



DC CHILD & FAMILY SERVICES AGENCY

RESOURCE PARENT HANDBOOK

What Resource Parents Should Know Before
a Child is Placed in Their Care and Home



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DC MURIEL BOWSER, MAYOR

This Resource Parent Handbook is a comprehensive guide that is meant to be accessible, understandable, reliable, and helpful for resource parents and congregate care providers. Although we consistently refer to resource parents in the Handbook, this information is intended to be useful for any adult who has responsibility for the care and supervision of children and youth in the District of Columbia's child welfare system.

As child welfare practice evolves and policies and information are updated, so too will this Handbook be updated. Chapters will be revised, new chapters will be added, and new appendices will be attached. The latest version of the handbook and any relevant policies will always be available online at <https://cfsa.dc.gov/page/foster-parents>.

We welcome and encourage you to share your feedback about the Handbook. Please feel free to contact the following District of Columbia Child and Family Services Agency (CFSA) employees with any comments or questions:

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We hope this will be a useful tool. Happy reading!

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Chapter 1: Welcome and Introduction

The District of Columbia Child and Family Services Agency (CFSA) welcomes resource parents to the world of caregiving for children¹ who are temporarily unable to live with their parents or current caregivers. As a new or experienced resource parent, you've made an important choice to nurture a child who needs your care and support. We thank you!

The Purpose of the Handbook

The Resource Parent Handbook is designed to help orient you on your journey, provide guidance and helpful hints, and to help you easily access all things “fostering.” The handbook is part of a larger Resource Parent Toolkit that includes the [Important Facts for Resource Parents brochure](#), a monthly “Do You Know” email tip, and other documents such as quick reference guides and frequently asked questions. It outlines basic information related to the various resources that can help resource parents caring for DC children feel supported and successful in their role regardless of whether they are licensed by CFSA or a private agency.

The term “resource parent” is used in the broadest manner throughout the handbook. A resource parent is anyone who is currently functioning as – or is in the process of becoming – a licensed kinship caregiver, foster parent, respite provider, legal guardian, or adoptive parent. Each type of resource parent has similar needs, even if they face unique challenges. All resource parents complete a minimum of 30 pre-service training hours and a licensing process that ensures their preparation to safely care for a child in their home.



From resource parent training to a child’s permanency, this handbook addresses every step along a resource parent’s path. It is a living document. That is, as things change – whether it is a law, policy, practice, or service – CFSA will update the Resource Parent Handbook accordingly. For now, the handbook provides information on the following topics that have been most requested by resource parents:

- ▶ Training and licensing
- ▶ Placement and matching
- ▶ Key team members, teaming and shared parenting

Types of Resource Parents

Kinship Caregiver: An adult who is related to the child by blood, marriage or adoption, or an adult with an established emotional bond with the child (“fictive kin”), e.g., a godparent to the child.

Foster Parent: An adult who cares for a child who is temporarily separated from his or her family.

Guardian: Typically, a relative caregiver, but sometimes a foster parent, who has been granted additional parental and decision-making rights for the child.

Adoptive Parent: An adult with the legal relation of a parent to a child. An adoptive parent has the same rights and obligations that exist between children and their birth parents.

¹ The term “child” in this handbook includes infants, adolescents, and older youth unless otherwise specified by context.

- ▶ Chronology of the resource parent experience from placement to permanency
- ▶ Reasonable and prudent parenting standards
- ▶ Resources and supportive services
- ▶ Attachments (including a listing of important contact numbers)

What is Positive Permanency?

Positive permanency refers to those legally-binding relationships that a child enters into after leaving foster care. Simply put, positive permanency is reunification with a parent or parents, guardianship, or adoption. The preferred permanency goal is reunification. If reunification is not an option, then positive permanency requires a lifelong relationship with willing and able caregivers who provide a safe and stable living environment that supports the child's well being and healthy development into a self-sufficient adult and community member.

CFSA and private agency social workers begin to plan for positive permanency the moment children are separated from their homes of origin. Timeframes for achievement of each permanency goal are listed in the table below. Please note that these timeframes are guidelines. The permanency process does not end until the child has left foster care and has safely entered into one of the following permanency goals:

Goal	Description	Timeframe ²
Reunification	The child has safely returned to his or her parents or primary caregiver. Reunification is the preferred permanency option for all children in out-of-home care, whenever feasible.	Within 12 months
Guardianship	The child is discharged from foster care to a legally established custody arrangement, which may be a permanent placement with a relative. Unlike adoption, guardianship does not automatically terminate parental rights. It does require the filing of a petition with the Family Court. Legal guardianship ends when the child reaches age 21.	Within 18 months
Adoption	The child is under the care and custody of the adoptive parents through a legal process. In the District of Columbia, the Family Court terminates the legal rights of the biological parents as part of the adoption. Those rights are then transferred to the adoptive parents.	Within 24 months

Alternative Planned Permanent Living Arrangement (APPLA)

Alternative Planned Permanent Living Arrangement (APPLA) is considered a permanency goal for youth age 16 and older only after the social worker has documented compelling reasons why none of the above goals are in the best interest of the youth. With a goal of APPLA, CFSA maintains placement responsibility and supervision of the youth until he/she reaches age 21. This goal is reviewed every three months during a youth's transition planning meetings.

² The federal government sets timeframe guidelines through a process called the Child and Family Services Review for the achievement of permanency goals, except in the case of Alternative Planned Permanent Living Arrangement (APPLA), a term created by the Adoption and Safe Families Act of 1997 to replace the term "long-term foster care."



Concurrent Permanency Goals

Frequently, a child's team³ will work toward two permanency goals at the same time in case one is not achieved. While these concurrent goals may not directly affect resource parents, it is important that you are aware of the permanency goals – especially if you need to help a child adjust to changes in the goal. For example, if a secondary goal (like adoption) replaces a primary goal (like reunification), you will need to be sensitive to the child's feelings and reactions, help support the child's process, and share observations with the child's team.

Key Points – Permanency

- ✓ Positive permanency refers to those legally-binding relationships that a child enters into after leaving foster care.
- ✓ Reunification is always the first permanency goal considered.
- ✓ Frequently, a child's team will work toward two permanency goals at the same time.
- ✓ The resource parent's role is integral to helping a child achieve permanency.

Further Information

- ▶ Important Facts for Resource Parents
<http://cfsa.dc.gov/page/important-facts-resource-parents>
- ▶ Trauma-Informed Child Welfare Practice
<https://www.childwelfare.gov/topics/responding/trauma/>
- ▶ Concurrent Planning for Permanency Goals
<https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/concurrent/>
- ▶ Permanency for Youth
<https://www.childwelfare.gov/topics/permanency/specific/youth/>

³ The team is a group of professionals, parents, family members, resource parents, children, and others representing various aspects of the child's well being.

Chapter 2: Training and Licensing

The DC Child and Family Services Agency (CFSA) provides a full range of competency-based training activities that support the role of a resource parent. There is more than one way to learn and gain the skills needed to care for children in foster care. CFSA offers options ranging from one-on-one and classroom training to online training to help you as a unique individual to become the best resource parent you can be.

Resource parent training has two phases. Pre-service training is required for licensing and in-service training is required for renewing your license.⁴ They are both designed to provide a broad, trauma-informed understanding of fostering and to enhance specific skills necessary to parent children in the foster care system.

Pre-Service Training

Pre-service training includes 30 hours in DC and takes about five weeks to complete. Although Maryland regulations only require 24 hours of pre-service training for resource parents, if you are caring for a DC child, you must still complete the higher requirement of 30 hours. The training must follow nationally-recognized training methods. CFSA's Child Welfare Training Academy (CWTA) has used the nationally recognized Partnering for Safety and Permanence-Model Approaches for Partnerships in Parenting (PS-MAPP) curriculum but changed to the New Generation Parent Resource for Information, Development, and Education (PRIDE) curriculum in October 2018.

NOTE: Married applicants or applicants living as a couple must both complete pre-service training.

Pre-service training covers the following topics:

- ▶ Licensing process
- ▶ Relevant statutes, rules and policies
- ▶ Roles and relationships
- ▶ Resource parent rights and responsibilities
- ▶ Developmental needs of children in foster care
- ▶ Awareness of cultural and religious differences
- ▶ Child behavior management and discipline techniques
- ▶ Prevention, reporting, investigation, and services related to child abuse and neglect
- ▶ Community-based supportive services for children, families, and resource parents
- ▶ Communication and problem solving
- ▶ Family Court processes
- ▶ First Aid and Cardiopulmonary Resuscitation (CPR) training



⁴ In DC, approved foster homes are called "licensed." In Maryland, approved foster homes are called "certified." In this Handbook, we generally refer to the foster home approval process as "licensing."

In-Service Training

The Child Welfare Training Academy (CWTA) offers classroom in-service training for all private agency and CFSA-licensed resource parents of DC children in foster care. Approved courses are offered at CFSA offices, CFSA-contracted foster care agencies, community-based organizations, and CWTA-approved websites. In some cases, training on specialized topics that are referred to as “table-top training” can be held at your home.

To maintain your current license in DC, you must complete at least 30 hours of **in-service training** between the start date of licensure and the renewal date (a two-year time span). In Maryland, homes are certified for one year. The requirement for Maryland’s in-service training is 20 hours a year.



It is expected that resource parents will select in-service training courses appropriate to the age and needs of the child in their home. CWTA has developed a tool called the Resource Parent Individual Development Plan (IDP) that will help you identify areas where you may want training and support based on core parenting competencies or topics specific to the age and needs of the child in your home. Your assigned support worker will review the IDP with you at least annually to identify and suggest training topics.

In the event that you are asked to consider welcoming a child with needs that you haven’t been trained for, you are invited to participate in a variety of trainings. Training hours are available to prepare you to welcome children in your home who might even be out of your comfort zone or preferences. We also encourage you to take some of the cross-training courses where resource parents and social workers learn together. This is a great way to improve teaming, relationships, and understanding of each other’s roles. CWTA’s classroom training topics and online courses can be found in the training calendar in CWTA’s newsletter, theSOURCE.⁵

The following courses are just a sample of in-service training topics:

- ▶ Child and Adolescent Development
- ▶ Attachment
- ▶ Shared Parenting
- ▶ Fetal Alcohol Syndrome
- ▶ Grief and Loss
- ▶ Psychotropic Medications
- ▶ Trauma Systems Training for Resource Parents
- ▶ Working Effectively with Lesbian, Gay, Transgender, Bisexual and Questioning (LGBTQ) Youth

⁵ <http://cfsa.dc.gov/page/child-welfare-training-academy>

Key Points – Training

- ✓ Resource parent training has two phases: pre-service training required for initial licensing and in-service training required for maintaining and renewing a license.
- ✓ To maintain a current license in DC, resource parents must complete at least 30 hours of in-service training between the start date of licensure and the renewal date (a two-year span). In Maryland, 20 training hours per year are required.
- ✓ The most recent Child Welfare Training Academy (CWTA) training calendar is included in each

Frequently Asked Questions – Training



Where can resource parents find a current training schedule? Training schedules are found on CFSA’s website under Partners. There is also a link to the CWTA with a link to CWTA’s newsletter, [theSOURCE](#). It is a great way to find current information on all things training and much more.

How do resource parents register for CWTA training? Registration is required, no walk-ins are permitted. To register for CFSA training, call the CWTA registration line at (202) 727-5329, or email the course registration form to cwta.training@dc.gov, or deliver a copy of the form to your support worker. Registration forms are available in theSOURCE newsletter or on the CFSA website. Online registration is available at <https://cwta.coursestorm.com>.

Are there different training requirements for foster homes in Maryland? Maryland has slightly different training hour requirements than DC, based on the [Code of Maryland Regulations](#) (COMAR). Maryland resource parents for a DC child will always have to adhere to the more stringent standard of the two jurisdictions. This should be discussed with you during your licensing process.

Can I take a course that has not been approved but is relevant for me? To receive CWTA credit, the training curriculum needs to be relevant and pre-approved by CWTA. Approval must be requested in advance. Please email your request for approval to cwta.training@dc.gov. Include the title of the training session, trainer or organization, description, course hours, and any relevant link.

Does CWTA offer specialized trainings? Yes. CWTA offers “table-top training” during which a subject matter expert will come to your home to share information and resources tailored to your training needs.

Does CWTA offer tiered training on certain topics so that resource parents can “move to the next level”? CWTA has developed a tiered training approach so that resource parents can take beginner, intermediate, and advanced levels of certain trainings.

How would resource parents recommend a training topic? CWTA is always interested in making sure the training meets the needs of resource parents. If you have an interest in a particular topic that is not currently included in the private agency or CWTA curricula, please contact cwta.training@dc.gov or call CWTA at (202) 727-5329.

Frequently Asked Questions – Training



Do CWTA training instructors consider different learning styles? CWTA trainers consider different learning styles and incorporates various adult learning strategies such as the use of visuals, hands-on learning and small group discussion, to name a few. Resource parents should feel free to share suggestions or recommendations with CWTA for particular approaches or accommodations.

What do resource parents have to do if they have not received their training certificate for a CWTA training that they have completed? For inquiries regarding certificates for CWTA training or other courses, please contact cwta.training@dc.gov or call (202) 727-5329.

IMPORTANT – PLEASE ARRIVE ON TIME FOR ALL TRAININGS!

Timeliness is essential. If you arrive more than 30 minutes late, you will miss important content and may not receive credit or a certificate of completion, even if you are admitted to the training.

Further Information

- ▶ CFSA Child Welfare Training Academy
<http://cfsa.dc.gov/page/child-welfare-training-academy>
- ▶ CFSA Resource Parent Training Policy
<https://cfsa.dc.gov/publication/program-resource-parent-training>
- ▶ PS-MAPP (Partnering for Safety and Permanency-Model Approach to Partnerships in Parenting)
<https://www.childwelfare.gov/topics/adoption/adoptive/before-adoption/preadoption/psmapp/>
- ▶ PRIDE Model of Practice
<http://www.cwla.org/pride-training/>
- ▶ Foster and Adoptive Parent Advocacy Center Trainings
<http://dcfapac.org/trainings.html>
- ▶ Adoptions Together
<https://www.adoptionstogether.org>
- ▶ Code of Maryland Regulations
<http://www.dsd.state.md.us/COMAR/ComarHome.html>

Resource Home Licensing

Whether you live in DC or Maryland, licensing or certifying your home is one of the most important responsibilities on your list of things to do. From the emergency evacuation plan to the lead-based paint inspection,⁶ your home must be a safe environment for children. Equally important to the physical environment is the nurturing, supportive environment created by you and other adults in the home.

Both DC and Maryland have regulations that set standards for the home environment as well as the readiness of a resource parent to welcome a child into the home. If you are being certified in Maryland, you will be required to follow all requirements outlined in the Code of Maryland Regulations (COMAR). Resource parents licensed in the District must always consult the rules and regulations outlined in Chapter 60 of Title 29 of the District of Columbia Municipal Regulations (DCMR) for specific details. Remember that if you are certified in Maryland but caring for DC children, you must follow the stricter provisions of either regulation.

Who Can Be Licensed as a Resource Parent?

Adults meeting the requirements and criteria outlined below are welcome to apply for licensure regardless of race, creed, color, sexual orientation, marital status, religion, or national origin. There are certain requirements that must be fulfilled.

The list below gives some of the most important requirements for CFSA licensure. Resource parents are encouraged to review Title 29 Chapter 60 of DCMR for additional information. In general, prospective resource parents must fulfill the following requirements:

- ▶ Complete all licensing requirements within the 150-day mandated timeframe, including the pre-service training requirements, background checks, and home study.
- ▶ Provide a safe and hazard-free environment.
- ▶ Complete a Clean Hands clearance.⁷
- ▶ Have sufficient income to meet the reasonable living needs of their family without relying on foster care board and care payments. (CFSA uses the current year's Federal Poverty Index based on household size to evaluate the sufficiency of income.)
- ▶ Be in good physical and mental health as documented by a physician.
- ▶ Have the commitment, time, and ability to provide quality care, guidance, and support to children, including support of their permanency goals.
- ▶ Be willing to function as a member of the child's planning and permanency team alongside other stakeholders, including but not limited to the child's birth parents, social workers, guardians *ad litem* (GALs), and attorneys.
- ▶ Complete all in-service training hours to maintain licensure.

⁶ The lead paint inspection of the home applies if the applicant wishes to foster a child younger than 6-years-old.

⁷ The Clean Hands Law (DC Official Code §§47-2861 through 47-2866) requires an applicant for a license, contract or permit to not owe more than \$100 to the District government. If the applicant has failed to file District tax returns, they are also subject to the Clean Hands Law and will be denied the license. Submission of a Clean Hands certification form is required for the license. The Office of Tax and Revenue Collection Division receives the request for the Clean Hands certificate, researches the status, and provides the Clean Hands certification or a letter stating amount owed.

CFSA may not license an individual as a resource parent if that individual or any person 18 years of age or older residing in the prospective foster home has a felony conviction related to any of the following criminal offenses or their equivalents:

- ▶ Child abuse
- ▶ Child neglect
- ▶ Intrafamily abuse
- ▶ A crime against children, including but not limited to child pornography, kidnapping, child abduction or contributing to the delinquency of a minor
- ▶ A crime involving violence, including but not limited to rape, sexual assault, and homicide
- ▶ A felony conviction within the past five years for physical assault, battery, or drug-related offenses

Types of Resource Homes

While the licensing process is standardized across the various types of resource homes, it is helpful to understand resource parent options. The following descriptions give a brief overview of the types of resource homes.

Type	Definition
Interval	Licensed homes that provide a temporary safe haven of 72 hours or less. Often interchangeable with ST*A*R homes.
ST*A*R	Stabilization and Re-Placement Homes (ST*A*R) homes provide 24-hour access to licensed, short-term, emergency placements of no more than 30 days.
Kinship	Kinship homes are provided with “temporary emergency licenses” to allow children to immediately be placed in their relative’s home. Kinship caregivers must complete all requirements within 150 days to gain a permanent license.
Traditional	Traditional resource homes allow for placement of a child who needs a temporary safe haven until reunification or other permanency goal is achieved. Beginning in 2018, all licensed homes will receive training to support children with higher levels of care, depending on the child’s needs. If children are diagnosed as medically fragile or with developmental disabilities, then medical, educational, or rehabilitative supports may be provided according to the child’s treatment plan.
SOY	The Specialized Opportunities for Youth (SOY) homes program provides CFSA-licensed resource parents with additional training to serve youth with significant behavior challenges. Resource parents commit to two years for SOY homes.
Respite	Respite homes are licensed homes that provide resource parents with temporary, alternative overnight care for the child in their home, on a planned or unplanned basis.

Starting the Licensing Process⁸

CFSA's goal is for resource parents to have the full licensing application completed within 100 days. During CFSA's pre-service training, you will be assigned a licensing worker to help you through the entire licensing process. One of your first steps will be a background check. Although it may feel awkward for resource parents to have their history examined in this way, it is necessary. It is also necessary for all household members age 18 and older to undergo these background checks, which include any history of child abuse or neglect. This process requires the signature of the resource parent as well as signatures of all household members 18 years and older on an Authorization to Release Information Form. Background checks include the Child Protection Register (CPR) database,⁹ local police clearances, and clearances from the Federal Bureau of Investigation (FBI).

- ▶ **Child Protection Register (CPR) Checks:** As part of the licensing process, CFSA must receive a clearance from DC's CPR as well as the child protection registers from every state in which the resource parent and any other adults in the home have resided or worked from the time they were 18 years of age or older. A CPR check is required annually.
- ▶ **Local Police and FBI Clearances:** We mentioned this above, but it is worth repeating: if any of the criminal background checks reveal a felony conviction involving violence, the individuals may not be licensed for the fostering of a child in the District's child welfare system. Families living in Maryland may have even more rigid restrictions regarding criminal records and licensure. Local police and FBI clearances are required every two years.
- ▶ **Home Study:** The home study evaluation process is a practical way to ensure that the child's environment is safe and prepared for proper care (e.g., free of lead-based paint, equipped with proper fire escapes and sufficient room for the child to have privacy). The study requires completion of family profiles and questionnaires, an interview process, and the collection of required documents. The licensing specialist conducts a minimum of two interviews per applicant.

License Renewal Process

If resource parents live in DC, their foster home license expires after two years. If resource parents live in Maryland, certification expires after one year. The licensing worker should reach out to you within 120 days of your licensing expiration to prepare for renewal. If your circumstances change after licensure, e.g., a new adult moves into the home or you are planning to move to another home, please contact your assigned licensing worker as soon as possible.

⁸ In DC, approved foster homes are called "licensed." In Maryland, approved foster homes are called "certified." In this Handbook, the foster home approval process is referred to as "licensing."

⁹ The Child Protection Register is an electronic database of names of individuals who have been substantiated for child abuse and neglect as the result of a Child Protective Services investigation in the District of Columbia. Also included in the Register are the names of individuals for whom investigation dispositions were inconclusive. As noted, CPR clearances are required for all resource parents and staff of child-serving institutions.

Key Points – Licensing

- ✓ DC foster homes are licensed for two years. Maryland foster homes are certified for one year.
- ✓ Resource parents that live in Maryland and foster DC children must follow both the Code of Maryland Regulations (COMAR) and the District of Columbia Municipal Regulations (DCMR) requirements.
- ✓ Although it may feel awkward for resource parents to have their history examined, background checks are necessary to protect children.
- ✓ The home study evaluation process is a practical way to ensure that the child’s physical environment is safe and that resource parents are ready to welcome a child into their homes.

Frequently Asked Questions – Resource Home Licensing



Are there different licensing requirements for traditional foster care and adoption? No. The licensing requirements are exactly the same.

How long is the licensing process? Regulations require that the licensing process be completed within 150 days, even if the resource parent started with a temporary kinship license.

What is a home study? A home study is a comprehensive assessment of the physical environment and interviews and clinical assessments of the resource parent and other people living in the home.

What is included in a home “safety assessment”? For licensure purposes, the physical aspects of the home are inspected to ensure compliance with regulations and to determine if the home is safe for a child to be placed. Safety is determined through a safety assessment, which includes a checklist and various reports that address such issues as lead-based paint and fire inspections.

Can a non-relative resource parent have “temporary emergency licensing”? Yes, sometimes called “fictive kin,” a person who has an established relationship with the child – e.g., a godparent, neighbor, or other adult with an established emotional bond – may be eligible for emergency licensing.

What happens if my license is suspended or not renewed? Generally, CFSA will remove children from a home with a suspended license. If your license is suspended, revoked, or not renewed, you can request a fair hearing.¹⁰

Will I be disqualified if I don’t pass a background check? This really depends on the offense. As noted earlier, there are times when the CFSA or Maryland agency director can decide on a case-by-case basis to license a potential resource parent despite his or her background check. In general, certain criminal offenses and any history of child abuse and neglect will not be waived for licensing purposes.

¹⁰ Resource parents have the right to appeal certain decisions related to licensing. Please refer to CFSA’s Fair Hearing policy; foster homes in Maryland can contact the Maryland Office of Administrative Hearings at 1-800-332-6347.

