners or renters' liability insurance. Reimbursement at the Therapeutic Rate is paid only for the child(ren) in the home being served under the BRS contract during the time they are residing in the home.

Respite:

Children who are served under Therapeutic Foster Care receive two days of respite each month, if requested. Respite days are divided into ¼ day – 6 hour increments, for both the primary foster parent and the receiving/respite foster parent.

| Number of hours | Daily equivalent |
|------------------------|-------------------------|
| 0 to 6 hours | ¼ or .25 day |
| 6 to 12 hours | ½ or .50 day |
| 12 to 18 hours | ¾ or .75 day |
| 18 to 24 hours | 1 full day |

Example: If a child leaves your home for respite at 4 pm, you are reimbursed for a ¾ day of care – 12 am to 4 pm = 16 hours or 3/4 day (consistent with reimbursement rate traveling with the child). Likewise, when a child arrives at your home at 5 pm for respite you are reimbursed at the ½ day rate – 4 pm to midnight =8 hours or ½ day. The Foster Parent Reimbursement Request form has an additional column to indicate the time that a child leaves and arrives at your home.

Training Requirements:

Initial trainings as per WAC 388-148-0520 and 30 hours of annual training. All required training certifications must be kept current.

DEFINITIONS:

ACTIVE STATUS: Foster parent(s) having a current foster care license with SA meeting all MLR's and SA standards, and are able and willing to have a foster child placed.

BRS CONTRACT: Behavior Rehabilitation Services Contract, the contract under which SA serves children that need more intensive services and structure than children typically served in the regular foster care system. CA determines which children qualify to be served under the BRS contract.

CHILD: An individual under the age of 18 receiving contracted services through Service Alternatives.

CHILD'S TEAM: Each child in care will have a team of individuals that consists of, but is not limited to, the child's Parent(s), (biological, foster, adopt,) CA Social Worker, Guardian ad Litem, therapist, school teacher, coach, probation officer, etc.

CPA: Child Placing Agency Contract, the contract under which SA serves children in regular foster care services. CA determines which children qualify to be served under the CPA contract.

CPS: Child Protective Services - responsible for investigating allegations of abuse or neglect.

CA: Children's Administration

DDA: Developmental Disabilities Administration

DLR: Division of Licensed Resources.

DSHS: Department of Social and Health Services

FOSTER PARENTS: For the purpose of these policies, foster parent(s) means a person or persons with a licensed foster home that is under the supervision of SA

MLR's: Minimum Licensing Requirements. A copy of the MLR's is given to foster parents prior to receiving a foster care license. Foster parents are required to read and comply with all requirements listed. MLR's are extracts from the WAC's. The MLR's are an outline of the minimum standards for which the foster parents and foster home are responsible for maintaining.

PRIMARY CONTACT (with SA): Each foster family will be given the name and number of their primary contact person within SA. This person may be a Program Manager, a Case Manager, or In-home Supervisor. The primary contact will be identified, and their role defined, prior to a child being placed into your home.

RCW's: Revised Code of Washington.

SA: Service Alternatives

WAC's: Washington Administrative Code. A booklet of the WAC's relating to foster homes is given to foster parent(s) in the form of MLR's.

WE/US: Service Alternatives (SA)