Frequently Asked Questions – Resource Home Licensing



Can I appeal a denial to grant me a foster license? Only denials for full licensure can be appealed. If you are a kinship provider whose request for temporary licensure has been denied, there is no appeal process. Please review the fair hearing section under Chapter 11: Roles and Responsibilities. For the actual appeal, follow the regulations found in Title 29 Chapter 59 of the District of Columbia Municipal Regulations (DCMR). Learn more about fair hearings at the link below.

Further Information

- ▶ CFSA's Online Policy Manual
<https://cfsa.dc.gov/page/cfsa-online-policy-manual>
- ▶ District of Columbia Municipal Regulations – Chapter 60
<https://www.dcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=29-60>
- ▶ Maryland Resource Parent Association – Code of Maryland Regulations – Title 7
<http://www.mrpa.org/resources/foster-parent-resources/maryland-dhr/comar/>
- ▶ State Adoption and Foster Care Information – Adopt US Kids
<http://www.adoptuskids.org/adoption-and-foster-care/how-to-adopt-and-foster/state-information>
- ▶ Fair Hearings
<https://cfsa.dc.gov/page/fair-hearings>
- ▶ Parenting Magazine – Ins and Outs of Fostering
<http://www.parenting.com/parenting-advice/adoption/ins-outs-becoming-foster-parent>

Chapter 3: Placement and Matching

Research and experience have shown that from birth through young adulthood, everyone needs to feel a place of belonging. It is an essential part of feeling safe and secure. So when a child is placed in a resource parent's home, the child will naturally be asking, "Is this a home where I will feel safe? How long will I belong here?" Resource parents are one of CFSA's most important partners for ensuring that all children in out-of-home care will ideally have the opportunity to grow up with a certain measure of certainty about where they will live tomorrow and who they can rely on for emotional support now and in the future.

After resource parents have fulfilled all the training and other requirements to become licensed, they are in the unique position to open their hearts and homes to help children feel safe. The children in foster care will rely on you for emotional support until they can return home to birth parents or the original caregiver or until they achieve another permanency goal.

The relative of a child who is entering foster care will likely already know the child's personal family details. But a non-relative resource parent will just begin learning these details and will continue to learn on a daily basis. A non-relative resource parent should be encouraged to participate in an Icebreaker to discuss shared parenting with the birth parents (or caregiver) and to learn even more about the child's needs and best interests. If an Icebreaker is not offered, resource parents are welcome to request one from the social worker. Icebreakers are discussed later in this chapter, and shared parenting is further explored in Chapter 10.

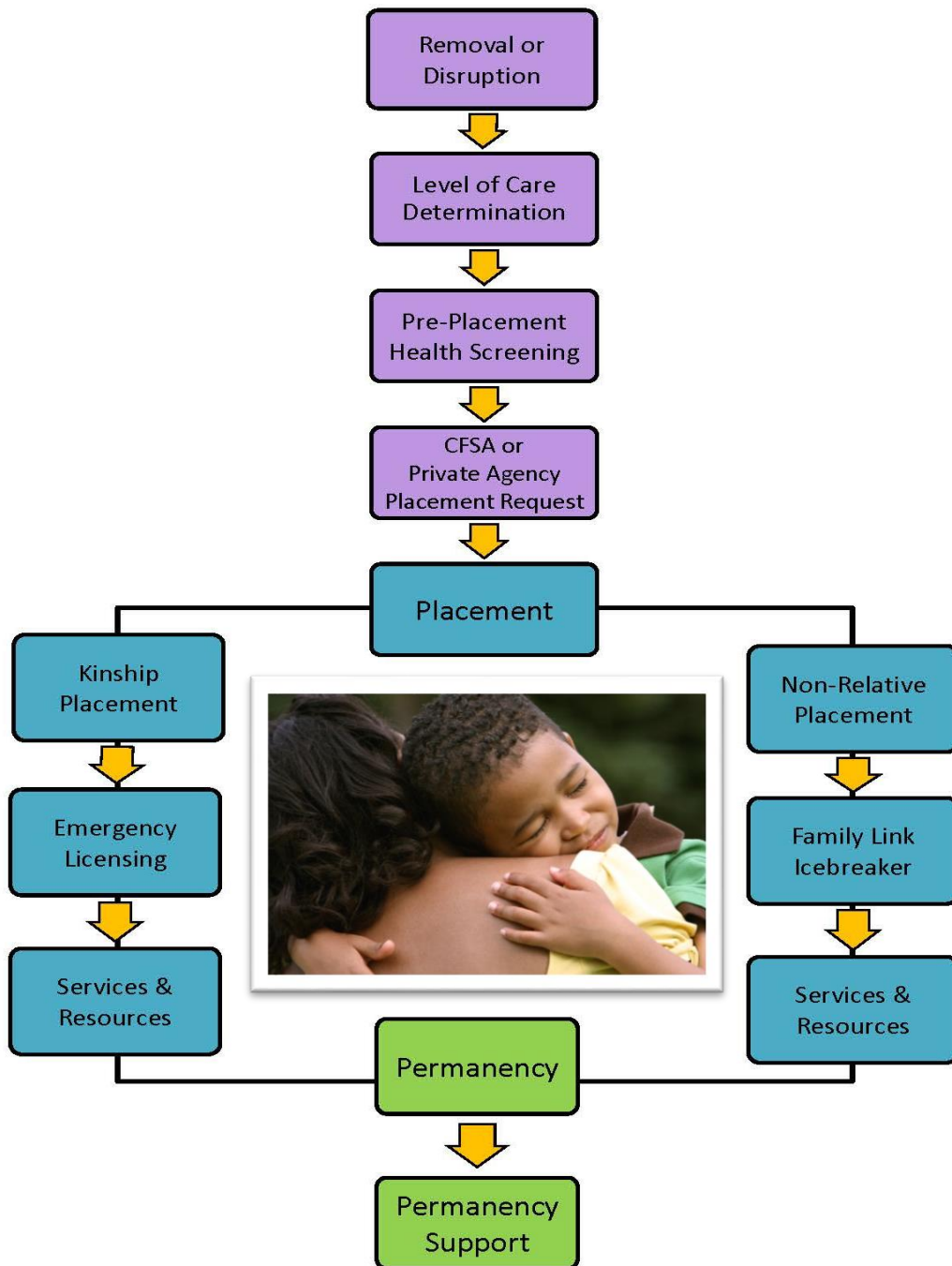
The Placement Process

When CFSA must remove a child from his or her home, it is policy to first consider kinship care, which means seeking a child's relatives or other individuals who have a significant relationship to the child or the child's parents. It is important to note that kinship care is a form of foster care, and kin caregivers have the same rights and responsibilities that traditional foster parents have. If there is no kinship placement available, CFSA works to match the needs of the child with the strengths and capabilities of non-relative resource parents.

Next to the priority of kinship care, CFSA also considers placing siblings together, unless there is a very strong reason for their separation – sometimes that reason is ordered by a Family Court judge. Finally, CFSA tries to place children in their own communities whenever possible. That way, they can stay in their same school, maintain their friendships, and be in familiar surroundings even in the midst of being separated from their homes of origin. Simultaneously, throughout the duration of a placement, social workers continue to seek any of the child's relatives who may be willing and able to care for the child.



If social workers locate relatives willing to bring the child into their home, CFSA may move the child out of a resource parent’s home in order to place the child with kin. CFSA provides the foster parent with 10 days’ notice before the move occurs. If the child has been living with a resource parent long enough for a true emotional bond to be established, CFSA considers the decision for re-placement with kin case-by-case, sometimes in cooperation with the Family Court. While kinship caregivers must be licensed prior to placement of a child, CFSA may provide a temporary license until the full licensing process is finalized (see Chapter 2).



Level of Care Determination

CFSA assesses each child to determine individual needs and circumstances. This determination is called the child's level of care (LOC). For example, if a child entering foster care has been diagnosed with a medically fragile condition, CFSA will place that child only in a home or facility adequately prepared to meet the child's needs. Perhaps the home needs to be wheelchair-accessible, or perhaps the resource parent has received special training regarding feeding the child. Another youth may be pregnant and requires pre-natal care. In all cases, no matter what other services are provided, every child will need loving kindness and support while navigating the new and frightening experience of moving into a resource parent home.

Pre-Placement Health Screening

Each child has a health screening before entering a resource parent's home. These screenings take place at CFSA's on-site clinic, the [Healthy Horizons Assessment Center](#) (HHAC). The screenings are conducted by HHAC's registered nurses. They help CFSA and resource parents to know about any health conditions such as asthma, allergies, or even a seizure disorder. The screening also gives information about potential nutritional problems or developmental or mental health concerns. The screening may also identify medication needs. The one exception is a child who is being released from a hospital directly to a placement. The discharge papers will then serve as the screening record. Every child should arrive with a Cleared for Placement Form so that you can be assured that a screening has occurred. While not every child will have serious health conditions, it is best for you to be prepared and to consider your capacity to care for such a child, as well as any supports and resources you may need.

While lots of information can be revealed as a result of the initial screening, some physical and mental health conditions are not easily diagnosed in a single screening. Children may unconsciously mask symptoms as part of the trauma of being separated from their parents or caregivers. This is not uncommon. It is important for resource parents to review the results of the initial screening so they can be on the lookout for any additional behaviors or concerns that arise as the child becomes more comfortable in the home. Please communicate your observations about the child's behavior to the social worker. The child may need additional assessments and services. In fact, it is standard practice for a child first coming into care to have a 30-day medical follow-up evaluation at HHAC and dental follow-up that can be scheduled by HHAC with the mobile dental van. It is expected that you will schedule these appointments in addition to scheduling other appointments throughout the life of the case, including annual physicals, urgent care visits for the flu, summer camp physicals, etc. By scheduling directly, you can ensure your ability to participate. If you have trouble identifying a physician for ongoing care for the child, please ask a nurse from HHAC for assistance.

In an emergency, first call 911 or take the child to the emergency room as appropriate. Please note that although you do not have the ability to consent to non-routine or emergency medical treatment, the hospital will try to reach CFSA but can still treat the child in a life-threatening emergency. It is a good idea to carry the HHAC on-call telephone number with you at all times: 202-498-8456. (Please also refer to the Frequently Asked Questions section of Chapter 8 for more details on medical consents.) Always contact the social worker as soon as safely possible.

Placement Request

After a screening (or even before), typically the Child Protective Services (CPS) investigative social worker asks CFSA's Placement Services Administration (PSA) to identify a foster home after exhausting all immediate efforts to identify kin. Sometimes, a child is already in a placement

and, for a variety of reasons, the child might be removed and placed in another home. This is called a “re-placement.” Whether an initial placement or a re-placement, each placement request follows certain steps.

The Matching Process

Children come into care in several different ways – sometimes the children are known to CFSA and sometimes they are not. The matching process is always a little easier when we are able to plan the placement. A planned placement might occur when a child’s family has been receiving in-home services, but the children must be removed for safety reasons. In those cases, CFSA will have a good amount of background and history on the children. A planned placement might also occur when a relative or adoptive home is identified for a child in care. Less frequently, a child will come into care during an emergency, from a family that has not had prior involvement with CFSA, which makes information gathering more difficult. This limits the information available to share with a resource parent. It may take several days or weeks before the social worker gets a complete picture of the child’s history, family and particular needs.

CFSA placement specialists assess children’s needs, conditions and behaviors as part of the level of care determination. They enter information from that pre-placement assessment into CFSA’s database of child welfare information, FACES.NET. Your profile information in FACES.NET – preferences, skill sets, and characteristics of your home – is used to make the best match.

When older youth need placement, their direct input is considered part of the matching process. The youth’s sense of security and well being will always be a priority, and yet CFSA recognizes that if the youth is not happy, the resource parent may also be unhappy. Encouraging open dialogue between a proposed resource parent and a youth prior to placement hopefully leads to a more successful placement.

Matching is most successful with a lot of information. Still, CFSA strives for a “first placement/best placement” standard—that is, getting a child into a placement that will meet the child’s needs. Indeed, good matching is one of the most important ways that CFSA can help resource parents perform at their best. In other words, the better you are matched with a child, the better you are able to meet the child’s needs. It helps both you and the child to get to know one another and establish rapport and trust.

At all times, CFSA encourages resource parents to consider opening their homes and hearts to a child outside of their preference list. In these cases, it is CFSA’s commitment to ensure that each resource parent receives every support and resource necessary to provide the quality care the child deserves.

Child and Adolescent Functional Assessment Scale (CAFAS)[®] and the Preschool and Early Childhood Functional Assessment Scale (PECFAS)[®]

When a child enters foster care, CFSA uses the CAFAS or PECFAS to assess their needs through several domains related to daily functioning. These tools help social workers make placement decisions and plan for permanency. Social workers complete the assessments every 90 days. Overall, both Child and Adolescent Functional Assessment Scale (CAFAS) or the Preschool and Early

Childhood Functional Assessment Scale (PECFAS) provide consistency in decision-making for placement and permanency strategies. In particular, the assessments measure a child’s functioning over the following eight domains:

- ▶ School or work
- ▶ Home
- ▶ Community
- ▶ Behavior toward others
- ▶ Mood or emotions
- ▶ Self-harming behaviors
- ▶ Substance use (CAFAS only)
- ▶ Thinking capabilities

CAFAS – The Child and Adolescent Functional Assessment Scale is designed for children or youth aged 6 to 20 years of age to assess a youth’s day-to-day functioning. The tool tracks changes in functioning over time.

PECFAS – Pre-school and Early Childhood Functional Assessment Scale is the “preschool version” of the CAFAS, which is used to assess day-to-day functioning of children ages 3 to 5 years old across life domains. The PECFAS also determines whether a child’s functioning, improves over

Below are just some of the characteristics that the CFSA Placement Services Administration might look for when matching a resource parent with a child:

Child	Resource Parent
Age	Licensed age range
Gender	Licensed gender
Siblings	Size of home, number of bedrooms and number of children willing to accept
CAFAS/PECFAS results	Special skills or training that a resource parent has
Primary language spoken	Languages that a resource parent can speak, read, or write (e.g., Spanish or sign language)
Physical accessibility needs	One-story or multi-level home or a home that can be adapted if needed, e.g., wheel chair access
Dietary preferences (e.g., vegetarian), allergies (e.g., peanuts), restrictions (e.g., Halal or Kosher)	Dietary flexibility, preferences or restrictions
Self-identification as LGBTQ	LGBTQ-friendly
Religious upbringing	Willing to support child’s religious beliefs if not the same (e.g., Christian home and Muslim child)
Child’s ability to travel independently	Nearest bus stop and Metro station
Pet allergies or fears	Pets in the home

The Actual Placement

When resource parents have open beds, they may receive a call from the agency at any time during the day or night. Please try to respond to calls as soon as possible and be sure to get the name of the staff member calling about the potential placement.

Sometimes, the placement can take several hours. If you are expecting a placement within a certain time frame but the child does not arrive, you should feel free to call back to check whether another placement has been chosen or if the placement is just taking longer than expected.

The Placement Passport Packet

Once the child arrives, you should receive a Placement Passport Packet, which is hand-delivered by the staff member placing the child into your home. If you do not receive this packet, you should request it. The packet is full of helpful information, including but not limited to the following items:

- ▶ A welcome letter to resource parents
- ▶ Important contact numbers
- ▶ “Traveling with a Child in Your Care,” a CFSA policy that outlines when resource parents do or do not need to inform CFSA about their travel plans that include the child
- ▶ Information on how to select back-up providers and babysitters
- ▶ Child’s Summary (education, health, etc.)
- ▶ Court information and documents
- ▶ Responsibilities of Social Workers (CPS and Ongoing)
- ▶ Responsibilities of Resource Parents

The resource parent will also receive a one-page Placement Transition Information Exchange (PTIE) document with specific details very much like the information outlined above for the individual child coming to the home. This includes the child’s age, gender, likes and dislikes, etc.

Confidentiality

- ▶ **Health Records:** CFSA must comply with confidentiality requirements of the federal Health Insurance Portability and Accountability Act (HIPAA) and District law. Resource parents should look in the Placement Passport Packet for CFSA’s statement regarding unlawful disclosures and any other information related to chronic diseases (e.g., confidential HIV/AIDS information).
- ▶ **Birth Parents:** While resource parents may receive very detailed information about a child, they may receive very little about the birth parent. CFSA understands information is important to help resource parents understand the child’s circumstance. Still, the birth parent has a legal right to keep information confidential just as the resource parent might wish to keep certain information confidential. During the course of the case, resource parents may find that they have successfully established a friendly relationship with the birth parent that results in a natural sharing of information. Any

information the resource parent learns about the parent, child, and family **must be held confidential**, pursuant to Title 29 Chapter 60 of the District of Columbia Municipal Regulations (DCMR) (§ 6023).

The Family Team Meeting

In most cases, within 72 hours of a child being separated from caregivers, CFSA schedules a Family Team Meeting (FTM). This is a critical, time-sensitive opportunity for initiating conversations among the child's family members and the social workers. It is also an opportunity to begin planning for the child's permanency goals, service needs, visitation schedule, and placement needs. The FTM is such an important step that CFSA encourages resource parents to read the online [FTM policy](#).

FTM participants include the age-appropriate child (i.e., a child with the cognitive skills to make informed decisions), the child's family members, supporters (such as family friends or clergy) and the guardian *ad litem* if the court has appointed one. Upon occasion, resource parents may be invited to the FTM. However, a birth parent's confidentiality, comfort level, and scheduling are the first priority.

Participants in the FTM develop a permanency strategy and discuss any other issues surrounding the child's safety and return home. A trained FTM facilitator helps guide the direction of the meeting, which may last as long as two hours.

Ice Breakers

Ice breaker meetings are ideally held soon after the placement of the child. These meetings are opportunities for you and a birth parent to meet face-to-face and to connect over your mutual concern for the child's well being. A trained facilitator participates to prompt your parent-to-parent conversation about the child's needs and the many ways that you and the birth parent can partner together on behalf of the child. As ice breaker participants, both resource and birth parents have an opportunity to share information about the child, ask questions, and come up with a communication agreement based on both of your preferences.

Placement Disruptions

If you or others are concerned that the child's placement in your home is at risk of disrupting, the social worker may arrange for a disruption conference to help keep the placement stable. There might be a situation, for example, where resource parents find themselves unable to care for a child. Similarly, resource parents may decide that they are not able to meet the child's behavioral or medical needs. In these cases, the disruption conference can be used as a planning tool to determine whether the agency can provide you with greater support or additional resources to continue the placement. In most cases, avoiding placement disruption is better for the child. The goal is to minimize the potential for additional trauma while exploring how best to increase the child's well being.

Sometimes placements have to change under circumstances that are not considered disruptions but are instead "planned placement changes." For example, if the child is moved to a pre-adoptive home to achieve permanency, this change is not considered a disruption. A child

who is moved closer to family or placed with a family member, including siblings, is also not considered a disruption. Nevertheless, these circumstances require thoughtful planning in advance to protect the child and to reduce further trauma.

***NOTE:** If a child has been in foster care, returned home, and then entered foster care again, this is referred to as re-entry. CFSA tries to ensure preferential treatment for the child to return to the same resource parent, if appropriate and feasible. This cannot always happen but when it does happen, it helps to maintain consistency for a child who has already bonded with the resource parent.*

If you decide a placement is not working for you, your family, or the child, you have the right to request a placement change. District regulations require that the resource parent give a minimum of 10 days' notice, except when the placement presents a significant safety issue. However, CFSA asks resource parents to give at least 30 days' notice to help us identify a new placement and to prepare for a safe transition. The agency will try to accommodate a placement change request AFTER efforts to maintain the placement are exhausted. Additionally, CFSA is mandated by law to give the resource parent a 10-day notice before moving a child from the resource parent's home, unless the move is ordered by the Family Court or determined by safety needs.

Placement Stabilization

Every child goes through stages of growing that are at best a challenge and at times, just plain worrisome. To keep the placement of a child in your home as stable as possible, agency social workers are trained to help intervene during those challenging times, as needed, and to work both with you and with the child to address concerns. As a result, the following strategies may be implemented to maintain placement stability:

- ▶ Resource Parent Stabilization Support line – This support telephone line provides assistance to talk through a tough situation (e.g., a teen who is verbally aggressive or consistently sneaks out to visit a boy or girlfriend) after business hours, on weekends, and holidays, call (202) 800-3040.
- ▶ Child and Adolescent Mobile Psychiatric Services (ChAMPS) – When a child's behavior is threatening to self or others, call (202) 481-1440, 24 hours a day, 7 days a week.
- ▶ Ongoing assessments (such as the CAFAS/PECFAS) – A social worker will visit the resource parent home and will offer appropriate services to help both the resource parent (see respite services below) and the child (e.g., trauma-informed therapy).
- ▶ Team meetings – These meetings include involvement by the child's birth parents if appropriate, the GAL and any other relevant team members such as therapists or other family members.
- ▶ Coaching and supports – Resource parents can take advantage of special classes or trainings, networking and support groups.
- ▶ Community-based services – Childcare or emergency assistance for rent or utilities are available for resource parents.
- ▶ Referrals for other services, such as behavioral services.

If at any time, you need additional services, you can reach out to the child’s social worker, support worker, or equivalent. You should also feel free to make requests to the social worker’s supervisor (or further up the chain of command) if you are not getting the response you need.

***NOTE:** CFSA has an ombudsman who is also a resource if you are not comfortable going up the chain. You can contact the ombudsman at (202) 727-2111.*

Frequently Asked Questions – Placement & Matching



How does CFSA decide where to place a child after the child is separated from the parents? CFSA always considers relatives first (or others with a significant relationship to the family). The agency also considers whether or not the siblings can be placed in the same home together and whether the resource parent is living in the child’s same community. CFSA will also try to match the needs of the child with the strengths and capacity of non-relative resource parents.

How much information will resource parents receive about a child before they have to make a decision? Placement workers will try to provide you with as much information as they have available at the time of placement. Sometimes, a placement must happen in the middle of a crisis and a lot of information may not be available. Just remember, resource parents have the right to ask questions, and the right to request that the child not be placed in their home.

Will the children placed in the resource parents’ home come directly from their own homes? Children who might need resource parents’ care come from a variety of living situations: some will be coming directly from their own homes while others might be coming from other resource home placements, a group home, or residential facility.

What is the Icebreaker and do resource parents have to attend? The Icebreaker is a facilitated meeting between the resource parent and the child’s birth parents or primary caregiver at the time the child came into care. It is usually held in the first few weeks after placement in the resource parent’s home. It helps both parties share information such as family routines and traditions, and to begin to plan together how to help the child through the transition from home to foster care. You should definitely plan to attend! The Icebreaker meeting is very useful for helping put you and the birth parents at ease – children are much more likely to have a more positive experience and reach their permanency goals when the resource parents and birth parents work in tandem.

Do visitations with a child’s birth parent take place in the resource parents’ home? Generally speaking, visitation happens at a neutral place, such as CFSA or the private agency, a park or a restaurant. Ideally, through shared parenting, the resource parent will establish a bond with the birth parent and feel comfortable having visitation in the resource parent’s home.

What are the constellation and the cluster models? Constellation and cluster models (Mockingbird and Family Connections) are both CFSA models based on the concept of extended family. A hub family (or cluster lead in the Family Connections program) welcomes resource parents into a community-based network that provides support, continuous learning, coaching, mentoring, respite and socializing. One of the Mockingbird constellations is solely dedicated to kinship families. CFSA resource families are assigned either to a constellation or cluster. If you are interested in becoming a hub parent or cluster lead, or if you have questions about your hub or cluster, please contact your support worker.

Frequently Asked Questions – Placement & Matching



If resource parents are moving, but want to keep the child in their care, can they? CFSA always wants to keep children in the most stable placement, especially when bonds have been formed. If a resource parent is moving to another home within the same jurisdiction, a home study update will need to be completed. If the resource parent is moving to another jurisdiction (e.g., from Maryland to DC or DC to Maryland), the resource parent will have to be relicensed by the new jurisdiction. CFSA will work with the resource parent to make sure that such a transition goes smoothly. In addition, the agency wants to make sure that the child's parents are involved in the decision whenever possible. Feel free to contact your assigned licensing worker for help.

Further Information

- ▶ CFSA Placement and Matching Policy
<https://cfsa.dc.gov/publication/program-placement-matching>
- ▶ CFSA Family Team Meeting Policy
<https://cfsa.dc.gov/publication/program-family-team-meetings>
- ▶ Fair Hearings
<https://cfsa.dc.gov/page/fair-hearings>
- ▶ Healthy Horizons Assessment Center and Nurse Care Manager Program Policy
<https://cfsa.dc.gov/publication/program-healthy-horizons-assessment-center-and-nurse-care-manager-program>
- ▶ Child Welfare Information Gateway (Frequently Asked Questions – Out-of-Home Care
<https://www.childwelfare.gov/aboutus/faq/outofhome/>
- ▶ Youth in Foster Care Self-Identifying as Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ)
<http://www.lambdalegal.org/issues/youth-in-out-of-home-care/>
- ▶ Six Things to Expect as a Foster Parent
<http://confessionsofanadoptiveparent.com/6-things-you-can-expect-after-you-become-foster-parents/>
- ▶ Foster Care Experiences for Children and Resource Parents
<http://www.futureofchildren.org/publications/journals/article/index.xml?journalid=40&articleid=135§ionid=888>
- ▶ Foster Care Facts (Foster Club)
<https://www.fosterclub.com/article/foster-care-facts>

Chapter 4: Most Valuable Team Members

Most people are familiar with the popular adage, “It takes a village to raise a child.” For children in foster care, it might be more accurate to say, “It takes a child’s entire team to achieve a child’s permanency goal.” Indeed, after ensuring the child’s safety, the most important function of a child’s team is to help plan the child’s path towards permanency. Along that path, many decisions are made regarding the child’s life, emotional and physical health, education, visitation with family, and ability to maintain as normal a life as possible while in foster care. CFSA wants to emphasize again that a respectful and collaborative relationship among resource parents, birth parents, and the rest of the team has an immediate impact on the child. It helps remove the pressure for a child to “choose” between resource parents, birth parents, or other team members.

NOTE: Children feel loyal to their birth parents, despite experiences of neglect or abuse. Everyone on the child’s team should ensure that all interactions (especially in front of the child) are as sincere and polite as possible. This will help reduce the child’s need to make a choice for loyalties.

The Team

Although valuable team members may change over the course of the child’s case, depending on needs and circumstances, the child’s team will likely include the following individuals:

- ▶ **Members of the child’s birth family** – Specifically the birth mother and father, siblings, grandparents, aunts and uncles. Sometimes, these valuable team members are not always available or appropriate for involvement in the child’s case planning. Whenever involvement is appropriate, social workers are always expected to ensure that the birth family (or caregiver family) is engaged as much as possible.
- ▶ **Extended family or fictive kin** – Often children have a very close relationship with people who are not blood relatives but may have been close family friends throughout the child’s life, e.g., a godparent. The child might also refer to a close family friend as auntie even though that person is not related. Similarly, there might be a distant relative, perhaps a cousin, who may not be close with the child but is still eager to help plan for the child’s well being once they are informed that the child is in foster care.
- ▶ **Resource parents** – Again and again, CFSA emphasizes the importance of your role on the team. Your first-hand experience with the child on a daily basis provides essential information to the rest of the team.
- ▶ **Social worker** – The social worker is expected to lead the team, schedule team meetings, make visits to the resource parent’s home as well as visits with the child, and to be responsive to the resource parent’s questions and service needs.
- ▶ **Other child welfare staff** – In addition to the child’s social worker, you may be introduced to individuals who support activities normally conducted by the assigned social worker. These activities may include helping with a visitation, assisting with transportation for the child, or other needs like scheduling appointments or accessing services. Whatever the title, the job is the same: to help support you as the resource parent as well as supporting the social worker and child.

- ▶ **School staff** – A child in school, or even in daycare, may be very attached to a teacher, a coach, a school social worker, counselor, or other staff member. Often these individuals can provide a tremendous amount of insight into the child’s feelings or behavior, especially since these people also spend a great deal of time with the child during the school day.
- ▶ **Service providers** – It is very common for a child to need extra services while in foster care. For example, a child might need a tutor for school, some kind of mental health provider, an educational advocate, a mentor, therapist, or even a career counselor for a young adult. Any one of these individuals may be invited to a team meeting at any given time along the continuum of the child’s case. The family may also be connected to one of the neighborhood-based Healthy Families/Thriving Communities Collaboratives to receive community-based services.
- ▶ **Guardian *ad litem* (GAL)** – The GAL is an attorney appointed by the Family Court to represent the best interests of the child. They may perform a variety of roles both during and outside of court proceedings, including that of advocate and advisor.
- ▶ **Court-Appointed Special Advocate (CASA)** – In certain cases when a Family Court judge feels it would be helpful to the child, a CASA volunteer will be appointed by the judge to watch over, support, and advocate for the child.
- ▶ **Other attorneys** – The District’s Office of the Attorney General assigns Assistant Attorneys general (AAGs) to perform numerous duties on behalf of CFSA in cases related to child maltreatment. These AAGs are co-located at CFSA headquarters in order to work closely with the social workers and to represent the agency regarding decisions made by CFSA for a child in foster care. In addition to the AAGs, a child’s team might include attorneys representing the child’s parents. Although resource parents are not routinely provided with an attorney, there are circumstances where the resource parent may choose to be legally represented (e.g., you are interested in adopting the child in your care).



It takes a child’s entire team to achieve a child’s well being and permanency.

Team Engagement

One of the social worker’s priorities is to encourage team member involvement in the child’s case planning process. Truly, it does take a team to achieve permanency. If you feel that you are not being well guided or engaged, you should feel free to communicate this information to the social worker’s supervisor (i.e., the chain of command) or ombudsman. Successful engagement requires that social workers, resource parents, and the rest of the team promote the following qualities:

- ▶ **Honesty** – Sometimes, honesty is very difficult. But in order for team members to really be part of a team, they must have confidence that all team members will be as honest as possible with their feelings, concerns, observations, and even opinions while still being thoughtful and diplomatic with all other team members.
- ▶ **Empathy** – Each team member should strive to be empathic with the roles, challenges, and responsibilities of the other team members.

- ▶ **Mutual respect** – When honesty and empathy are integral parts of a case-planning collaboration, mutual respect is bound to follow. The value and benefits of working as a team with mutual respect cannot be overstated.
- ▶ **Unconditional positive regard** – It is sometimes the biggest challenge to offer anything unconditionally, whether it is nurturing for a child or positive regard for team members whom we may not like, for one reason or another. The important thing to remember is that the team must offer positive regard to each team member in order to achieve the main goals: safety, permanency and well being of the child.
- ▶ **Respect for diversity** – All team members must work together regardless of beliefs about other people’s cultures, religions, lifestyles, and gender identifications.
- ▶ **Collaboration during the service planning process** – If team members work to manifest the qualities listed above, collaboration for the sake of a child becomes easy. This is the goal precisely because it is in the child’s best interest.
- ▶ **Understanding and working through a family’s challenges** – Parents who have a child in foster care are experiencing their own grieving process, personal struggles, and even hopelessness. Many birth parents may have been in foster care themselves, and the experience of being separated from their children may re-open feelings and memories from their own early trauma. These multiple and generational layers of trauma quickly add to attachment issues for child and parent. Be assured that it is not a resource parent’s job to fix the family’s challenges. That is the job of the child welfare staff and service providers. The resource parent’s job is equally important: the power of understanding challenges and approaching the family with compassion and support, no matter how difficult the circumstances.



Shared Parenting, Teaming, and Reaching Permanency

CFSA wants to ensure that children return to their parents whenever possible. When the permanency goal is reunification, one of the most important ways resource parents can support this goal is to engage in shared parenting with the child’s birth parents or original caregivers.

Shared parenting is an on-going, active, supportive relationship between birth and resource families that decreases loss and trauma for a child, increases placement stability and helps expedite permanency. Shared parenting is not a single activity or tool – it’s a mindset. In fact, shared parenting activities often look very different depending on each family’s unique circumstances. But under all circumstances, shared parenting is a team approach that emphasizes listening, learning, sharing information, collaborating and making joint decisions. CFSA’s Child Welfare Training Academy (CWTA) provides specific training on shared parenting to help guide you. For more details on shared parenting, see Chapter 9: Reasonable and Prudent Parenting.

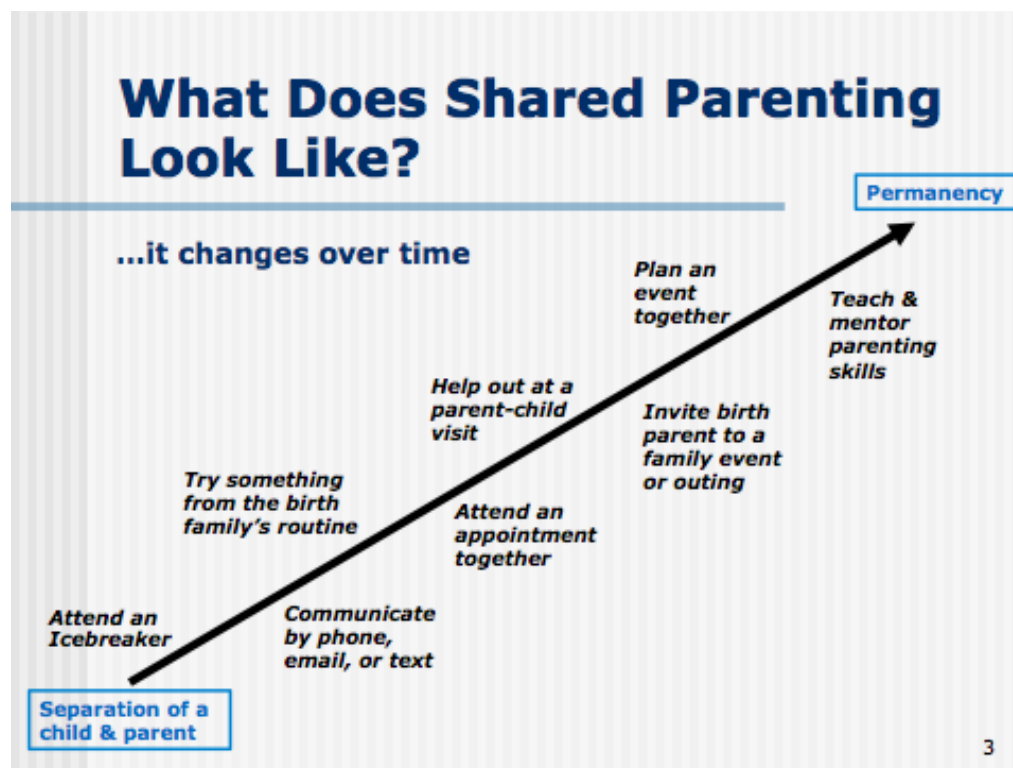
Regardless of the permanency goal, it is essential for the resource parent to share any relevant information with the child’s team, including the parents and relatives, the ongoing social worker, service providers, and any other team members. This information-sharing helps in the decision-making process to provide proper services and care for the child. It is especially important to support the child’s healing from any history of trauma, including the trauma of being separated from the family home of origin.

No matter what a child has experienced prior to removal from home, that child still loves his or her birth parents. Even if the child should complain about the birth family, resource parents should *never* speak negatively about birth parents to the child. It is always best for the child when resource and birth parents have positive interactions. Direct exposure to adult conflict can cause feelings of guilt and self-blame or even an obligation to choose sides. Positive interactions demonstrate what’s appropriate for a child looking to adults for social cues.

Under all circumstances, children in out-of-home care take great comfort in knowing that their birth and resource parents are working together, and there’s no need to feel divided loyalty. When both sets of parents communicate and collaborate, children experience less trauma and loss, their adjustment to a temporary home is smoother (and with fewer disruptions!) and family reunification is likely to come sooner.

What Does Shared Parenting Look Like in Practice?

As noted above, shared parenting activities often look very different depending on each family’s unique circumstances – it is a continuum that starts slow and, hopefully, builds momentum, like this:



Shared parenting usually starts with the Icebreaker – a facilitated, in-person conversation so everyone can get to know each other, share important information about the child, and make a plan for communicating with each other. At the end of the Icebreaker, everyone gets a copy of that plan, and the child’s social worker will check-in to see how it’s going.

Here are some examples of what shared parenting might look like after the Icebreaker.

Small Shared Parenting Steps:

- ▶ You and the birth parent have regular communication by text, email or phone.
- ▶ You give the birth parent updates about what the child has been doing, or ask for their thoughts about how to help their child feel more comfortable.
- ▶ You use activities and routines (like bedtime prayers, stories or songs) that the birth parent recommends.

Medium Shared Parenting Steps:

- ▶ You and the birth parent go to the child’s medical appointment or parent-teacher conference together.
- ▶ You help out during parent-child visits.
- ▶ You and the birth parent go to a CFSA family activity together.
- ▶ You call the birth parent to help the child with homework, or to talk with the child after they win an award or have a particularly good day.
- ▶ You ask for the birth parent’s help in having their child follow-through on regular household tasks like cleaning their room or taking out the garbage.

Larger Shared Parenting Steps:

- ▶ The birth parent attends your family events or activities like reunions, outings, or church.
- ▶ You and the birth parent plan an event together (like the child’s birthday party).
- ▶ You help the birth parent with some parenting skills that might be hard for them.

***NOTE:** If you experience difficulties with shared parenting, your social worker and resource parent support worker can help! In addition, the Foster and Adoptive Parent Advocacy Center (FAPAC) provide both individual support and support groups to help with any shared parenting challenges.*

The moment a child steps over the threshold of your front door, you are both embarking on a journey toward reaching a child’s permanency goal. That goal may change while the child is living in your home. While reunification is the first option, it may not always be possible. In fact, you may realize at some point that you are the logical choice to be a child’s permanency resource. Your own willingness, ability, and love for the child could make your home the best “forever home.” For more details on permanency in general, please read Chapter 7: Permanency Planning.

Team Meetings

While the formal family team meetings (FTMs) are guided by a trained facilitator, not all team meetings need to be as formal. Throughout the life of a case, team meetings are held to discuss a variety of topics, from information sharing and problem-solving to planning. Although it may seem that a phone call from one team member to another is sufficient to share information, it is sometimes worth a brief meeting to ensure that all information is heard by all team members at the same time. In general, a meeting is called only when more than one item needs to be discussed. Remember: as a valuable team member, you are encouraged to call or schedule a team meeting as the need arises.

Family Meeting Question:

“If we could be the best family that we could be, what kind of things would we be doing and saying?”

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So, what does a team meeting look like in reality? Below are some examples to consider, especially if you are the team member who decides to call the meeting.

INFORMATION SHARING

- ▶ A child’s individual education plan (IEP) has been updated.
- ▶ There are several updates on the child’s progress (school, activities, therapy, etc.).
- ▶ Medication changes are recommended for the child.
- ▶ Changes in a child’s circumstance or a birth family’s situation that impact case progress.

PROBLEM-SOLVING

- ▶ You and the birth parent have a different understanding of shared parenting.
- ▶ Transportation is a challenge for getting a child to various appointments.
- ▶ The child is having trouble transitioning to your home.
- ▶ School supports are insufficient to address the child’s current needs.

CASE PLANNING

- ▶ Reunification is near, but several items are still outstanding.
- ▶ An older youth is preparing for independence and the team needs to plan for housing options.
- ▶ Services need to be identified for your family or you are aware of needs for the birth family.
- ▶ Post-permanency supports need to be identified and put in place.

Again, your voice is valuable and needs to be heard. If you contact the social worker with a request that does not get met, you should feel free to contact the social worker’s supervisor or other individuals further up the chain of command. You may also contact the ombudsman at 202-727-2111 if the situation is not resolved or if you are not comfortable bringing your concerns directly to a supervisor or manager.

Frequently Asked Questions – Team Players



What’s the difference between an FTM (Family Team Meeting) and a team meeting? The FTM is considered a formal meeting that is facilitated by a trained FTM staff member. Not all meetings are formal but need to be scheduled anyway. Any team member can request a team meeting to discuss issues, concerns, solutions and recommendations.

Are all team members required to attend team meetings? In general, it is preferred for all team members to attend team meetings. Still, sometimes an informal team meeting is scheduled for a specific purpose and not all team members are required. For example, a meeting about school transportation may not require a child’s mental health provider to attend, or a meeting about mental health may not require a tutor.

Where is the team meeting held? Team meetings can be held almost anywhere but are often scheduled in a place that is most convenient to everyone. It might be at a private agency, CFSA headquarters, or even in the resource parent’s home (depending on the type of meeting).

Can any team member request a meeting? Yes! It is very important that every team member understands their role, responsibility and their rights. This includes calling a meeting when important concerns arise.

Do team members just sit around and talk during these meetings? Certainly conversation is important during a meeting, but we also respect people’s schedules. No one wants to waste time on a meeting that is not needed. Whoever calls for the meeting should have a set agenda, outline desired outcomes and when needed, assign next steps. Follow-up meetings may be scheduled so that team members can share updates on the steps they have taken to help the case move forward and for permanency to be achieved.

Further Information

- ▶ CFSa Best Practices
<http://cfsa.dc.gov/page/best-practices-cfsa>
- ▶ Comparison of Family Teaming Approaches
<http://www.ncjfcj.org/sites/default/files/teaming-comparing-approaches-2009.pdf>
- ▶ Four Approaches to Family Teaming
<http://www.aecf.org/m/resourcedoc/FourApproachestoFamilyTeamMeetings.pdf>
- ▶ Family Team Meeting Models
<http://www.cssp.org/publications/child-welfare/child-welfare-misc/bringing-families-to-the-table-a-comparative-guide-to-family-meetings-in-child-welfare.pdf>
- ▶ Shared Parenting Resources
<https://cfsa.dc.gov/page/cfsa-family-link>

Chapter 5: The First 72 Hours

Dear Resource Parents,

This page is just for you. Hopefully it will make the first day easier. Within the first 24 hours, you will get a call from the social worker who will tell you about us. But, we children also want to tell you about us! For starters, little things matter, no matter how old we are. If we are just toddlers, you may need to comfort us. If we are teenagers, no matter what you do, we may not want you to comfort us. Whatever happens, please set a positive tone for things to come. We have no choice but to rely on you right now, whether we want to or not. But to help you understand our feelings, we are giving you a list of 10 items to make our first day together a little easier for us both. Remember: we are counting on you!

From a Foster Child's Perspective¹¹

1. Please smile. It makes us feel a little bit better. If we are small, please kneel down and meet us at eye level. Be sensitive to touch. We may not feel comfortable being touched.
2. You can offer to carry our bags inside but do not be disappointed if we want to carry our own things. We need to feel in control right now so we may not unpack for A LONG time. This is completely normal. If there are other children in your family, let them show us our new temporary home, room-by-room. It is especially important for us to see where we are going to sleep. If possible, you could have some new toys in our room. Stuffed animals are always a good choice for younger children. If I am an older child, maybe you could have a special item waiting for me that helps me to know that you already understand that this is a sad time. Please let us explore. For example, younger children may want to look in the closet, under the bed, in the drawers – anywhere that might help us feel more safe and secure.
3. Have a snack ready (no matter what time of day or night we arrive). We may be hungry and afraid to ask for food, so please offer us something to eat (if practical).
4. Once we've seen your home and you've invited us to have a snack, invite us to sit down with you and share your house rules with us. We need the structure, and we crave boundaries so it is okay to be firm and clear. Please do not be harsh. Please do not hand us a list of "do's and don'ts." We don't want to feel like we have entered a family jail cell. You could, for example, say: "I want you to feel free to eat anytime you want, but one of my rules is that you must sit at the table when eating." After you've shared the basic house rules, **ask us** if we have any questions. We may not know what to ask at first, so please ask again the next day. When you speak to us with respect, we feel more likely to return that respect, even though we don't really know you yet. We will still feel consoled and happier to follow the rules.
5. As best you can, treat us **just like everyone else**. **Please don't ever introduce us as "my foster child."** If I am old enough, ask me how I would like to be introduced. Definitely make sure our rules are the same as the rules for your own biological children, if you have them. Use positive discipline. (See Chapter 12: Supportive Resources for links and suggestions.)

¹¹ The above 10 steps are adapted from <https://looneytunes09.wordpress.com/2010/01/31/to-foster-parents-top-10-things-to-make-a-foster-childs-first-day-easier/>

From a Foster Child's Perspective¹¹

- | | |
|------------|---|
| 6. | Remember that we still love our parents, no matter what terrible things they may have done to us. We are still going to be very protective of them. If we say things like, "You don't cut the sandwich the way my mother does," try not to be hurt, make excuses or remind us that mother did something harmful. Simply respond with a non-judgmental affirmation. For example, you could say, "I'm so glad you told me how you like your sandwiches." Sometimes, we may complain about our own families, but please, never speak negatively about them to us. We still see them as an extension of ourselves. Please acknowledge us, but never tell us we are being too sensitive or our feelings are not appropriate for the situation. Always validate our feelings. Remember, we need to heal our wounds at our own pace and we need your help to do so. |
| 7. | If we are angry a lot, you could buy a bunch of pillows and let us know that we can use these pillows to hit the walls, the floor, the bed, etc. Allow us to have a safe tantrum. Our anger is natural and justified. Teach us how to direct our anger productively. If we like music, ask us to compose a song expressing our anger. If we like to draw or if we are creative, ask us to write a poem or create a one-act play to express ourselves. Be patient with us and try to keep your cool. We probably haven't learned creative ways to express ourselves, so now is a good time for you to be our first role model. |
| 8. | If we are a little shy at first, even standoffish, you can help us come out of our shell by remembering the following tips and suggesting some of the following activities that we can look forward to: <ul style="list-style-type: none"> ▶ Time, patience, understanding, compassion and empathy are excellent strategies to build a child's emotional immune system. ▶ Have fun and play games with us. Try to find out things that we might not have ever done – play a board game, help us learn about nutrition and experiment with different kinds of salads or other healthy foods, ride a bike with us or play with a Frisbee, etc. ▶ Read to us even if we can already read to ourselves. If we are older, suggest a family book club or ask if it's okay that you read the same book that we have to read for school, and then talk with us about themes, characters, etc. ▶ Invite us to share outdoor activities. Nature is a proven healer, so let's go to a nearby park and walk or hike the trails together. In DC, we can visit the National Arboretum or Rock Creek Park. In Maryland, we can visit the butterfly exhibit at Brookside Gardens. ▶ Remember: smile AND laugh with us. |
| 9. | We need a couple of days to figure things out. For some of us, it will take a long time to warm up. Sometimes we may act out to test you, especially after we start to feel more comfortable with you. Just keep talking with us and show us that you are genuinely interested in our thoughts. We are watching you and trying to figure out whether or not we can trust you. Always keep your promises, be honest with us, and treat us exactly as you hope we will treat you. |
| 10. | Ask us what you can do to make us more comfortable or to help us feel better. If we don't answer, suggest things to us. This alone shows us that you care about how we feel. |

The Trauma-Informed Resource Parent

When you first open your door to a child entering foster care, you are likely going to meet a child who is afraid, confused, and even in shock after being separated from parents and all things familiar. Even if that child appears well-adjusted after the first meeting, you can presume that the trauma of the separation exists. More importantly, you should presume that there is more trauma underneath the surface, i.e., the trauma that initially brought the child to CFSA’s attention. Meanwhile, you will also be observing a child’s personality strengths and innate ability to be resilient, despite scary experiences. Within the first few moments of your introduction to one another, keep in mind that this child’s strength and resiliency can be used as effective tools to help offset the child’s trauma.

When we think of trauma, we may also want to consider the Greek translation of the word “trauma,” which is actually wound. The most difficult wounds to heal are often not physical but rather, the powerful, unseen wounds of the heart, the mind, and the soul. These are the wounds that you will be helping a child to heal as you grow into your role as a trauma-informed resource parent.

When you observe a child who lacks trust, resists efforts to be comforted, makes fear-driven decisions, feels depressed and sullen, or acts rebelliously, you are really witnessing the symptoms of the child’s unseen wounds. Even a child who exhibits “excellent” behavior may be simply using survival tactics to mask the pain of those complex wounds.

Whether trauma is physically apparent or not, all trauma is sensorial. This is to say, the human being will always experience trauma through one or more of our senses: hearing, sight, touch, smell, taste, and our so-called sixth sense (which is sometimes referred to as emotional intelligence or intuition). The child’s ability to intuit the intangible should not be underestimated. It is important to respect any expression of intuition. Encouraging a child (as well as yourself) to trust their intuition can be a helpful tool for helping a child to heal an intangible wound.



Consider how each of the six senses might reveal the source of a wound. For example, the child may react strongly to a certain smell or color. The child might have a visceral reaction to entering a building or a store. There is a very good chance that the child may not remember an underlying experience—yet behavior reveals the fearful wound.

Compassion is another excellent tool for healing trauma. For example, there might come a time when you think to yourself, “This child is out of control” or “This child is always misbehaving and never listening to me.” If you compassionately consider the unseen wound festering behind the behavior, you can help yourself and others remove any judgments. We must all train ourselves to examine and change our reactions, focusing through the lens of the child’s wound or trauma.

Each of us must explore our own strengths and innate capacity for resiliency in order for us to understand and support the child's resiliency. From scary events or just bad days, we can use our own life lessons to nurture the child's confidence, security, and willingness to be loved unconditionally.

Meeting the Assigned Social Worker

In addition to the Family Team Meeting mentioned in Chapter 3, the assigned private agency or CFSA social worker will schedule a meeting in your home at a time that is mutually convenient but still within the first three days (72 hours) of the child's placement. This meeting is an opportunity for a more in-depth introduction. This is a time when you can ask questions about the Placement Passport Packet or seek additional information about the child. Just remember that when the child first comes to your home, the social worker might only have limited information. Even still, social workers will continue to share information with you as they gather it. Most importantly, the social worker will want to make sure that this meeting addresses any of the child's immediate needs as well as your needs.

This first meeting in a resource parent's home is an excellent time for discussing scheduling issues. Whether the child is in daycare or already enrolled in school, you will be informed of the name and location of the building and any other necessary details. In addition, the social worker will let you and the age-appropriate child know the weekly schedule for visits from the social worker for the first four weeks of the child's placement.

DC law requires that the social worker visit the foster child weekly during the first four weeks of placement and at least twice a month after the first four weeks. In the first month, the visits have to be in your home. After a month, only one of the visits has to be in the home. Sometimes these visits will be made either by the private agency support worker or CFSA support worker instead of the assigned private agency social worker or CFSA social worker. Support workers are also considered members of the child's team, so feel free to reach out to them any time that the social worker is not available.

Placement Passport Packet

We briefly mentioned the Placement Passport Packet earlier, along with the one-page Placement Transition Information Exchange (PTIE) in Chapter 3. This section provides a few more details. Each packet will be as different as each child! Many packets come without any of the information below because it is unknown or unavailable at the time of placement. It is part of the resource parent's job to organize the information as it becomes available throughout the child's stay.

The information below will be updated throughout the placement (as applicable):

- ▶ Photo of the child (with a written physical description on the back)
- ▶ Placement form
- ▶ Brief history of placement history (if applicable)
- ▶ Clothing voucher (if available)

- ▶ Birth certificate (or photocopy)
- ▶ Social Security card (or photocopy)
- ▶ Medicaid card
- ▶ Medical provider contact information
- ▶ Immunization record
- ▶ Medical screening
- ▶ Any behavioral or medical issues (and associated medications)
- ▶ Dietary requirements
- ▶ School or daycare information (including an IEP, if applicable, and any report cards)
- ▶ Educational contacts
- ▶ Transportation plan
- ▶ Visitation schedule with parents and siblings

Key Points – The First 72 Hours

- ✓ Time, patience, understanding, compassion and empathy are excellent strategies to build a child's emotional immune system.
- ✓ Resource parents will receive a Placement Passport Packet with lots of information about the child. Contact the social worker or the assigned support worker to answer any questions.
- ✓ Within the first three days, the social worker will visit the resource parent's home to discuss everything that you and the child need to discuss.

Frequently Asked Questions – The First 72 Hours



How will I know where the Family Team Meeting is going to be held? A private agency or CFSA staff member will contact the resource parent with information on the FTM location and time if it is appropriate for the resource parent to attend.

When will the Icebreaker take place? CFSA tries to ensure that the Icebreaker takes place shortly after placement (or re-placement) so both the resource parent and the birth parents can share basic information about the child, discuss his or her needs and begin to think about how to undertake shared parenting. The Icebreaker is an opportunity for both parties to learn and to share. CFSA recognizes that it can be a challenge for resource parents to nurture children who are not their own, especially while the agency expects resource parents to care for them as if they were their own. The Icebreaker can help set boundaries and establish guidelines for both sets of parents during the time that the child is within the custody of CFSA.

Does the child visit with his or her birth parents during these first few days? Ideally, the child will have a visit with their biological parents or other family members soon after being placed with resource parents, unless there is a clinical reason why it is not in the child's best interest. Visitation should certainly take place within the first week of placement. The social worker will give the resource parent a visitation schedule. Resource parents should keep the child's social worker informed about their schedule so that transportation for the child can be arranged according to the

Frequently Asked Questions – The First 72 Hours



resource parents' schedule in the event that the resource parents are asked to help with it. Resource parents can help support these visits by providing transportation if possible. Resource parents should always feel free to discuss such schedules if they create any challenges for their own work schedule, etc. Resource parents can also help by checking in with the child before and after visits. Is the child happier? Does the child seem more upset? Console and comfort the child but communicate observations and experience to the social worker.

When does the child get their medical screening? Every child will be screened prior to placement. The identified resource parent might be invited to attend as the first opportunity to meet the child. Of course, the resource parent will not necessarily be in the exam room with the child, depending on what screenings are occurring. After the initial screening, the resource parent should coordinate with the social worker to schedule a full physical and dental check-up for the child at HHAC within the first 30 days.

Further Information

- ▶ Tips and Perspectives for Caring For Foster Kids
<https://looneytunes09.wordpress.com/tips-for-those-involved-with-the-foster-care-system/>
- ▶ CFSA Placement and Matching Policy
<https://cfsa.dc.gov/publication/program-placement-matching>
- ▶ CFSA Family Team Meeting Policy
<https://cfsa.dc.gov/publication/program-family-team-meetings>
- ▶ Ice Breakers – Family Link
<https://cfsa.dc.gov/page/family-link-icebreakers>
- ▶ CFSA Initial Evaluation of Children's Health Policy
<https://cfsa.dc.gov/publication/program-initial-evaluation-childrens-health>
- ▶ CFSA Visitation Policy
<https://cfsa.dc.gov/publication/program-visitation>

Chapter 6: The First 90 Days

The first few months of a new placement are busy, from figuring out Medicaid cards and transportation to visitation schedules and determining how to adjust to a new personality. Below are some of the most important activities required by law and policy.

Case Planning

Case planning is a cooperative effort in which the assigned social worker assesses the family's needs in partnership with the family and other team members. This effort becomes the foundation upon which a program of interventions is built. Case planning sufficiently addresses any necessary behavioral changes for family stabilization or permanency to be achieved. In DC, case planning for out-of-home care includes a concurrent approach. This means that one priority permanency goal is pursued alongside a secondary goal in the event that the first goal is not achieved.

Within the first 30 days of placement, resource parents may join the other members of the child's team to provide input into the child's case plan. Resource parents should make every effort to participate in all of the case planning meetings so that their personal, direct experience with the child can help inform the process. More details are explored in Chapter 7. A child leaves the resource parents' home to achieve the following permanency options:

- ▶ Returning home (reunification)
- ▶ Entering a new, safe, forever home (adoption or legal guardianship)
- ▶ Achieving independence as a young adult with a strong lifelong connection with at least one caring adult

It is important to remember that while a private agency social worker or CFSA social worker may provide recommendations for permanency goals based on thorough planning with the child's family team, only the Family Court has the legal authority to formally establish the permanency goal.

***NOTE:** CFSA and private agencies are required to include you as a resource parent in the development of any service agreements for children in their home. These agreements are developed during the case planning process. Not only are you allowed to provide input but you are also encouraged to do so. Your input will be based on firsthand experience with the child, as well as experience with the child's birth parents, school, friends, etc. If you have not been able to attend a case planning meeting, the agency is required to inform you about the child's permanency plan and to keep you updated about the progress towards achieving that plan.*

Comprehensive Medical Evaluation

In Chapter 3: Placement and Matching, the Healthy Horizons Assessment Center (HHAC) was mentioned as the site for the pre-placement screening. The comprehensive medical evaluation is also completed at HHAC by the nurse practitioner and builds on information from the family and primary care provider. The medical evaluation information is further complemented by the outcomes of the initial pre-placement screening.

Information gathering touches on each of the following items:

- ▶ Medical history (building on the information from the initial screening)
- ▶ Developmental history
- ▶ Physical examination by a qualified healthcare practitioner, including a complete physical examination in accordance with current recommended medical practice
 - The examination will consider the age, environmental background and development of the child
- ▶ Screening tests appropriate for the child's age, any identified risks and any identified conditions
 - Laboratory and sensory screening should be appropriate for the child's age, including appropriate vision, hearing and dental screening (per the American Academy of Pediatrics)
 - Screening should take place for lead poisoning, anemia, tuberculosis, and exposures to other risks for children in out-of-home care
 - Special screening tests are also conducted for children with specific medical indicators, such as diabetes, pregnancy, sexually transmitted infections and drug use
- ▶ Development of a problem list, including current and previous diagnoses
- ▶ Instructions and recommendations are provided for follow-up
- ▶ A nurse care manager may be assigned for certain acute and/or chronic conditions

While the social worker may initially schedule this comprehensive assessment based on the resource parents' availability, resource parents should be prepared to accompany the child with the social worker to the exam, especially if the birth parent is unable to attend. It is always more helpful when the resource parents are able to participate in any medical appointments. It reinforces the resource parents' sincerity and caring for the child, and it means that resource parents can ask questions, be directly informed on how to follow the child's exact healthcare instructions and share relevant information with other team members from their firsthand experience.

If the child is already enrolled in Medicaid, the assigned social worker will provide resource parents with the Medicaid card and number within five days of placement. Resource parents are not responsible for ensuring that the child has health insurance coverage, but if resource parents are aware that coverage is missing, they should inform the social worker immediately. Similarly, they should inform the social worker immediately if the Medicaid card is misplaced.

Court Hearings

All of CFSA’s child abuse and neglect cases are under the jurisdiction of the Family Court of the DC Superior Court. The Family Court also receives and processes cases related to juvenile delinquency, adoption, custody, guardianship, visitation, paternity, child support, and termination of parental rights as well as mental health. To the greatest extent practicable and lawful, cases involving members of the same family are heard by one judge in order to minimize court appearances, reduce the risk of conflicting court orders and to ensure that quality decisions are based on the full knowledge of the issues affecting the family.



Several types of hearings take place throughout the life of an abuse and neglect case (see list below). For the initial hearing, if a resource parent has already been identified, the social worker may inform the resource parent of the date and location. For permanency hearings, CFSA staff in the Office of Planning, Policy, and Program Support (OPPPS) will send you a letter with the date, time, and location of the hearing. Permanency hearings usually happen every three or four months for a child in foster care. Sometimes they happen more often and sometimes less, but they must happen at least once every six months. If a child has just been placed, you may have not yet received notification so ask the child’s worker or GAL when the next hearing is. Although it might seem inconvenient and time-consuming, attending court hearings is as important as team meetings and medical appointments.

As a resource parent, you have the “opportunity to be heard” during court proceedings that concern a child currently in your home.¹² This means that you can tell a judge about a child’s behaviors, daily routines, day-to-day health, educational needs, visitation schedule with a biological parent, services received and needed, as well as anything else you think the judge should know about the child. Providing this information to the judge will help the Family Court decide what is in the best interests of the child.

You do not have to get permission from the agency to attend any proceeding with respect to the child in your home. But please be aware that the “opportunity to be heard” does not mean “opportunity to hear all.” In other words, you may be asked to step out of the courtroom when confidential information is being shared (unless the birth parents agree to your staying). Even still, if you obtain “party status,” you will have greater access to information that may help you in your role as caregiver for the child.¹³

If you are not being invited to court hearings, you should ask the social worker for a schedule or follow the chain of command to ensure that you are being informed. Reminder: you do not need the social worker’s permission to attend a hearing. If, however, you hear about a court

¹² According to federal and DC law, all foster parents, pre-adoptive parents, and kinship caregivers must have notice of and have a right to be heard in “any proceeding” to be held with respect to a child. (42 USCS § 675 (5)(D), (G); 109 P.L. 239; 120 Stat. 508; 45 CFR § 1356.21 (o); § 16-2304 (b)(4)(A)(i)).

¹³ “Party status” can refer to resource parents who are being considered as permanency resources, e.g., legal guardianship. A foster parent with whom the child has been living for at least 12 months shall also be granted party status. See. DC Code 15-2340(b) and SCR Neglect and Abuse Rule 10.

hearing, but you have not been invited or received information on the date or location, you can ask the social worker for the time and location. Let the social worker know that you are planning to attend. If you have legal counsel, you can also request that your attorney informs you of any upcoming hearings. When you do attend a hearing, be sure to voice any concerns. Remember, you have the right to be heard during neglect and parental rights termination cases, but you do not have the right to participate in the entire hearing.

Although you are not required to attend hearings, unless specifically requested by the judge, we strongly encourage you to go for the opportunity to share information and to find out what is going on in the child's legal case. If you have any questions about these procedures, please reach out to the assigned social worker, support worker, or your attorney (if you have one).

***REMINDER:** Once a child is placed, you will start receiving notifications by mail of permanency hearings. The location, date, time and the name of the judge will be included in the letter.*

Shelter Care and Initial Hearings

The initial hearing is separate from a shelter care hearing, which is held to determine whether a child should remain in CFSA custody.¹⁴ Nevertheless, the two hearings are generally combined. Once a child is separated from parents or caregivers, CFSA must ask for a shelter care hearing within 72 hours of the removal. If the parents object to shelter care, there is an initial hearing to determine if there is probable cause to believe that the allegations of neglect in the petition are true. If there is probable cause, the court determines whether the child should be placed in shelter care. If CFSA is unable to prove that there is a probable cause for the allegations in the petition, the child must be returned home, even though both the court case and the case with CFSA may remain open. Initial hearings occur within 72 hours of the filing of a petition for custody.

Fact-Finding Hearing (Trial)

If a child has not been separated from the parents, but there is reason to justify the separation, a fact-finding hearing must be held within 45 days of the petition filing. If a child has been separated, a trial must be held within 45 days of the child's entry into foster care, generally within 105 days of removal. During the trial, evidence is presented in support of the neglect petition. The burden of proof is preponderance of the evidence.

Disposition Hearing

A disposition hearing must be held within 45 days of filing a petition in a non-removal case and 45 days of the child's entry into foster care, generally 105 days of a removal case. The dispositional hearing follows the fact-finding hearing. The purpose of the disposition hearing is to make a placement decision for the child, determine necessary services for the child, and ensure progress towards the goal of the case.

¹⁴ Shelter care refers to the temporary care that is given to a child in physically unrestricting facilities. In this context, it is synonymous with foster care for children who have been removed from their primary home due to allegations of abuse and/or neglect.

Review of Disposition Hearing

A review hearing is held at least every six months for as long as the child remains in foster care, unless the child has received a permanency hearing within the past six months (see Permanency Hearings below). During the review hearings, the Family Court looks at the child's circumstances to determine the following issues:

- ▶ The child's safety
- ▶ Whether the current placement is necessary and appropriate
- ▶ Compliance with the case plan
- ▶ Progress towards lessening the conditions that led to the foster care placement
- ▶ Identifying a likely date by which the child may be either returned home safely or placed for adoption or permanent guardianship

***NOTE:** When the date is identified for reunification, this date is a goal and is typically set for one year. It may be extended as appropriate.*

Prior to a review hearing, the social worker might want to sit down with you to discuss your perceptions of the child's status and to include information that only you will know based on your daily experiences with the child. This information may be included in a court report, which the social worker is required to submit to the court at least 10 days before each hearing.

Permanency Hearing

There are two circumstances that require permanency hearings. First, by law, a permanency hearing must be held within 12 months after the child's entry into foster care and at least every six months thereafter, for as long as the child remains in an out-of-home placement. Second, if the agency has determined that the family will not successfully reunify, based on reasonable efforts of a child's team, a permanency hearing must be held within 30 days of that determination.

***NOTE:** Entry into foster care is considered to be 60 days from the date of the child's separation from the parent or caregiver or the day the child is legally declared neglected, whichever is earlier.*

Again, resource parents should receive automatic notification of all permanency hearings but if they do not, resource parents can ask their assigned social worker about it. CFSA wants resource parents to attend court hearings to fully participate in the child's path towards positive permanency. As with the review hearing, the social worker is required to submit a report to the court at least 10 days before the permanency hearing. It is important that the report informs the court of the specific permanency goal that the agency has concluded is in the child's best interests and why CFSA has made that decision. It is equally important that the report advises the court of CFSA's strategy for implementing that permanency plan. The permanency goal will be outlined in the initial case plan.

Termination of Parental Rights Hearing

The termination of parental rights (TPR) motion may be filed at least six months after the child has been adjudicated neglected and is in the court-ordered custody of CFSA. The TPR motion

may also be filed immediately when, despite reasonable efforts, the parent could not be located for the fact-finding hearing and during the period from the child’s removal from the home to the fact-finding hearing. See D.C. Code 16-2354. In general, a TPR is filed in order for an adoption to take place, but the TPR motion must be filed under any of the following circumstances:

- a) The child has been in court-ordered custody under the responsibility of the District for 15 of the most recent 22 months.
- b) The Court determined the child to be abandoned.
- c) A Court determined that the parent committed any one of the following:
 - i. Murder of a child sibling or another child
 - ii. Voluntary manslaughter of a child sibling or another child
 - iii. Aiding, abetting, attempting, conspiring or soliciting to commit the murder or voluntary manslaughter of a child sibling or another child
 - iv. Felony assault that resulted in serious bodily injury to the child who is the subject of the petition, a child sibling or another child
- d) The court determined the child to be subject to intentional and severe mental abuse.

NOTE: *Judges in the District’s Family Court may wait to finalize a TPR until after a motion for adoption is filed, or until a hearing is held for finalizing the adoption.*

The social worker plays two vital roles in the TPR hearing. First, the social worker provides the court with the information that becomes the basis for the court’s decision regarding whether or not to proceed with a TPR. Second, the social worker must find and approve a qualified family to adopt the child. Of course, it might be that the qualified family is the resource parents.

A judge may enter an order for the termination of the parent and child relationship when the judge finds from the evidence presented, after giving due consideration to the interests of all parties, that the termination is in the best interests of the child.

Defining a Child’s Best Interest

District law (D.C. Code § 16-2353) provides a definition of a child’s “best interest” when it relates to a TPR. While the language is specific to the TPR, the language can be adapted for any consideration of the child’s interest (e.g., the impact of a decision on the child’s physical, mental and emotional needs). In determining whether it is in the child's best interests that the parent-child relationship be terminated, a judge considers the following:

- ▶ The child's need for continuity of care and caregivers
- ▶ The child’s need for timely integration into a stable and permanent home
- ▶ The physical, mental, and emotional health of all individuals involved

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT
DOMESTIC RELATIONS BRANCH – ADOPTION

EX PARTE IN THE MATTER OF)
THE PETITION OF)
FOR ADOPTION OF MINOR CHILD)

ADOPTION CASE NO. A-

JUDGE RONNA LEE BECK

GUARDIAN AD LITEM'S SUPPORT OF THE ADOPTION

I, _____, am familiar with
the circumstances surrounding the filing by _____ and _____
of a petition for the adoption of _____,
for whom I am the guardian *ad litem*. I wish to state my support for the granting
of this petition. It is my contention that it is in the best interests of the minor child
that the Petition be granted and that a Final Decree be entered legalizing the
adoption of the minor child by the Petitioner(s).

Date

Guardian *ad litem*

- ▶ The quality of the interactions and relationships of the child with his or her parent, sibling, relative, and/or caregivers, including the foster parent
- ▶ Whether the child was left by his or her parent, guardian, or custodian in a hospital located in the District of Columbia and has not made any effort to maintain a relationship or contact with the child
- ▶ To the extent feasible, the child's opinion of his or her own best interests in the matter
- ▶ Evidence that drug-related activity continues to exist in a child's home environment after intervention and services have been provided

Frequently Asked Questions – The First 90 Days



What is a medico-legal exam? Unlike a comprehensive medical examination, a medico-legal examination is an examination specific to physical and sexual abuse. For these cases, the investigative social worker follows procedures outlined in CFSA's Investigations Policy. Ideally, these exams occur at the Children's National Medical Center, where staff has special training. The exams should occur prior to placement.

What if I cannot attend one of the court hearings? We totally understand that the resource parents' schedule is a priority. Resource parents may have employment considerations and other scheduling conflicts that prevent them from attending every hearing, but it is encouraged that given advance notice of time and location, the resource parents will make every effort to attend hearings as part of their commitment to the role of resource parent. The agency cannot emphasize enough how strong the evidence that resource parents' participation directly impacts a child's ability to achieve his or her permanency goal. In addition, some employers – including the federal government – may allow the use of sick time for attendance at court hearings of foster children.

Further Information

- ▶ CFSA Initial Evaluation of Children's Health Policy
<https://cfsa.dc.gov/publication/program-initial-evaluation-childrens-health>
- ▶ Safe Shores—The DC Children's Advocacy Center
<http://www.safeshores.org/about-safe-shores.html>
- ▶ CFSA Dual Medicaid Quick Reference Guide
<https://cfsa.dc.gov/publication/qrg-dual-medicaid>
- ▶ CFSA Medicaid Cards Quick Reference Guide
<https://cfsa.dc.gov/publication/qrg-medicaid-cards>
- ▶ Termination of Parental Rights
<https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/groundtermin/>
- ▶ Children's Law Center
<http://www.childrenslawcenter.org/>

Chapter 7: Permanency Planning

As described in Chapter 1, there are four basic permanency goals: reunification, adoption, guardianship, and the Alternative Planned Permanent Living Arrangement (APPLA). Planning for these goals will often look the same despite some subtle differences. For example, adoption and guardianship have slightly different benefits and responsibilities:

Adoption	Guardianship
<ul style="list-style-type: none"> ▶ Birth parents do not retain rights. ▶ Pre-adoptive parents and the birth parents may sign a post-adoption contact agreement (allowing contact between the child and the birth family to continue following the adoption). 	<ul style="list-style-type: none"> ▶ Parental rights are maintained, including the right to seek custody. ▶ Guardians have the right to make major decisions such as educational, medical and travel. ▶ Parents can request a change to the provisions of the guardianship order.
<ul style="list-style-type: none"> ▶ The child's neglect case is formally closed. ▶ Adoptive parents can make decisions as any other parent (e.g., school choices and allowances). 	<ul style="list-style-type: none"> ▶ The neglect case is closed but can be reopened.
<ul style="list-style-type: none"> ▶ An adoption decree is final and cannot be changed. ▶ An adopted child cannot re-enter foster care after age 18. 	<ul style="list-style-type: none"> ▶ Guardianship can be modified if there is evidence that the child's circumstances have changed and the modification is in the child's best interest. ▶ A child who leaves foster care to guardianship cannot re-enter foster after age 18.
<ul style="list-style-type: none"> ▶ Subsidies are available in some instances until the child reaches 21 years of age. ▶ Subsidy rates are generally the same as for foster care rates. 	<ul style="list-style-type: none"> ▶ Subsidies are available until the child reaches 18 years of age, or age 21 in some circumstances. ▶ Subsidy rates are generally the same as for foster care rates.
<ul style="list-style-type: none"> ▶ An Education Training Voucher (ETV) may be available to youth who, after attaining 16 years of age, are adopted, or enter kinship guardianship, from foster care. DC may allow youth who have reached 21 years of age to remain eligible until they reach 23 years of age, as long as they are enrolled in a postsecondary education or training program and are making satisfactory progress toward completion of that program. Eligible students may receive grants up to \$5,000 per year for up to five years or until age 23. 	<ul style="list-style-type: none"> ▶ An Education Training Voucher (ETV) may be available to youth who, after attaining 16 years of age, are adopted, or enter kinship guardianship, from foster care. DC may allow youth who have attained 21 years of age to remain eligible until they attain 23 years of age, as long as they are enrolled in a postsecondary education or training program and are making satisfactory progress toward completion of that program. Eligible students may receive grants up to \$5,000 per year for up to five years or until age 23.

Adoption	Guardianship
<ul style="list-style-type: none"> ▶ Students who were in care at age 13 or older are considered independent students for Fostering Adoption to Further Student Achievement Act (FAFSA) and other financial aid eligibility purposes. Federal financial aid is administered through FAFSA, http://www.fafsa.ed.gov/ ▶ Eligibility for DC-specific programs may also apply. 	<ul style="list-style-type: none"> ▶ Students who were in care at age 13 or older are considered independent students for Fostering Adoption to Further Student Achievement Act (FAFSA) and other financial aid eligibility purposes. Federal financial aid is administered through FAFSA, http://www.fafsa.ed.gov/ ▶ Eligibility for DC-specific programs may also apply.
<ul style="list-style-type: none"> ▶ Adoptive parents may be eligible for tax credits (adoption, child care, earned income, etc.). ▶ Adoptive parents may also be eligible for dependent exemptions. 	<ul style="list-style-type: none"> ▶ Guardians may be eligible for tax credits (child care, earned income, etc.). ▶ Guardians may also be eligible for dependent exemptions.

Whether the goal is adoption, guardianship or the preferred reunification, the permanency planning process begins at the onset of CFSA’s involvement with the child and the family. It requires the active involvement of ALL team members to ensure that a child achieves his/her permanency goal. Permanency also focuses on the unique needs of the individual family.

Permanency, however, does not end with achievement of the permanency goal. When you bond with children in your home, maintaining relationships with the child even after they have left can sometimes make the difference between a child who feels successful in establishing healthy, long-term future relationships and the child who experiences every transition as a failure and a reminder of abandonment. Also keep in mind that not every child will bond the same, and not every child will need or want to maintain a relationship with you after reaching permanency.

As noted in Chapter 6, permanency hearings are held throughout the life of the case to ensure that every effort possible is being made to expedite a child’s exit from child welfare into a permanent home. In order for the social worker to draft a court report with substantive information on the team’s progress, permanency planning team meetings are held on a regular basis. This might mean meeting monthly or more frequently depending on any issues that may arise.

Appropriate Permanency Goals

When a child is living in the resource parents’ home, the social worker will continually assess the child and birth family to be sure that the goal is still appropriate.

Reunification

According to CFSA policy, no child should have a permanency goal of reunification for more than 14 months unless the social worker has documented extraordinary circumstances and still

has reason to believe that the child can be returned home within the coming six months. When reunification does occur, the children are monitored – typically for 90 days – to ensure their safety.

Again, whenever possible, the permanency goal is the safe return of children to their families. CFSA and its contracted partner make every effort to identify obstacles to reunification, to develop a strategy to resolve those issues and to maintain familial connections as appropriate. If the child in the resource parents' care has a goal of reunification, it is likely that the identified resource parents were selected to be the resource parents for that particular child because their home is in reasonable proximity to the parents and they are willing to interact with the parents to facilitate the goal of reunification. Either way, both the resource parents and the birth parents need to participate in the teaming and case planning process.

Sometimes birth parents and resource parents are able to create long-lasting relationships that allow everyone to help the children grow and thrive. As a resource parent, you have a very important role if reunification is going to occur, especially if you have been able to establish a solid relationship with the birth parents, – for example both of you are sharing information and supporting one another. You may also be modeling and reinforcing positive parenting skills. Just remember, every step you take toward supporting a birth parent is a step toward helping that family reunify. What a rewarding experience!



Adoption by Kin

When reunification is not possible, adoption by kin is an efficient means of facilitating positive familial connections for children. Adoption requires termination of parental rights. These parental rights are then transferred to the adoptive parent. CFSA and its contracted partner provide post-permanency services to support and preserve the family after adoption.

Permanent Guardianship with Kin

Relatives often have legitimate reasons for not adopting. In such cases, permanent guardianship is considered a viable option and an appropriate permanency goal. Permanent kinship guardianship places certain parental rights and responsibilities with the permanent guardian without terminating the birth parents' rights. Whenever this goal is determined to be the best option for the child, the private agency or CFSA social worker seeks to license the kinship placement as soon as possible. CFSA wants to note that while guardianship may be permanent in the context of policy, it does not mean that the neglect case is over. Rather, the case is closed with the possibility of being re-opened if a birth parent or the guardian petitions the Family Court to re-open the case in the future (in contrast to an adoption, which is final and cannot be reopened).

Non-Kin Adoption

Adoption by non-kin is an option when permanency with kin is clinically determined not to be in a child's best interest, or it is just not possible for some other reason. When a non-kin adoption is a child's permanency goal and if the resource parents are receptive, they may be the first

resource considered. Not only will the child be able to maintain consistency and stability in the resource parents' home, but often an emotional bond has also been established. This bond can be instrumental in helping a child develop into a confident, productive, healthy and loving member of any community.

Non-Kin Permanent Guardianship

This goal is only considered after it is determined by the permanency planning team that the kinship goals and adoption by non-kin are not attainable or in the child's best interest. This is typically not recommended for young children.

Alternative Planned Permanent Living Arrangement (APPLA)

We mentioned earlier that the Alternative Planned Permanent Living Arrangement (APPLA) is the least preferred choice among the five permanency options because it leaves a young adult without an identified family structure. A family structure is essential to the development of children and youth even after adulthood. Nevertheless, the family structure does not have to be a traditional mother/father set-up – families can be a community, a work family, or an extra-curricular family (e.g., a sports team). By policy and law, APPLA is considered an appropriate permanency goal only when the four preferred permanency options have been exhausted.

Before requesting a change to APPLA as a permanency goal for a youth, the social worker must fully explore and document all reasonable efforts made to finalize the preferred goal. At a minimum, the goal must be reviewed every three months. It is imperative that the youth's team – including the resource parents – make sure that the youth has established at least one lifelong connection. That is, an adult who is stable, willing and able to serve as a mentor, a supportive influence and a guide for the youth's ongoing development and maturity. This person may very well be the resource parent.

Permanency Team Meetings

While all team meetings are important, the meetings that focus on a child's permanency goal are absolutely essential for making sure that every team member is encouraging the progress. Permanency team meetings should be held regularly. Permanency planning can be monthly or bi-monthly, depending on what is needed. However, the meetings must be frequent enough to comply with policy and regulations while ensuring that case plans and permanency goals are appropriate. In terms of policy, case plans and permanency goals must be reviewed every six months (at a minimum) during regular team meetings while other meetings might be more frequent.

As a resource parent, you may be assigned certain tasks during a permanency team meeting. If you are the permanency resource (that is, if you are willing to be the guardian or to adopt the child), one of your tasks might be to secure an attorney to represent you during court hearings and to file motions for adoption.

If reunification is the goal, you might be tasked with supporting the birth parent or making sure that visitation schedules are followed. If the original permanency goal is no longer possible,

then the change from the primary goal to the concurrent permanency goal might mean a change in everyone's tasks, depending on the new goal.

***NOTE:** There are legal resources available for resource parents who seek to adopt. These include referrals from the Children's Law Center.*

Regardless of the goal, the team meeting agenda may include one or more of the following items:

- ▶ Specific services needed to achieve the permanency goal
- ▶ Assessments or re-assessments of the needs of all children in the family
- ▶ For children 15 and older, a written description of the programs and services intended to help the child prepare for the transition from foster care to independence (unless reunification, adoption, or guardianship are goals)
- ▶ A healthcare plan that includes an explanation of the general services needed
- ▶ A description of any mental health services to be provided
- ▶ A description of educational services the child is receiving or should receive
- ▶ An individualized and specific timetable meeting goals and for the completion of tasks

Post-Permanency and Aftercare Services

Regardless of the permanency goal, we sincerely want every child's relationship with his or her "forever family" to be supported in every way possible. That's why we try our best to make sure that resource parents have access to post-permanency services whenever they need them. If you become a permanency resource for a child, either by adoption or guardianship, you can expect services and supports from one or more of the following sources:

- ▶ CFSA's Permanency Specialty Unit
- ▶ Post-Permanency Family Center (Adoptions Together, Inc.)
- ▶ Services negotiated as part of a subsidy agreement
- ▶ Aftercare services accessible through CFSA-contracted agencies
- ▶ Free or Medicaid-funded medical and mental health services
- ▶ Availability of higher education fee waivers and other financial supports

The CFSA Permanency Specialty Unit

The CFSA Permanency Administration, which falls under the agency's Program Operations division, includes a Permanency Specialty Unit that helps with advice, support, and referrals even after permanency has been achieved and a social worker is no longer assigned. Staff members from the unit can be reached at (202) 727-4817. As a resource parent, you can expect to speak with a caring professional who is eager to hear how everything is going with your family. Most importantly, you can expect assistance with one or more of the following services:

- ▶ Locating or managing services for special-needs children/teens
- ▶ Adjustment and behavioral issues
- ▶ Family crisis intervention

- ▶ Connecting to local adoptive and guardianship family support networks
- ▶ Information about workshops that support family and child well being
- ▶ Suggestions for managing adoption or guardianship subsidy
- ▶ Aid in locating birth family members
- ▶ Questions about child development and parenting
- ▶ Safe Haven (adoption planning)

In addition to the above, the Permanency Specialty Unit works closely with the Adoptions Together Post-Permanency Family Center (PPFC) as well as the Center for Adoption Support and Education (CASE). Both providers offer a wide range of adoption and guardianship supports and resources for families at various points along the permanency process. These supports and resources include family integration therapy to allow the child and family to become more acquainted with each other and to also assist with the transition into an adoptive home. CASE offers a myriad of supportive services such as competency trainings, parent and family education, and other permanency-related workshops and seminars. CASE is especially equipped to manage more challenging cases, such as cases involving overturned adoptions, competing adoptions and cases with heavier court involvement.

Post-Permanency Family Center (PPFC)

Under the umbrella of CFSA's contracted partnership with Adoptions Together, the Post-Permanency Family Center (PPFC) offers the following services and outreach to individuals who have provided a permanent home for children:

- ▶ **Counseling Services** – PPFC offers individual, family and group counseling services to all eligible clients, especially those dealing with adoption or guardianship and family-related issues. Counseling services are available weekdays, evenings and Saturdays.
- ▶ **Saturday Respite Program** – This respite program is for adoptive, foster, kinship and guardianship families raising children between the ages of 8-14 with traumatic histories of abuse and neglect. The respite program also provides a therapeutic environment for traumatized children to grow and develop positive peer relationships and enhanced self-esteem.
- ▶ **Crisis Intervention Services (CIS)** – CIS is offered in the form of an immediate assessment and time-limited intervention for life-threatening or volatile situations. The staff connects the family in crisis to an appropriate provider that best meets the needs of the family. In addition, clients are provided with possible resource referrals.
- ▶ **Referrals** – When it is deemed necessary, PPFC staff will refer clients to other therapists in the community. More than 100 therapists – which all accept Medicaid – have been trained by Adoptions Together specialists in attachment theory.
- ▶ **Case Management and Advocacy** – PPFC staff can offer advocacy services on behalf of families experiencing any issues related to adoption, guardianship, and full family functionality. Case managers have access to necessary services and act as a liaison between the resource or adoptive parents and other systems. Case managers also provide the necessary resources to assist the family in making the best possible decisions for the resource parents' family. They are trained in best practices and have

excellent listening and communication skills to help resource parents discern the services that are most suited to the resource parents' needs. Some of these services may include mental health treatment, respite care, summer camps and other support services.

- ▶ **Trainings** – PPFC offers continuous trainings for both post-permanency caregivers and CFSA social workers. The training schedules are flexible for working parents and often available online. Topics range across the entire continuum of child welfare.

Both adoptive and guardianship families receive notification of the availability of these supportive services prior to finalization of the adoption or guardianship. When necessary, the adoptive parents may negotiate with CFSA during the development of the subsidy agreement to have CFSA cover costs for supportive services that are not included in the conventional subsidy formula. Resource parents can discuss these details directly with their adoption worker.

Adoption Subsidies

If you should decide to adopt a child, CFSA will do its best to ensure financial support depending on certain circumstances (for payment reviews, see Chapter 12: Resource Parent Payments). The adoption worker will provide specific details throughout the adoption process. More insight can be found in the Adoption Subsidy policy. Most but not all children placed through CFSA are eligible for a subsidy if they are older than the age of 3, or when they are diagnosed with one or more of the following special needs:

- ▶ Chronic medically-diagnosed disability that substantially limits one or more major life activities, or requires professional treatment, or assistance in self-care
- ▶ A diagnosed psychiatric condition that impairs the child's mental, intellectual or social functioning, and for which the child requires professional services
- ▶ Behavioral or emotional disorders that deviates substantially from behavior appropriate to the child's age; interferes significantly with the child's intellectual, social and personal adjustment; and making the child difficult to place

***NOTE:** There is no income eligibility requirement or means test for determining eligibility for adoption subsidy for the prospective adoptive parents.*

Guardianship Subsidies

Similar to adoption, CFSA wants to be sure that permanency is truly permanent. As a result, the agency provides guardianship subsidies to eligible individuals in order to make sure that financial and medical expenses are not a barrier to permanency. For details on these subsidies, please ask the social worker AND review CFSA's online administrative issuance, CFSA-09-02 Guardianship and Grandparent Subsidies as well as the policy, Permanent Guardian Subsidy.

The District's regulations as set forth in 29 DCMR Chapter 61 for permanent guardians are also included below to keep resource parents well informed.

6103.1 A permanent guardianship subsidy may include:

- (a) Short-term payments, which are time-limited and intended to meet the cost of integrating a child into the family; and
- (b) Long-term payments, which are intended to help a permanent guardian whose income is limited and is likely to remain so.

6103.2 The amount of the long-term permanent guardianship subsidy shall be:

- (a) Based on the applicant's federal adjusted gross income, as defined by the Internal Revenue Code of 1986 or any successor legislation;
- (b) Based initially on the amount of the foster care board and care payment received by the applicant for the child's care at the time that the application is approved; and
- (c) Following a review held pursuant to § 6105, based on the amount of the foster care board and care payment that would be paid for the child's care if the child were in foster care.

6103.3 The payment schedule for the long-term permanent guardianship subsidy shall be:

- (a) Revised annually.
- (b) Based on the most recent determination of the median family income for the Washington, D.C. metropolitan statistical area as determined by the U.S. Census Bureau.

Aftercare Services for Youth

“Aging out of the system” is a phrase used when a youth in foster care turns 21 without achieving one of the identified permanency goals. In these cases, CFSA wants to do everything possible to secure a safe and self-sufficient future for that young adult. During the youth’s transition process from being in the child welfare system to being independent, the agency and the youth count on a great deal of support. For example, it is the social worker’s responsibility to ensure that the proper referrals are submitted and services are in place (see Chapter 8: Ages and Stages for more information on youth transitions). But as a resource parent, you may be asked to help facilitate various services or other needs.

The following activities will most likely take place for an older youth in your home as the youth prepares for independence from foster care:

- ▶ The youth’s case-managing social worker will refer the youth for aftercare services on or before they turn 19.5 years old.
- ▶ For two calendar years after the youth’s exit from foster care, the young adult is eligible for the following services from CFSA-contracted organizations:
 - Assistance in the search for stable housing
 - Aftercare case management
 - Employment and vocational guidance, including referrals
 - Ongoing life skills development
 - Guidance for accessing public services
 - Parenting classes and daycare vouchers for those with dependents

- Transition to adult systems as needed, such as the DC Department of Behavioral Health (DBH), the DC Department of Disability Services (DDS) or any equivalent agency in any other jurisdiction
- ▶ Youth who decide they do not want or need aftercare services can still change their minds within two years of their 21st birthday and also remain eligible for services by re-opening their aftercare cases in one or both of the following two ways:
 - They can contact the previously assigned aftercare provider who will re-open the case.
 - They can also contact the CFSA Office of Youth Empowerment (OYE), which will ensure that they are linked with their previously-assigned aftercare provider as appropriate.
- ▶ To prevent duplication of services from more than one agency, qualifying youth with moderate to severe developmental disabilities should receive direct comprehensive case-management services through the DC Department of Disability Services (DDS).

In situations where youth need assistance with housing, only the CFSA director can vet and approve Rapid Housing assistance. The youth will have to meet one or more of the following eligibility criteria:

- ▶ Demonstration of progressive maturity and achievement of self-sufficiency goals as outlined in the youth's transition plan
- ▶ Part-time employment if currently enrolled in an academic or vocational program
- ▶ Full-time employment if not enrolled in an academic or vocational program
- ▶ Submission of the Rapid Housing application no later than 90 days prior to the youth's transition from care

NOTE: Rapid Housing applications can be submitted until age 23 for all youth who were ever in care.

Frequently Asked Questions – Permanency Planning



What are the timelines for reaching permanency goals? According to guidelines from the federal Child and Family Services Review, reunification should be achieved in 12 months, guardianship in 18 months, and adoption in 24 months. These goals are not always met but attending court hearings will be the best way to learn about progress towards these goals. The child's social worker should also keep you informed.

Are resource parents responsible in any way if a permanency goal isn't achieved within a timeframe? The resource parents' role is to support the child and do whatever they can to support the child's goal, but they are not responsible for making sure the goal is achieved. Ideally, resource parents will do whatever is in their power to be sure the identified goal is achieved, but often there are legal circumstances that will be out of the resource parents' control. Even if there are circumstances that prevent resource parents from giving their full support - they are still important team members.

Frequently Asked Questions – Permanency Planning



Can resource parents change their mind after they have agreed to be a permanency resource?

Naturally we would hope that resource parents would not change their mind. At the same time, the child's future is so important that it is always better for resource parents to know their own heart, capacity and ability to be a permanent resource. If resource parents thought that they were able but discover that in fact, they are not, there is no judgment. It is better to know as soon as possible so the concurrent permanency goal can be pursued.

Will the private agency or CFSA provide resource parents with financial support if they choose to adopt?

Post-permanency supports often include subsidies. If resource parents are considering guardianship, we are also able to help with some supports. Resource parents should discuss all of these post-permanency supports with their child's social worker when deciding to become a permanency resource for the child in their home to make the transition as smooth as possible.

What happens to the resource parents' supportive resources if they move to another jurisdiction?

We will continue to work with resource parents even after they have moved to another jurisdiction. Although we do not physically go into their new locality, we do coordinate with the jurisdiction from our offices in the District to be sure that the resource parents' family and their child continue to receive needed services and resources.

Further Information

- ▶ CFSA Permanency Planning Policy
<https://cfsa.dc.gov/publication/program-permanency-planning>
- ▶ CFSA Case Planning for Guardianship Policy
<https://cfsa.dc.gov/publication/ai-case-planning-guardianship>
- ▶ CFSA Establishing the Goal of APPLA
<https://cfsa.dc.gov/publication/program-establishing-goal-appla>
- ▶ Post Permanency Family Center
<https://www.adoptionstogether.org/?s=post+permanency>
- ▶ CFSA Adoption Subsidy Policy
<https://cfsa.dc.gov/publication/program-adoption-subsidy>
- ▶ CFSA Permanent Guardianship Subsidy Policy
<https://cfsa.dc.gov/publication/program-permanent-guardian-subsidy>
- ▶ CFSA Guardianship and Grandparent Subsidies Policy
<https://cfsa.dc.gov/publication/ai-guardianship-and-grandparent-subsidies>

Chapter 8: Different Ages – Different Stages

Many of us remember our first milestones: tying our own shoe, writing our own name, memorizing a telephone number, “graduating” from elementary school and entering middle school, experiencing the awkward changes from pre-pubescence to adolescence, the first time we fell in love, and then . . . the awesome and yet terrifying realization that our decisions are ours alone. We can use each of these milestones to help us understand, protect, and nurture the child in foster care.

Children grow through many stages as they mature from infants to young adults. Along the way, there are important clues related to healthy growth. That is just one reason why the DC Child and Family Services Agency (CFSA) has assessments required of the child placed in your care. These assessments help determine when a child needs a little—or a lot—more help. Different assessments may be completed by different people, such as the social worker or CFSA’s on-site Healthy Horizons Assessment Center (HHAC), the Department of Behavioral Health (DBH) staff or staff from the CFSA Office of Youth Empowerment (OYE). This chapter explores different assessments and offers general information on milestones, a few tips on parenting and available resources.



Assessments for all Children and Youth in Care

- ▶ A medical screening prior to entering, re-entering or exiting foster care or when changing placements while in foster care (including within the same private agency)
- ▶ A dental examination within the first 30 days of entry or re-entry into foster care
- ▶ Initial mental and behavioral health screening within 30 days of entry or re-entry into care
- ▶ The Child Stress Disorders Checklist (CSDC) Trauma Assessment within 20-28 days of a child’s removal from the home
- ▶ The Global Appraisal of Individual Needs (GAIN-SS) at a child’s entry, re-entry or change in placement to screen for mental health and substance use, internalizing disorders, externalizing disorders and crime/violence

Ages Birth-6

It is not uncommon to recognize when a newborn’s brain is working and that an infant is trying to communicate through facial expressions or visual cues, even though the verbal skills are not yet mastered. But if a child doesn’t seem to make eye contact and the “wheels aren’t turning” behind those eyes, there might be reason to wonder if there are developmental issues. For this reason, there are many assessments for young children entering foster care.

Milestones

Generally, when little children are placed in the resource parents' home, so many assessments and screenings will have already been completed that any developmental delays will most likely be documented in the Placement Passport Packet. Yet, there will be some milestones that are not yet assessed and that occur while the child is under the resource parents' care. CFSA wants you to be well informed and thoughtful as you observe the little ones growing up in front of your eyes. For example, an 18-month-old child should be able to point to certain things like a cup or a bowl and speak certain one-syllable words. By age 4, the child should know his/her first and last name, be able to play catch, tell stories, go to the bathroom alone, and begin school. By age 5 and 6, the child should begin to read and write, speak full sentences, have a sense of independence, and express ideas.



Likewise, there are certain childhood diseases that are age-specific or certain symptoms that may arise, like scratching during ear infections and little red bumps that indicate an outbreak of chickenpox. Resource parents will have plenty of opportunities to observe and make their own natural assessments. You should contact the child's primary care pediatrician, social worker, and birth parent if appropriate, when anything is a cause for concern.

Assessments

In order to support your caregiving skills and to protect the well being of the child, the private agency or CFSA social worker will do their best to make sure that certain assessments, screenings, tests and appointments are scheduled throughout the child's life with them. Ideally, these appointments are scheduled with your convenience in mind to ensure your participation, as appropriate.

The following examples of assessments are not exhaustive, but they give a good idea of the range of efforts that social workers take seriously to ensure that the child is healthy and meeting the age-appropriate developmental milestones:

- ▶ Infants in care are referred to a dentist after the first tooth erupts (as early as 6 months) but at least by 12 months of age (whichever comes first).
- ▶ Completion of the Ages and Stages Questionnaire (ASQ-SE) is administered by a Department of Behavioral Health (DBH) clinician, co-located at CFSA, within 30 days of placement or reentry. This questionnaire screens children between the ages of 3 months and 5-years-old for social and emotional delays, self-regulation, compliance, communication, adaptive behaviors, autonomy, affect, and interaction with people.
- ▶ Children ages birth-3 years old are referred to Strong Start DC by CFSA nurse practitioners if the child is identified as having any delay.
- ▶ Children ages 3-5 are referred to the District of Columbia Public Schools' (DCPS) program Early Stages by the CFSA nurse practitioners if the child is identified as having any delay.

- ▶ The social worker will conduct the Preschool and Early Childhood Assessment Scale (PECFAS) described in Chapter 3: Placement and Matching that occurs within 30 days of placement.
- ▶ The Strengths Difficulty Questionnaire (SDQ) is given by the DBH clinician to a 6-year-old within 30 days of removal or reentry into foster care.

Developmental Delays

When a child is diagnosed with developmental delays, additional supports can be provided through Health Services for Children with Special Needs, Inc. (HSCSN), a Medicaid-managed care insurance plan. In addition, the guardian *ad litem* (GAL) and the Family Court judge can help to obtain any additional services that may help the child to reach the appropriate developmental milestones as soon as possible. The importance of early intervention cannot be overstated. Children may start out with moderate or even more severe delays, but early and consistent supports can help them to make great progress or even catch up to developmental goals before the first grade.

NOTE: You are not responsible for diagnosing or assessing. However, your simple observations shared with the child's social worker can make a difference.

Immunizations

You will likely be making appointments for regular “well child” check-ups during which immunizations are typically given. As a resource parent, you cannot consent to a child’s immunization without the consent of the child’s parents or the DC Superior Court. The child’s social worker will let you know if the parent has provided written consent and if it’s already on file with the child’s primary care provider, or if there is a court order for the child to be immunized. For more information, please read CFSA’s [Frequently Asked Questions](#) on immunizations for children in care.

The recommended immunization schedules can be found on the Center for Disease Control (CDC) website at <http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>. You are encouraged to explore these schedules to be well informed.

Nutrition

The District’s Special Supplemental Nutrition Program for Women, Infants and Children (WIC) provides the following services to pregnant women, new mothers, infants and children up to age 5:

- ▶ Nutrition counseling and education
- ▶ Formula and baby food
- ▶ Breastfeeding resources and support
- ▶ Nutrient-rich foods (with calcium, protein, iron and Vitamins A, D and C)
- ▶ An immunization assessment and screening (with parental consent)
- ▶ Referrals to health and social service providers
- ▶ WIC also provides fresh fruits and vegetables (May – November) through the Farmers’ Market Nutrition Program for women and children older than 1-year-old

Safety

The child's social worker will provide you with age-specific resources. For example, the early education specialist from CFSA's Office of Well Being will give you information on childcare and educational supports. For example, infants should sleep on their backs, and children of all ages should wear helmets and protective gear if they are riding bicycles or skateboarding. And if you need a car seat, the social worker can arrange training for proper usage. The agency even has an online tip sheet on child passenger safety. There are also tip sheets on choking hazard prevention, food sensitivities in children, and adverse effects of second-hand smoke. If you do not receive information on age-specific resources, you should ask the child's social worker.

Ages 7-14

Milestones

Once a child reaches this age range, the individual personality becomes more pronounced and developed. At ages 7 or 8, the reasoning faculty becomes increasingly refined, and the physical body is capable of playing coordinated sports such as soccer, gymnastics, and dance. The child begins to consider others as well as self. Compassion is evident. This is a perfect time to introduce opportunities for responsibility, such as sharing household chores and beginning to participate in activities together.



During the pubescent years around ages 9 to 11, children become more attached to their friends and become more aware of their body image. While there can be a societal focus on a girl's body image, it is equally important to consider a boy's self-image. Both genders should be encouraged to consider their bodies without judgment. If children are able-bodied—meaning without any physical disability—the focus should be on function, not form. In other words, if a child complains that “my legs are too fat” or “my arms are too skinny,” that complaint is an opportunity to remind the child to focus on function. One response could be, “Your legs work great! You can walk, run and skip. Let's thank our legs for doing such a great job for us.”

Children at this age begin to experience the hardship of homework. A child might be insecure about homework or school performance in general, saying things like, “I'm not so smart” or “Everyone gets better grades than me.” You can help reduce insecurity by assisting the child with homework, encouraging good study habits, and making sure they have a designated, organized place to do their homework. You can also find ways to make “brain exercises” fun, e.g., crossword puzzles or playing word games like Scrabble.

Assessments

During these stages, the child welfare system will continue with assessments. Resource parents can help the child to recognize that the following assessments are truly designed to help the entire team understand and address their needs more effectively. This will help the child accept the process and feel less resistant to being assessed all the time.

- ▶ The Strengths and Difficulties Questionnaire (SDQ) will be completed for children up until age 10 within 30 days of entry or re-entry into foster care. The questionnaire screens for early behavioral problems such as emotional symptoms, conduct problems, hyperactivity and inattention, peer relationship problems and pro-social behavior.
- ▶ The Child & Adolescent Functional Assessment Scale (CAFAS)[®] was discussed in Chapter 3. It will be completed within 30 days of entry into foster care and every 90 days thereafter.
- ▶ CFSA's Healthy Horizons Assessment Center (HHAC) screens consenting youth (11 years and older) for chlamydia, gonorrhea, and trichomoniasis during the pre-placement screening and the 30-day comprehensive medical evaluation.

Immunizations

Children in this age bracket will need to be scheduled for various immunizations and vaccines, particularly the meningococcal vaccine and the human papillomavirus (HPV) vaccine, starting at age 11 or earlier. Remember, as mentioned in the birth-6 section of this chapter, the birth parent's consent is needed before the child can receive vaccines. See CFSA's [Frequently Asked Questions](#) on immunizations for more information.

Eating Disorders

Around this age, children might develop eating disorders, including bulimia, anorexia, and hoarding food. Sometimes hoarding food is a symptom of a child's fear of his or her needs not being met. While you still want to mention it to the social worker, it might be classified differently than self-starvation for fear of "being fat." If you suspect that a child in your care has an eating disorder, it is important that you share this information with the social worker.

Bullying

While bullying can take place at any age, the onset is frequently around this "middle age" bracket. Every day, one in five children in the United State is the target of bullying, including cyber-bullying. According to the District of Columbia's Youth Bullying Prevention Act of 2012, bullying includes severe and persistent conduct that can be physical, electronic or verbal, but is focused against any number of actual or perceived characteristics, including but not limited to personal appearance, sexual orientation, intellectual ability, disability or associations of such with a similar group or person.

Please have a conversation with the children in your care and be proactive with the following actions:

- ▶ Assist the child in identifying bullying actions and behaviors.
- ▶ When a child or youth has been the subject of bullying actions, immediately contact the social worker.
- ▶ Carefully observe the child's actions and interactions to discern if bullying is an issue.
- ▶ Partner with the social worker, the birth parent and other team members to help.

Sexuality

By age 12-14, the child's sense of sexuality is truly blossoming. It is important to respect the child's sexual orientation and be open to his/her expressions without judging. This might also be an appropriate time to discuss sexual feelings in terms of healthy, loving, and respectful relationships. Ideally, you will have established a shared parenting relationship so that you and the birth parent can reinforce the same messages for the child.

Human Trafficking

When a youth is missing, the possibility that he or she may become a victim of human trafficking must be addressed. If at any time you suspect trafficking, please share these suspicions and any other information you have when you make the "missing persons" police report. You should also contact the Hotline as well as the social worker. Resource parents can also read CFSA's resource guide on Human Trafficking to get more information on resources in the District, Maryland and Virginia as well as national resources and work with the team to ensure the youth is connected to the appropriate services.

Youth Bill of Rights

The Bill of Rights for Children and Youth in Foster Care views a child or youth's time in their resource home as a supportive, caring and equitable experience for young people going through a difficult time. Every child and youth in the District's care gets a copy of the Bill of Rights. While adults are often responsible for making sure the child's rights are protected, youth should be invested in making sure that their rights are defended. The Bill of Rights addresses the following important feelings and circumstances a child or youth might experience during foster care:

- ▶ How the child or youth is treated
- ▶ Feeling unhappy with services or decisions
- ▶ The Office of the Ombudsman
- ▶ The use of the team for support
- ▶ Personal information and privacy
- ▶ Where the child or youth lives
- ▶ Birth family relations
- ▶ Health
- ▶ Belongings and money
- ▶ The future

The Office of the Ombudsman

Youth always have the right to raise concerns with their social worker or directly to the CFSA Office of the Ombudsman. If you have a youth in your home who has unresolved concerns, you might encourage the youth to first attempt to resolve the issues with the social worker or GAL before reaching out to the ombudsman. At any time, you may also contact the ombudsman on behalf of the youth if the youth requests it. The ombudsman can be reached by calling (202) 727-2111.

Ages 15-21

Milestones

By the time a child reaches age 15, the need for independence will be unmistakable. Respecting this need can be a challenge, but it doesn't need to be a nightmare. Remember that a child's personality doesn't change, it just evolves. So what works well for a 5-year-old child often times works equally well for the same child when they are age 15. The key is to adapt strategies to personality and age difference. Even if the resource parents did not know the 15-year-old when they were little, they can adapt their parenting approach through conversations with the youth's birth parents, other family members and other team members.



Shared parenting can come in very handy. Learning as much as possible about a child's personality can help resource parents make decisions to help them meet their potential. When the child reaches ages 15-19, despite their desire to prove how independent they are, youth in this age group need just as much guidance as the younger ones. Resource parents can help by making sure that life is structured while still creative, consistent, and flexible. Indeed, you can and should teach a variety of life skills in the family foster home, keeping the youth on track developmentally and learning how to do chores, be responsible, etc. In addition, your participation in school and extracurricular activities is key. Give praise often but make sure it's authentic. The teenager's sixth sense is highly refined and they will sense immediately if you are trying to "get them to like you" or manipulate them into a certain behavior.

Safety

Safety is always important. In addition to taking such safety measures like making sure that children wear helmets when riding a bicycle, resource parents should never leave dangerous chemicals or prescription drugs accessible in the house. Resource parents should also role model safety. If resource parents ride a bicycle, they should wear a helmet and make sure that youth are also wearing a helmet. When a child becomes a teenager, safety is especially important to discuss. This is a time in their life when growth is so rapid, and they cannot imagine that anything can stop it, not even oncoming traffic.

There are three primary safety concerns at this age:

1. Running away (or abscondence)
2. Sexual activity
3. Use of illegal drugs or other substance use

Running Away

Be mindful that teenagers sometime run away when they are in foster care and they will often run home to their parents or other relatives or caregivers. This is not a reflection on the resource parents' skills, but resource parents do need to be mindful and should do their best to educate themselves on clues and prevention tactics. Most importantly, communication is key. CFSA strongly recommends that resource parents review the agency's policy on [Missing, Abducted, and Absent Children](#). If a child in the resource parents' care does run away or is missing, no matter what the age, resource parents should start by making obvious efforts to locate them, such as calling close friends and family members. If the youth is still nowhere to be found, follow these steps:

1. The resource parents' first call is to the police department to report a missing person. Make sure to get the police report number.

NOTE: In instances where a police report number is not obtained or provided, the resource parent shall obtain the name of the police officer who received the call and the reason the call was not accepted.

2. The second call is to CFSA's Hotline at (202) 671-7233.
3. The CFSA Hotline worker will immediately notify the social worker.

Safe Sex

In general, serious conversations about sexual relationships are encouraged, even if you have personal beliefs about "waiting for marriage" or other beliefs related to sex. Regardless of your own beliefs, having this important conversation with the youth's parent first and deciding together how to present a united front in a discussion with the youth will reinforce the importance of responsible behavior. Doing so also underscores the possible prevention of unwanted consequences, such as early pregnancy, exposure to the human immunodeficiency virus (HIV) or other sexually transmitted diseases. You are urged to read CFSA's policies on [HIV and AIDS](#) and [HIV, Sexual, and Reproductive Health Services](#) to increase awareness about the guidelines.

Treatment for Substance Use/Abuse

If you suspect a youth in your home is abusing drugs or alcohol, legal or otherwise, or using any substance to their detriment, please share this information with the assigned social worker. If you recognize that a youth in your care may just need a little help or if you think the youth may be willing to talk to someone about drug or alcohol use, you can either contact the social worker or CFSA's Office of Well Being. Both the social worker and the Well Being staff can offer guidance and resources on how to encourage the youth to consider participating in an assessment. If a youth resists conversations with a social worker or other professionals, you can encourage the youth to access services directly through the Adolescent Substance Abuse Treatment Expansion Program (ASTEP).¹⁵ Treatment providers in DC are readily available to help youth who need somewhere or someone to turn to for help. For foster homes in DC, many of the providers may be near the resource home, school, or youth's job (if the youth is employed). Remind the youth that what is discussed in treatment is confidential. Insurance is not necessary to seek help.

¹⁵ <http://dc.gov/service/adolescent-substance-abuse-treatment-astep>

Older Youth Services

The Office of Youth Empowerment (OYE) was established to address the complex needs of older youth who are in foster care. OYE's goals and objectives focus particularly on preparing older youth to exit to the most appropriate and available permanency option whether they are case managed by CFSA or the private partner. The following services are offered to support the youth successful transition from foster care.

- ▶ **Case Management:** Committed youth ages 15 through 20 years old are assigned a case-carrying social worker. The case-carrying social worker continually explores and engages the youth's interests and strengths, birth family, and other lifelong connections as supports and placement options to facilitate permanency. In addition to visitation, court preparation, placement, and monitoring overall wellbeing, any social worker case managing for older youth coordinates and co-facilitates transition meetings and collaborates with other specialists as needed.
- ▶ **Youth Transition Planning (YTP):** Planning begins at age 14 for youth and continues every 6 months until the youth reaches permanency or age 20. When a youth reaches age 20, the youth's transition planning team begins to meet every 90 days (or more frequently if needed) until the youth reaches age 21. If the youth agrees with your participation but you are not invited to the YTP meeting (for whatever reason), you should be sure to express your interest to the social worker. If necessary, feel free to contact the supervisor or program manager assigned to the case.
- ▶ **Educational Services Program:** The Education Unit is an essential team within OYE that provides educational and post-secondary educational services beginning in high school through college graduation. Beginning in the 9th grade, OYE is responsible for identifying youth who are on track to attend college and to provide them with all necessary supports to take the steps for admission, enrollment, and graduation from college.
- ▶ **Employment/Vocational Services Program:** The Career Pathways Unit is responsible for identifying older youth who are not on track to attend a college or university and provide them with opportunities to obtain certification or experience in a designated field with the intent that they will transition into a full-time career. Employment services and vocational supports are provided and are an essential part of preparing youth for a self-sustaining income before, during, and after their transition from foster care.
- ▶ **Financial Management:** CFSA works with a community partner, who manages the Making Money Grow financial literacy program and is on-site four days a week to enroll and monitor youth participants in the matched savings program. Youth ages 15 to 20 are eligible and the on-site representative engages with them in managing finances, understanding the importance of credit, and building assets in a fashion that best matches their learning style. Individual plans are developed that include both short-term and long-term financial goals.
- ▶ **Generations Unit /Parenting Teens Program:** The Generations Unit, a specialized unit within the case carrying team, provides extra support and guidance to pregnant and parenting youth in care (both mothers and fathers) so they can achieve their personal transition goals while balancing the responsibilities of parenthood. The unit was

developed to meet the specialized needs of this population and specific community partnerships have been formed.

- ▶ **Aftercare Services:** Aftercare services are designed to ensure that when young adult leave foster care. CFSA works with a community partner that continues to provide independent living supports and connections to community resources for up to two calendar years post-transition. Youth are referred to the aftercare provider six months prior to transitioning so they become part of the youth’s transition team. Youth who decide they do not want or need aftercare services can still change their minds within two years of their 21st birthday and also remain eligible for services by contacting the OYE Youth Aftercare Liaison.
- ▶ **Rapid Housing:** Rapid Housing provides funding to support eligible youth through age 23. To be eligible, youth must be employed or have consistent income that would allow you to live in housing of their choice. Rapid Housing assistance is also available to youth attending college full time who have at least a 2.0 GPA. Assistance is also available to youth attending college part time and residing off campus. Youth must be employed at least part time and have consistent income to allow you to live in housing of your choice. All Rapid Housing requests are approved by the Director.

Youth Allowances

Your board payment will include funds that are specifically allocated for a youth’s personal use. The allowance amount is set by CFSA. When the youth reaches age 15, continuing up until age 21, and the youth has been in your home for a minimum of 30 consecutive days, they are eligible for an allowance.

***NOTE:** Allowance funds cannot be used to cover the youth’s basic necessities, such as food, toiletries, school supplies and basic clothing. Monies for basic necessities are included in your board rate.*

Resource parents must give the allowance to the youth and allow the youth to decide how it is spent. However, it is likely the youth will need your guidance and coaching regarding how to manage their allowance responsibly. It is important to discuss appropriate and inappropriate purchases with the youth. For example, if a youth wants to use their personal allowance for an item the youth really can’t afford (e.g., an expensive phone), be clear about the consequences of not being responsible with the allowance. This is a great opportunity for you to help reinforce financial management and budgeting skills. Ideally, you will also discuss this with the youth’s birth parents, if appropriate, so that both of you are reinforcing the same habits and skills.

We want to re-emphasize that allowances are a wonderful vehicle for learning responsibility and budgeting. While the allowance should not be used as a “bargaining chip” or withheld without good cause, it is also your right to use a reasonable and prudent decision-making process (see Chapter 9) for withholding allowance. A “good cause” might be curfew violations, school truancy, or other behaviors that any birth parent might see as a justifiable reason for suspending an allowance. If you discover that the youth’s behavior warrants suspension of the whole or partial amounts of the allowance, discuss the reasons and explain that the money will be set aside (usually in a savings account) and returned when the concerns are resolved. Most

importantly, have a frank and open conversation about how a change of behavior may help the youth earn back his or her allowance.

It is always best if these conversations can take place between you and the birth parent first. That way, the youth receives consistent information and guidance. That consistency is so helpful for the youth learning personal responsibility and accountability. You can find more details in the [Youth Personal Allowance](#) policy.

***NOTE:** If you do withhold the allowance, you must keep track of the money and be sure to set the money aside for the youth – for example in a savings account. Do not spend it, even if it’s something for the youth. It is really important for the youth to learn these boundaries, set by your example.*

Your board payment will also include funds that are specifically allocated for a youth’s – ages 15 to 21 – clothing allowance. It is your responsibility to provide clean, well-fitting, attractive, and seasonal clothing appropriate to the youth’s age, gender, and individual needs – e.g., for school, work, leisure activities. You may distribute the clothing allowance directly to youth in instances where you feel the youth has the maturity level to manage funds appropriately. When a youth is in immediate need of clothing beyond what the clothing allowance can cover, you can always notify the social worker and request an emergency clothing voucher through CFSA. You can find more details in the [Youth Personal Allowance](#) policy.

You can help youth develop these skills by demonstrating and discussing the tools needed to be a “smart shopper,” for example: developing a savings plan and a budget, identifying needs vs. wants, finding a sale or a less expensive option, comparison shopping at a few stores, and using coupons to make purchases.

How old would you be if you didn’t know how old you were?

Attributed to Satchel Paige

Frequently Asked Questions – Different Ages & Stages



Are resource parents responsible for scheduling a child’s medical appointments?

When the child is first placed in the resource parents’ home, the social worker will typically make the necessary appointments in conjunction with the resource parents and their schedule. Resource parents’ participation is necessary because they have information that is needed for an appropriate medical assessment. As soon as the child is settled into a normal routine, it is expected that they make appointments just as any biological parent would do.

Can resource parents enroll the child in school?

It depends. Birth parents have education decision-making rights unless there is a court order stating otherwise. Resource parents may be able to submit the paperwork for enrollment if the birth parents and service team have agreed on the school decision. If the child is already enrolled in school with no plans to change schools, resource parents should coordinate with the social worker to gather the re-enrollment paperwork for the upcoming school year and do the enrollment as they would for a

Frequently Asked Questions – Different Ages & Stages



biological child. Contact the social worker or the Office of Well Being at (202) 727-2269 for more information.

When do resource parents have the right to sign consents for school trips or waivers of liability, such as a form in which the signer agrees to not sue in case of accident or other unforeseen circumstance? Resource parents may sign consents for children in their care to participate in the same activities as their peers, such as school-sponsored field trips, sports teams or extracurricular clubs, rock climbing walls, and Girl Scout and Boy Scout weekend camping trips. Please see CFSA’s policy on Consents and Waivers of Liability for additional details.

Do resource parents need permission from the private agency or from CFSA to take a child on vacation with them and their family?

Approval is not necessary if the trip is local, but notification is required. Resource parents should inform the social worker and talk with the birth parent about the vacation, especially if a planned parent-child visit will need to be rescheduled. Approval is required for trips outside of a 100-mile radius or any overnight trip of more than two days. Please see CFSA’s policy on Travel with Resource Parents for additional details.

If a resource parent has a new job and may need someone else to watch the children for a certain number of hours but daycare isn’t needed, is there a process that needs to be followed or a form that needs to be filled out?

There are no forms, but resource parents must discuss their substitute care needs with the social worker and develop a written plan. It should include emergency contact numbers for the substitute caregiver. CFSA’s online policy, Supervision of Children, has details.

How old must children be before resource parents can leave them alone in the house?

CFSA’s online policy, Supervision of Children, provides general guidelines. For example, a child eight years and younger should not under any circumstances be left unattended or allowed to self-care for any period of time and no child in foster care who is under the age of 16 shall care for another child without an adult in the home. Most importantly, resource parents must use their common sense and their sense of the child’s capacity for self-care. While a 14-year-old may be perfectly capable of self-care while resource parents run to the store, an unruly 17-year-old may have fewer skills and need more supervision.

What should resource parents do if the child’s behavior is “out of control”?

For a behavioral crisis during which the child is a danger to himself or others, resource parents should contact the Child and Adolescent Mobile Psychiatric Services (ChAMPS) at (202) 481-1450. For ongoing concerns, resource parents should contact the social worker to refer for permanent services. If resource parents need assistance to talk through a tough situation after business hours (5 p.m.–1 a.m.) or on the weekend/holidays (9 a.m.–1 a.m.), they can contact the Stabilization Support Line at (202) 800-3040. A list of important contact numbers is included in the appendix of this handbook.

Can CFSA help resource parents with full-time day care?

If resource parents can anticipate their day care needs before placement, CFSA can work this out at the time of placement. If their day care needs occur later, resource parents should contact the private agency or CFSA support worker. Resource parents can also call the Office of Well Being at (202) 727-2269.

Frequently Asked Questions – Different Ages & Stages



What happens if resource parents need to take the child in their care to the hospital? Can resource parents sign the child in?

The resource parent role is limited with regard to giving consent for medical treatment. Foster parents and caregivers are not authorized to give consent for non-routine medical or psychiatric treatment. In an emergency situation, the health care provider or emergency room may treat the child even if written consent is absent. If the health care provider requests consent, the resource parent should contact the assigned social worker. The social worker shall make every effort to obtain consent from the parent or legal guardian unless there is a court-ordered reason not to do so, or if the parents' rights have been terminated. If resource parents or the hospital need to reach someone from CFSA, they can call the Health Services Clinical on-call line at (202) 498-8456.

Further Information

- ▶ Centers for Disease Control and Prevention
<http://www.cdc.gov/ncbddd/childdevelopment/>
- ▶ Immunization Schedules
<http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>
- ▶ Developmental Issues for Young Children in Foster Care
<http://pediatrics.aappublications.org/content/106/5/1145>
- ▶ Child and Adolescent Functional Assessment Scale (CAFAS)
<http://www.mhs.com/product.aspx?gr=cli&prod=cafes&id=overview>
- ▶ Preschool and Early Childhood Functional Assessment Scale (PECFAS)
<http://www.mhs.com/product.aspx?gr=cli&prod=pecfas&id=overview>
- ▶ CFSA Policy on Youth Bullying Prevention
https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/Program-Youth_Bullying_Prevention_020114.pdf
- ▶ Youth Personal Allowance
<https://cfsa.dc.gov/publication/program-youth-personal-allowance>

Chapter 9: Reasonable and Prudent Parenting

Children in foster care sometimes miss out on participating in everyday activities, such as sleeping over at a friend’s house, attending a school field trip or playing on a sports team because of real and perceived limitations, rules and approval processes of the child welfare system. A federal law was passed in 2014, to improve opportunities for children and youth in foster care to engage in activities along with their classmates and peers not in foster care. This law requires that child welfare agencies implement the “reasonable and prudent parent standard” also known as the RPP standard. This chapter provides an overview of how the RPP standard works.

Can I go to Six Flags?



Can I go to a sleepover?



Can I play on the football team?



Federal and District Law

In 2014, the federal government passed the Preventing Sex Trafficking and Strengthening Families Act (PL 113). The law is a little complicated because it addresses multiple issues. For purposes of this chapter, CFSA is interested in one specific clause that requires state child welfare agencies to empower resource parents to apply a “reasonable and prudent parent standard” when making decisions for children in their care. To ensure compliance with this clause, the District also passed the [Supporting Normalcy, Empowering Foster Children, and Encouraging Placement with Siblings Amendment Act of 2016 \(DC Law 21-160\)](#).¹⁶

What does this legislation and language have to do with resource parents?

Taking on the role of caring for another person’s child is no easy task under any circumstances, but child welfare rules can make it harder when they limit resource parents’ ability to make everyday decisions. At the same time, children miss out when rules that are meant to protect safety are so restrictive that they prevent normal activities. The intent of RPP is to “normalize” life for children in care.

A resource parent may make reasonable and prudent decisions when determining whether to allow a child/youth in care to participate in extracurricular, enrichment, cultural and social activities. But what exactly is considered “reasonable and prudent”?

¹⁶ See TITLE V. Health and Human Services, Subtitle K. Supporting Normalcy, Empowering Foster Children, and Encouraging Placement with Siblings, page 91.

Key Definitions

- ✓ **The reasonable and prudent parent standard** – Careful and sensible decisions about a child’s participation in extracurricular, enrichment, cultural and social activities that maintain the child’s health, safety and normalcy and support the child’s emotional and developmental growth.
- ✓ **Age- or developmentally-appropriate** – What children are able to do cognitively, physically, and emotionally at a certain age. The federal definition for age-appropriate has two parts: the first part is a general definition that applies to specific ages or age groups (e.g., it’s not age-appropriate for children under age 16 in the District of Columbia to take driver’s education classes). The second part applies to a specific child’s cognitive, emotional, physical, and behavioral capacities. Of course, not all children develop at the same rate so there is often a range of abilities that are considered appropriate. Please consider both the child’s age and the child’s individual capacities when making your decisions about the appropriateness of activities.
- ✓ **Normalcy** – The ability of the child or youth in the foster care system to participate in age- and developmentally-appropriate academic, social cultural and enrichment activities that support health, well being, development and happiness. Normalcy ensures that a child’s range of experiences in foster care is typical of the range of experiences for any child of the same age.

Decision-Making within the Context of Shared Parenting

Both resource parents and the birth parents have rights and responsibilities for being actively involved in the child’s life and activities. Even though resource parents are the main decision-makers for daily activities, it’s important to include birth parents in decisions whenever possible appropriate, or required and – in particular – when the goal is reunification. When you and the birth parent are actively engaged in shared parenting, these decision-points can be easier.

As discussed in Chapter 4, shared parenting is an active, supportive relationship between birth parents and resource providers. It is a team approach that emphasizes listening, learning, sharing information, collaborating and making joint decisions. Particularly when a child is newly placed in the resource home, consultation with biological parents can be key to understanding the child.

While shared parenting is critical to engaging biological parents in decision-making, the ultimate determination of a child’s participation in most day-to-day activities resides with you as the resource provider, with the support of CFSA as needed.

Family Connections

In some cases, the birth parent may not be available for shared parenting conversations but maintaining meaningful connections with other immediate and extended family members can be an important bridge for the child in a time of transition. Talk to the child’s social worker about how you can best support their wishes to maintain contact with relatives, friends, or other supports who were part of their lives before they came into your home. Perhaps every Sunday was dinner at Grandma’s house, or there were regular sleepovers with cousins or holiday get-togethers. Auntie Jean may be keenly aware of the child’s favorite activities, foods, or bedtime routines. Establishing a relationship with other family members can assist you in providing the best care you can for the child in your home.

Considerations for Decision-Making

Resource parents have to continually weigh decisions against many factors, including each individual child's needs, abilities and maturity level. When making decisions based on the RPP standard, you can use the questions below as a guide. If you are unsure about whether you have the power or need help deciding, you can always contact the social worker or guardian *ad litem* (GAL). And where appropriate, get the input of the child's birth parent. Remember, resource parents have a team to consult when needed.



Applying the RPP Standard

Effective application of the RPP standard is based on your familiarity with the child. Communication with the case management team and the birth parent in particular informs the application of the RPP standard. You are encouraged to consult the child's assigned social worker or your foster parent support worker whenever you have a newly placed child or otherwise feel that you are not comfortable or not prepared to make an informed decision.

The RPP standard involves decision-making based on:

- ▶ Limitations and prohibitions contained in the child's case plan and court orders.
- ▶ The birth parent's previously stated preferences for, or objections to, particular types of activities.
- ▶ The resource provider's understanding of the child's family, culture, needs, and interests.
- ▶ The child's age, maturity, and developmental level, behavioral history and any developmental challenges.
- ▶ The child's mental and physical health, including any medication regimen.
- ▶ Any potential risk to the child when participating in the proposed activity (e.g., level of appropriate supervision).
- ▶ The safety and security of the environment where the activity is to take place.
- ▶ Accessibility of the child to the resource provider in case of emergency or change of plans.

NOTE: Under District law, resource providers will not be held liable for any civil damages resulting from the application or the failure to apply the RPP standard, except in cases constituting gross negligence.

SAMPLE QUESTIONS TO ASK YOURSELF

- ▶ Will the event enhance the child’s social, emotional or developmental well being and growth?
- ▶ Do I have the authority to make this decision or do the biological parents have the authority?
- ▶ Will the activity violate a court order or conflict with a safety plan, case plan or treatment plan?
- ▶ Is the event age-appropriate and developmentally appropriate?
- ▶ Do I know the children well enough to make reasonable and prudent decisions for them?
- ▶ Is the activity risky or dangerous?
- ▶ Does the child have any health issues that might make it unsafe to participate?
- ▶ Is the child able to tell others how to help if a medical issue occurs? If not, can I provide a plan or instructions to an adult chaperone?
- ▶ Are there any behaviors or episodes in the child’s history (i.e., running away, truancy) that might be triggered by this activity?
- ▶ Could the child participate if I made certain that appropriate precautions were in place?
- ▶ Does the child know who to call in case of an emergency?
- ▶ Will the activity interfere with visits with siblings or family or any other appointment?
- ▶ How will the child feel if I say yes? If I say no?
- ▶ Does the child have any concerns about the activity?
- ▶ Will permission slips be needed from CFSA or a private agency for making the decision?
- ▶ Will the child’s classmates or peers participate in this activity?
- ▶ If this were my biological child, would I allow it?
- ▶ If appropriate, have I discussed the event with the child’s social worker?
- ▶ If appropriate, have I discussed the activity with the child’s biological parents?

Can I go camping overnight?



Can I have a pet?






Can I get a learner's permit?



Scenarios

The RPP standard does not provide a definitive answer for every situation because every situation and every child is unique. Rather, the RPP standard helps guide decision making. Scenarios below shed light on the decision-making process.

	<p>ALLOWANCE</p> <p><i>The youth in my care is refusing to do her chores. Can I withhold allowance from her?</i></p> <p>CFSA’s policy provides guidance: A resource parent shall not suspend or withhold the youth’s personal allowance as a method of punishment or discipline. While there are instances where resource parents might suspend an allowance as a consequence for inappropriate behavior, resource parents will need to document their reasons and share it with the social worker. When this occurs, the resource parent is expected to put the money aside for later use for the youth as detailed in the policy. An allowance log is recommended.</p>
	<p>BABYSITTERS</p> <p><i>I have a night out planned for my birthday. My teenage neighbor has agreed to babysit the child in my care, but the teenager hasn’t had a background check. Is she allowed to babysit for me?</i></p> <p>Indeed, yes. A trusted babysitter must be at least 16 years old and familiar to the resource parent through interactions and experience. But not every babysitter needs a background check, especially for a short-term activity. If resource parents are relying on a substitute caregiver over a longer period of time, a background check will be necessary. Check CFSA’s policy on Supervision and Self-Care of Children in Foster Care.</p>
	<p>HAIR CUT</p> <p><i>The child in my care wants a design on his head. Can I give him permission for that?</i></p> <p>Resource parents take children for routine trims, shape-ups and haircuts. There should be a discussion with the child’s birth parents about hair in two general circumstances: If there is a religious or cultural reason for maintaining a particular hairstyle or if the child wants a dramatic change such as color, perm or design. Resource parents should imagine themselves in the position of the biological parents. Would they feel “betrayed” or “violated” if a resource parent made a significant hairstyle decision for their child? Communication between the birth parent and resource parent can help avoid unnecessary surprises and conflicts.</p>



OUT OF TOWN TRAVEL

Can I take my foster child on vacation for spring break if it conflicts with a scheduled birth parent visit?

Generally, it is not a good idea to cancel a scheduled birth parent visit. Yet, there are instances when rescheduling a visit to accommodate another activity makes sense. Not going on vacation or leaving a foster child in respite care while the rest of the family travels are not ideal alternatives. Resource parents or the social worker could have a conversation about rescheduling the visit or planning an extended visit before or after the trip. As long as the travel policy is followed, there are certainly reasons that working out a compromise is in the best interest of the child.



CHANGING SCHOOLS

The child in my home attends a school that is in DC, but we live in Maryland. Can I enroll him in the school near my house?

In the past, foster parents in Maryland routinely moved their children into the school in their neighborhood. And intuitively, that seemed reasonable. However, federal law (42 USC § 675(G)) requires that a plan to ensure the educational stability of children in foster care is in place. This includes ensuring that the child remains in the school in which the child is enrolled at the time of each placement unless that school is not in the best interest of the child. RPP does not override those requirements and give the foster parent decision-making authority to change a school placement. National research has shown that children may suffer when they change schools. They can fall behind, have to quit a team or extracurricular activity or lose contact with friends, teachers, etc. Based on this research and federal requirements, CFSA has revised the policy and practice on school changes. Changing schools – for proximity reasons or otherwise – should not occur without the team discussing the child’s best interest. This discussion should include the birth parent, especially if the parents have retained educational decision-making rights. This could mean that resource parents may be asked to transport further than expected, so they need to make their limitations clear when called for a placement. In some cases, transportation can be provided to maintain educational stability. For guidance, resource parents can call the CFSA educational specialist in the Well Being Administration.



PERMISSION, CONSENT AND RELEASE FORMS

I know I can sign school field trip forms, but what about a release form for a rock climbing wall?

Safety considerations are primary for any activity that might have the potential for serious harm of a child. If a reasonable person would consider an activity high-risk or dangerous, such as skydiving, and when the parent's rights are intact, resource parents or the social worker must inform the birth parent and request their signed consent. Indoor rock climbing, laser tag or a "bouncy house" are common activities for schools, scouts and birthday parties and would be covered by RPP; they are also activities that the resource parent could sign the release form for.

Frequently Asked Questions – RPP



What rights do the birth parents keep? Children in CFSA's custody are under the jurisdiction of the Family Division of the DC Superior Court, which has ultimate decision-making authority over most issues. CFSA and the resource parent have decision-making authority for most day-to-day decisions. But if a birth parent's rights have not been terminated, the birth parent has "residual parental rights and responsibilities." Those rights include but are not limited to the right of visitation (which is subject to court order); consent to adoption; determination of religious affiliation; and the responsibility for support.¹⁷ Generally, the birth parents also keep the power for educational decision-making, medical decision-making (other than routine medical care) and consent for the child to be prescribed psychotropic medications.

When do birth parents need to be informed and when do they need to give permission? If resource parents have established a relationship with the birth parent, they may inform a birth parent about a child's activities and consent if needed. Otherwise, the social worker is responsible for communicating with the birth parent for consent. Permission from the birth parent is not necessary for every activity, but the following activities do require permission and must not be in violation of a court order:

- ▶ Activities that are high risk, such as sky diving, hunting or parachuting
- ▶ Activities that may affect the child's physical health
- ▶ Activities that include more than two nights overnight or over 100 miles from the District of Columbia metropolitan area

What if the birth parents disagree with my decision? To avoid this type of disagreement, CFSA wants to reinforce the importance of sharing decisions and establishing rapport with the birth parents. Yet, the agency recognizes that not all resource parents and birth parents will have established an ideal rapport for shared decision-making and co-parenting. If a decision for a child's activity requires the birth parent's permission, then naturally, resource parents do not have the right to decide on the child's participation in an activity. If resource parents have the right to decide and the birth parent

¹⁷ <http://dccode.org/simple/sections/16-2301.html>

Frequently Asked Questions – RPP



disagrees, it may come down to the social worker or GAL negotiating the decision or a compromise based on the child’s best interests. If the birth parent is unavailable, it is always appropriate to consult with the child’s social worker.

Who should I check in with when I am unsure about making a decision? Remember that resource parents have a team to consult when needed – the CFSA or private agency social worker, or other support worker, GAL, the parent’s attorney, therapist and birth parent. Resource parents can also look beyond the team to “experts” like the CFSA ombudsman who can assist with questions about what policy allows; how to navigate child welfare; and limits on roles supported by rights and responsibilities.

Can I be held liable for my decisions? Resource parents are expected to use thoughtful and careful decision-making and to include the birth parent whenever possible. Under DC Code §4-1303.03f (related to the Reasonable and Prudent Parent standard), neither CFSA staff, resource parents, nor congregate care staff will be held liable for any civil damages resulting from the application or the failure to apply the RPP standard, except in cases constituting gross negligence.

Further Information

- ▶ Federal Law - Preventing Sex Trafficking and Strengthening Families Act
<https://www.congress.gov/113/plaws/publ183/PLAW-113publ183.pdf>
- ▶ Preventing Sex Trafficking and Strengthening Families Act (H.R. 4980) Factsheet
<http://www.childrensdefense.org/library/data/fact-sheet-on-hr-4980.pdf>
- ▶ Implementing the Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183) To Benefit Children and Youth
<http://www.childrensdefense.org/library/data/implementing-the-preventing.pdf>
- ▶ District of Columbia Reasonable and Prudent Parent Standard (DC Code §4-1303.03f)
<https://code.dccouncil.us/dc/council/code/sections/4-1303.03f.html>
- ▶ Promoting Normalcy for Children and Youth in Foster Care
http://www.jlc.org/sites/default/files/publication_pdfs/JLC-NormalcyGuide-2015FINAL.pdf
- ▶ Promoting Well Being Through the Reasonable and Prudent Parent Standard: A Guide for States Implementing the Preventing Sex Trafficking and Strengthening Families Act (H.R.4980)
<http://www.cssp.org/policy/2014/A-GUIDE-FOR-STATES-IMPLEMENTING-THE-PREVENTING-SEX-TRAFFICKING-AND-STRENGTHENING-FAMILIES-ACT-HR-4980.pdf>

Chapter 10: Resource Parent Self-Care

When you prepare to welcome a child into your home, you should consider each activity you are currently involved with, any other obligations you have, and of course the needs of your own family members. Each of these factors must be considered in terms of time. How much time does it take you to get dressed, make breakfast, get the children to school, drive the children to afterschool activities, and still participate in court hearings and team meetings? These important considerations are the first steps towards making sure that you schedule time for you while you are scheduling for others. In other words, resource parents must take their own self-care into account while taking care of a child in foster care.

Well Being

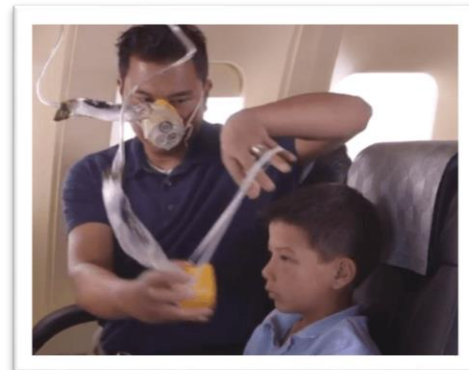
While we often feel guilty for taking time for ourselves when there are so many things that we have to get done, we must remember the oxygen mask theory. You must take care of yourself first, before you can be of any help to others. When you drain yourself by exerting all your effort on behalf of others, you may diminish your own resources in the process.

Part of self-care is recognizing that even with training, you may experience second-hand trauma while you are helping the children in your home with a different heartbreaking story cope with pain. When you naturally become attached to a child, and then that child returns home to their parents or another caregiver, you may suddenly feel a sense of loss and find yourself going through a grieving process. Simply having children come and go can wear you down. These are natural experiences, but you must also prepare for them and be sure to take precautions so you have your own support, self-soothing techniques, and sufficient energy to bounce back when necessary.

The assigned social worker or support worker can listen and be a powerful help to resource parents. There are also training opportunities to inform resource parents about what to expect when they realize that they are grieving the loss of a child. These trainings can be part of your in-service education or you can seek out support from your physician or faith-based community. However, you do it, you must take care of yourself and keep yourself physically, emotionally, and spiritually well so you can continue your work with the children in your home. The following steps can help protect you from feeling overwhelmed, exhausted, discouraged, and affected by another's trauma.

Respite

Even when you have planned carefully for "you time," there are going to be days when you need respite. Respite care is designed to provide resource parents with temporary, short-term, planned or unplanned relief from their ongoing care arrangement. Licensed, approved respite care providers can care for children for a few hours, a night, or even a week. The service may be



"Place the oxygen mask on yourself first before helping small children or others who may need your assistance."

agency-arranged (CFSA or private) but resource parents can also directly arrange for respite care through the back-up caregiver they identified when they were licensed.

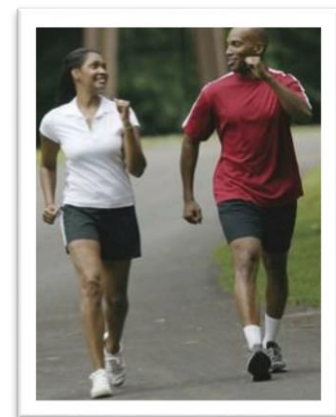
Both the Mockingbird Family Model Project and Family Connections provide respite services for resource parents in the District of Columbia who are assigned to a particular constellation or cluster of foster homes. Please ask your assigned support worker about the details of these respite programs.

NOTE: *Respite care does not mean a placement change. The plan is for the child to go back to the designated resource parents after the respite care period.*

If a support worker or social worker is not responding to your requests for respite, please follow the chain of command and request assistance from the supervisor. Again, resource parents may also reach out to the ombudsman if you feel that your requests are not being appropriately handled or if you are uncomfortable working through the chain of command.

Diet and Exercise

A busy schedule may sometimes mean a lot of shortcuts, e.g., fast food in exchange for home-cooked sit-down meals. Whatever your normal diet, making meal time a ritual is important for children’s sense of structure, the well being of the body, the digestive system, and the spirit. It doesn’t matter whether you are a meat eater or a vegetarian – just pay attention to your body and make sure that the food you eat is providing energy, not draining it. Always consult your physician before making any radical dietary changes.



In addition to taking time for sit-down meals, you may feel that exercise is just too much extra time. But it doesn’t have to be. Ask your entire family, including the child in your care, to walk around the block after dinner, or share a dance video and “get wild” for a few minutes. Remember that simple stretching is one of the best ways to stay limber and it makes staying in good shape much easier.



Networking and Support Groups

In addition to exercise, diet, even meditation, it is helpful to have a group of people who are “go-to” friends when you need a listening ear or if you need to focus on something other than daily life. These days, many adults have a lot of friends who they interact with “online” every day but struggle to find time to meet in-person for lunch or coffee. Having strong social ties is good for our health and happiness. You may decide to get in touch with resource parent support groups through one of the foster parent advocacy organizations. Or you might consider a weekly community book club, knitting club, or

a pick-up basketball game. If you are part of a faith-based organization like a church, temple, or mosque, you might join an existing support group for parents or start your own. Even if the group has nothing to do with fostering, just participating in a group can refresh your spirit and bring new ideas for you while caring for others.

“Self-care is not selfish. You cannot serve from an empty vessel.”

— Eleanor Brown

Frequently Asked Questions – Resource Parent Self-Care



Are there resource parent groups that I can contact for support or just to talk with others?

Absolutely. The phone number for the Foster and Adoptive Parent Advocacy Center (FAPAC) is (202) 269-9441. The phone number for the DC Metropolitan Foster and Adoptive Parent Association (DCMFAPA) is (202) 299-0900. The phone number for DC127, a faith-based organization, is (202) 670-1145.

Further Information

- ▶ Strengthening Families: Tips for Self-Care of Resource Parents
<http://www.cssp.org/reform/strengtheningfamilies/practice/body/Self-Care-for-Foster-Parents.pdf>
- ▶ Secondary Traumatic Stress
<http://www.nctsn.org/resources/topics/secondary-traumatic-stress>
- ▶ 10 Stress Management Tips for Foster Parents
<http://foster2forever.com/2011/08/stress-management-tips.html>

Chapter 11: Relationships with Resource Parents

Although contractual agreements for resource parents may differ between the private agency and the DC Child and Family Services Agency (CFSA), the bottom-line agreement is for all of us to share a mutual trust and respect. Second to that, we need to commit ourselves to cooperative planning and team-based strategies for ensuring that each child's stay in foster care is as short as possible. All of this requires courteous and excellent ongoing communication. Information-sharing is a key component of communication, both of which are key vehicles for developing and sustaining the teaming partnership. Social workers are expected to respond to resource parents within 24 hours or the next business day. If resource parents don't get a call back, they should feel free to call again or to reach out to the supervisor.

Roles and Responsibilities

Communication is obviously a two-way street. Both the social worker and the resource parent have different information to share. The following table offers some examples of important information.

Social Worker	Resource Parent
Initial information from the Placement Passport Packet, including the reason the child is in foster care, medical and educational records, Medicaid card, special needs, etc.	All required record keeping information, such as report cards, updates on developmental milestones, achievements, awards, etc.; any concerns of a non-emergency nature, including interventions that have been helpful to the child
Any information related to a child's case plan, permanency goal, progress, therapy, diagnosis, etc. that can support their ability to care for the child	Any service concerns or suggestions that will enhance the resource parent's ability to provide quality care for the child in their home
Ongoing and up-to-date information related to changes in agency structure, service agreements, federal and/or District laws, rules, regulations, policy and/or procedures directly impacting the foster care program	Any concerns or unusual changes related to a child's behavior, development, therapy, health or non-routine care, educational progress, safety and/or well being
How to access supportive services, including but not limited to respite care, day care, transportation assistance, community resources, educational services, mental health crisis services, resource parent support groups, etc.	Any information regarding mental health treatments that would not have otherwise been shared with the social worker and that may help to ensure that the treatment needs of the child are being met
Updated information relating to payment criteria for support of the child in care, such as board and care payments, clothing allowances and any supplemental expenditures made to meet the child's needs	Any plans for travel, including overnight stays and/or trips of more than 100 miles from the DC metropolitan area
Information related to court dates and permanency hearings; any other information that	Any changes in the resource parents' status that may impact the child in their care, including but

Social Worker	Resource Parent
might help resource parents to navigate the judicial system	not limited to changes in residence, marital status, etc.
Dietary preferences, such as being a vegetarian; allergies, such as peanuts; restrictions, such as being Halal or Kosher	Dietary flexibility, preferences or restrictions
Specific expectations for the resource parents' responsibilities, including transporting children to school and to doctor's appointments, engaging in a child's extracurricular and school activities, and performing other daily care-giving responsibilities	Any changes that impact the resource parents' licensing status, including but not limited to finances, ability to pay utilities, health, employment, additional members of the household, any recent criminal charges or investigations, etc.

Quality Service Reviews and Focus Groups

On a monthly basis, CFSA conducts quality service reviews (QSR) of randomly selected foster care cases, as well as cases where children are remaining at home and receiving in-home services. The goal of each QSR is to make sure that children, families, and resource parents are receiving the services and supports they need to bring children home, or to help children achieve another permanency goal. If you are contacted by a CFSA staff member to schedule a QSR interview in your home, we sincerely hope you will agree to participate. While no one is required to participate, it is exceedingly helpful to have your first-hand information for improving CFSA's practice. For example, you can share impressions on the child's daily behavior, school progress, happy days and sad days, and important observations about medications (e.g., whether there are side effects that need to be addressed). Ultimately, we hope you will participate in the QSR process to give us your personal feedback on the child welfare system, how we are doing, and how we can improve.

Another area of assistance is participation in focus groups to help us determine certain patterns in child welfare practice, e.g., where there are gaps in services, particularly regarding placements and placement matching. We may be looking for special characteristics, e.g., resource parents who have long-term experience with older youth, sibling groups, or children diagnosed with special medical needs. Just like the QSR process, there is no obligation to participate but we certainly hope that you will agree to participate. With your direct feedback, we have a much better chance at improving everything we do for the children and for you as a resource parent.

Rights and Responsibilities for Foster Parents

Resource parents, private agencies, councilmembers, stakeholders, child welfare advocates, and CFSA staff worked together as a team to draft the Foster Parent Bill of Rights and Responsibilities, a DC law that reinforces both the resource parent's rights and responsibilities. It covers (at a minimum) the following five major categories:

1. **Fair Treatment** – You are a full and valued member of the child's team and deserve the right to be treated with dignity and respect. You also have the right to speak up, voice your opinions, and get a prompt, unbiased response.

2. **Information** – You have the right to receive timely, accurate, and necessary information regarding the child in your care, including medical records and the child’s permanency goal. If CFSA decides to move the child from your home (e.g., when a relative is identified as a permanency resource), we must give you at least 10 days’ advance notice, unless the removal is necessary due to an emergency.
3. **Teaming** – You have the right to accept or decline placement of a child in your home, or to request removal of a child from your home without fear of negative consequences. The social worker and service team will include you in case planning, permanency planning, and decision-making for the child in your care. As a team member, you will receive timely notification of court hearings and the right to be heard at most hearings (exceptions might include hearings specific to confidential information relayed by the birth parents).
4. **Resources and Supports** – You have the right to comprehensive pre-service training to prepare you for the challenges and benefits of fostering a child in your home. You also have the right to receive timely and accurate board payments. CFSA will provide services that help the child adjust to your home, as well as transition out of your home. CFSA will also provide prompt responses to any crises.
5. **Concerns and Complaints** – If you are unhappy about child welfare decisions or actions taken, you have the right to voice your concerns. While we recommend that you first discuss your concerns with the assigned social worker, if you feel that the situation has not been resolved or addressed, you may also contact the CFSA ombudsman at (202) 727-2111 who will review the situation, facilitate discussions, and help to resolve any issues between parties. You also have the right to request a Fair Hearing (e.g., adoption or guardianship subsidy, or removal of a child from your home). For information on how and when to request a fair hearing, go to the CFSA website at www.cfsa.dc.gov and click on the “Families” tab, and then click on “Be Heard.”

In addition to your rights, there are also responsibilities expected of you as a resource parent. The following six categories are included as expectations for a resource parent’s responsibilities:

1. **Homelike Experience** – You will provide a safe, homelike experience for each child in your care, including daily essentials for health, comfort, and good grooming. You will also include the child in family meals and household activities (including chores) and provide parental supervision and guidance as you would with your own biological children. Every child should feel nurtured and cared for.
2. **Discipline** – It is important that you set clear goals, boundaries, and expectations for behavior for any child in your care. Keep in mind that even corrections to poor behavior can be accomplished in positive ways. You may not use physical discipline under any circumstance!
3. **Healthy Child Development and Well Being** – You can communicate with the social worker regarding the status of the child’s mental, physical, and dental care. You are also responsible for respecting the child’s culture and religion, and promoting self-esteem and self-confidence. You should also encourage the child’s participation in extracurricular activities at school and in the community (as appropriate).

4. **Safe Substitute Care** – If you are employed outside the home or are regularly away from home for any reason, you must have a plan for substitute care and supervision of children and youth in your care. When you select a backup caregiver or babysitter, you should be confident that the person is prepared to take good care of the children or youth. The only babysitters you can use must be age 16 or older, and only for a reasonable amount of time, based on the child’s age and stage of development.
5. **Teaming** – As a valued member of the service team, you participate in case planning, permanency planning, case reviews, and decision-making for the child in your home. You coordinate regularly with the child’s social worker to assess the child’s strengths and needs and to aid in implementing his/her case plan. You team with service providers, when appropriate, to ensure that services are meeting the child’s needs.
6. **Confidentiality, Communication, Licensure** – You will maintain the confidentiality of information about children and families at all times. Generally, you should limit sharing of information to people on the service team. You should also notify CFSA immediately regarding any change in your employment, child care arrangements, health status, and any circumstances that could affect the overall stability of your living situation or the placement. You must notify CFSA immediately of any alleged or actual criminal charges, investigations, or findings concerning you or any member of your household. In addition, you must notify the social worker before taking a child/youth in your care on any proposed overnight trip of more than 100 miles from the District.

Mandated Reporter Training

Resource parents are legally required to report any suspected child abuse or neglect to the CFSA Hotline at (202) 671-7723. Resource parents must also immediately inform the social worker of any suspicions, concerns, and evidence. To provide you with more information on mandated reporting, we encourage you to consider taking the free online mandated reporter training at www.dc.mandatedreporter.org.

Definition of Abuse

DC Official Code §16-2301(23)(a)(b), defines the meaning of abuse and neglect:

- ▶ Infliction of physical or mental injury upon a child
- ▶ Sexual abuse or exploitation of a child
- ▶ Negligent treatment or maltreatment of a child

***NOTE:** When used in reference to a child, abuse does not include physical discipline administered by a parent, guardian, or custodian to his or her child provided that the discipline is reasonable in manner, moderate in degree, and otherwise does not constitute cruelty. While not considered abuse, physical discipline is not allowed for any child placed in the resource parents’ home by CFSA or a private agency. The resource parents’ foster care license and contracts with the agency prohibit the use of physical discipline on children in care.*

Similarly, the term “discipline” does not include the following abuses:

- ▶ Burning, biting or cutting a child

- ▶ Striking a child with a closed fist
- ▶ Inflicting injury to a child by shaking, kicking or throwing a child
- ▶ Non-accidental injury to a child younger than 18 months
- ▶ Interfering with a child’s breathing
- ▶ Threatening a child with a dangerous weapon or using such a weapon on a child

The above list is not intended to be exclusive or exhaustive, but it is illustrative of examples for unacceptable discipline.

Definition of Neglect

Pursuant to DC Official Code § 16-2301(9)(A), a neglected child is one who fits into one or more of the following categories:

1. The child’s parent, guardian, or custodian has abandoned or abused the child, or has failed to make reasonable efforts to prevent the infliction of abuse upon the child from another person. For purposes of this subparagraph, the term “reasonable efforts” includes filing a petition for civil protection from intra-family violence pursuant to DC Official Code § 16-1003.
2. The child is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his or her physical, mental or emotional health, and the deprivation is not due to the lack of financial means of his or her parent, guardian or custodian. The parent, guardian, or custodian is unable to discharge his or her responsibilities to and for the child because of incarceration, hospitalization, or other physical or mental incapacity.
3. The parent, guardian, or custodian refuses or is unable to assume responsibility for the child's care, control, or subsistence and the person or institution which is providing for the child states an intention to discontinue such care.
4. The child is in imminent danger of being abused and another child living in the same household or under the care of the same parent, guardian, or custodian has been abused.
5. The child has received negligent treatment or maltreatment from his or her parent, guardian, or custodian.
6. The child has resided in a hospital located in the District of Columbia for at least 10 calendar days following birth, despite a medical determination that he or she is ready for discharge, and the parent, guardian, or custodian of the child has not taken any action or made any effort to contact or maintain a relationship with the child.

NOTE: *Such a child is frequently referred to as a “boarder baby.”*

7. The child is born addicted or dependent on a controlled substance or has a significant presence of a controlled substance in his or her system at birth. There is a controlled substance found in the child’s body, and this situation is a direct and foreseeable consequence of the acts or omissions of the child’s parent, guardian, or custodian.
8. The child is regularly exposed to illegal drug-related activity in the home.

Institutional Investigations

Once resource parents are familiar with the above definitions, it is crucial that they make sure that their method of discipline and parenting skills stay within the boundaries of these definitions. It does happen sometimes that a resource parent is investigated for abuse. This is called an “institutional investigation” (even though, technically, the resource parents’ home is not an institution).

The process for the investigation of a resource parent for alleged abuse or neglect is very similar to that of a birth parent. If a person believes that a child in a resource parent’s home has in some way been abused or neglected, the individual should report the allegation to the CFSA Hotline. The Hotline staff will make a determination as to whether the report needs to be formally investigated, or if there are supportive resources that are needed. If a formal investigation occurs, the investigative social worker will interview the child outside of the resource parent’s presence. The resource parent will also be interviewed, along with the social worker, school personnel, and other family members. A meeting will take place, including those responsible for licensing the resource parent’s home.

***NOTE:** The child will not automatically be removed from a DC foster home during an institutional investigation unless there is imminent concern for the child’s safety. No other child, however, will be placed in the resource parent’s home until the investigation is completed and the resource parent is cleared of any wrong-doing. The Code of Maryland Regulations (COMAR) may have different requirements. If resource parents are licensed by a private agency in Maryland, they should ask the child’s social worker about the investigation practices in their jurisdiction.*

If CFSA substantiates an allegation against a resource parent, there is a chance that the resource parent will lose the foster home license. In addition, the resource parent’s name may be placed on the Child Protection Register. As a resource parent, you have the right to appeal these decisions. See the information below under Fair Hearings.

***NOTE:** Institutional abuse and neglect investigations involving allegations of physical or mental injury, sexual abuse or exploitation, negligent or maltreatment of a child by any individual (e.g., resource parent, guardian, custodian) responsible for a child’s out-of-home care.*

Reminder: It is always a good idea for resource parents to notify the social worker if the child in their care gets a mark or bruise or any significant injury. These injuries may occur as the result of a natural childhood accident, such as slipping off the jungle gym or falling off a tricycle. When such an incident occurs, contact the social worker to explain what happened and they will complete an “unusual incident report” form, so that the circumstances surrounding the injury are documented.

Ombudsman

There may be times when resource parents have ideas for improving the foster care system, or ideas to share from other jurisdictions. These are excellent reasons for reaching out to the ombudsman. When you share suggestions or even complaints, the ombudsman can pass this information onto CFSA’s leadership for discussion and can recommend changes. If concerns,

conflicts or other problems are systemic or have not been satisfactorily resolved, and resource parents really feel that communication efforts have exhausted themselves, they should feel free to contact the CFSA ombudsman at (202) 727-2111. This is a very important resource for resource parents when other efforts are not successful, or they do not feel comfortable using the chain of command.¹⁸

The ombudsman serves as CFSA's impartial liaison for the resource parents seeking internal resolutions that promote child safety and well-being. The ombudsman will review your complaints, inquiries and concerns and will formally prepare CFSA's recommendation or response to you when necessary. The ombudsman may facilitate meetings to identify recommendations in adherence with CFSA policies, procedures, DC Municipal Regulations, and local and federal laws. In addition, the ombudsman will try to work with all parties to provide support, mediation and alternate dispute resolution as appropriate. If the situation is particularly serious or complex, the ombudsman may elevate your concerns to other members of the senior management team for resolution.

Whether a private agency or CFSA has licensed the resource parents, it is important for CFSA and the private agency to be able to depend on the resource parents as much as the child in care does. Without resource parents, the child welfare system cannot provide temporary safe havens some children need. CFSA wants to make every effort possible to understand resource parent concerns and to resolve them.

Fair Hearings

Both federal and District laws require that CFSA ensures a fair hearing for resource parents depending upon the circumstances. For example, resource parents can request a fair hearing to appeal a CFSA decision to deny or suspend their license to be a resource parent. Resource parents also have the right to appeal an agency decision to move the child to another home. At the fair hearing, a hearing examiner will listen to the resource parents' case and decide without bias.

As noted earlier, Child Protective Services (CPS) investigations do occur in resource homes and a resource parent can request a fair hearing if their name is placed in the Child Protection Register. Reading CFSA's Fair Hearing policy provides more information about the process for each type of fair hearing request, but the basic steps are to file a Request for Fair Hearing Form with the CFSA Office of Fair Hearings and Appeals as follows:

- ▶ For a licensing issue, resource parents should file a request within 30 days of the licensing action.
- ▶ For a placement issue, resource parents should file the request within 30 days of the placement change notification.

¹⁸ The ombudsman is a CFSA staff person who is dedicated to hearing, addressing and facilitating resolution of complaints, concerns and complex issues that may not otherwise resolved directly with a social worker or other staff within CFSA or a private agency.

- ▶ If resource parents have received a notification of a substantiated or inconclusive finding of abuse or neglect, the notice will include information on requesting a fair hearing.

Be aware that the time restrictions noted above are firm, so act quickly to request a hearing.

NOTE: Resource parents are not entitled to a fair hearing for adverse decisions regarding temporary kinship licenses. Fair hearings only apply to applicants who are seeking a foster home license or to a licensed resource parent whose license CFSA has decided to deny, modify, or terminate.

Frequently Asked Questions – Relationship with Resource Parents



The social worker assigned to the child in my home is very nice but not very “proactive.” I don’t want to say anything because I have to work with him, but is there a way to share my thoughts anonymously?

CFSA encourages resource parents to share their ideas for improvement with the social worker directly. If it is just too awkward, then resource parents can speak with the supervisor and request that their name be withheld. Supervisors have one-on-one meetings with their staff regularly. The supervisor could share the resource parents’ ideas during supervision. Resource parents can also choose to call the Office of the Ombudsman to give their feedback while keeping their name anonymous.

Is it possible for resource parents to “have a voice” in policy and practice changes?

Yes. There are many opportunities to share the resource parents’ concerns and suggestions, including policy workgroups, interviews, focus groups, and document reviews. This very handbook, for example, was reviewed by several resource parents and other stakeholders. Both private agencies and CFSA need the voice of resource parents to help the agency support resource parents. Resource parents should reach out to the child’s social worker and let them know that they are interested in participating in such opportunities. Resource parents should also feel free to reach out to and participate in activities sponsored by FAPAC and DCMFAPA.

Under what circumstances would I reach out to the ombudsman versus the social worker?

There are no hard and fast rules about whom to contact. The social worker is generally the resource parents’ first contact for questions or when they need assistance in accessing services. The ombudsman may also elevate issues to the attention of the CFSA leadership team (or the appropriate administration). The ombudsman is also a good option if resource parents want to speak to someone who is neutral and can help them figure out next steps. CFSA wants resource parents to feel confident that they can reach out to the ombudsman at any time that they feel that they have not received a satisfactory response after following the chain of command, or if they don’t feel comfortable using the chain of command.

Will I be investigated if I spank a child in my care and she reports me to her social worker?

Yes, you may be investigated. It is important to remember: a resource parent should NEVER use physical discipline. Physical discipline violates the child’s rights and your licensure agreement. Keep in mind that children in foster care may have been physically abused in the past in ways that resource

Frequently Asked Questions – Relationship with Resource Parents



parents may be unaware of. What might seem like good old-fashioned spanking to a resource parent could trigger a traumatic experience for the child. The most important thing to remember is to use positive discipline. You should also reach out to the social worker for assistance for creative ways to discipline a child.

Can I appeal the results of a fair hearing for a licensing decision?

If resource parents disagree with the outcome of the fair hearing, they have the right to file an “exception” with the fair hearing examiner within 10 calendar days of receipt of the decision. If they still do not agree with the exception decision, they may file an appeal with the DC Court of Appeals. The fair hearing coordinator can provide the contact information for requesting that review.

Further Information

- ▶ Communication Between Foster Parents and Social Workers
<http://adoption.about.com/od/fostering/qt/Avoiding-Communication-Problems-Between-Foster-Parents-And-Social-Workers.htm>
- ▶ A Foster Parent’s Perspective – Relating to Social Workers
http://fcni.org/new_site/blog/social-workers-and-foster-parents
- ▶ DC Superior Court Rules Governing Neglect and Abuse Proceedings
<http://www.dccourts.gov/internet/documents/SUPERIOR-COURT-RULES-GOVERNING-NEGLECT-AND-ABUSE-PROCEEDINGS.pdf>
- ▶ CFSA Fair Hearings Regulations
<https://dcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=29-59>
- ▶ CFSA Fair Hearings Policy
<https://cfsa.dc.gov/publication/program-policy-fair-hearings>
- ▶ Mandated Reporter Training
<https://dc.mandatedreporter.org/pages/Welcome.action>

Chapter 12: Resource Parent Payments

No matter how large a heart a resource parent may have, children do not live on love alone. That's why resource parents receive funds for the child's room, food, and general care. These funds are called the board and care payments. The amount paid is a pre-set daily rate based on the U.S. Department of Agriculture's (USDA) cost to raise a child in the urban south.¹⁹ The rates do vary slightly, however, based on the circumstances. For example, rates may be higher if you are caring for a child diagnosed with special needs or multiple physical challenges. The rate is higher if you foster a teen with one or more children of their own. If you want to know more about specific board rates, contact your licensing worker or family support worker.

Board Rates

The board and care payment is expected to cover the following expenses for raising a child:

- ▶ Groceries/meals
- ▶ Toiletries
- ▶ Laundry
- ▶ Transportation
- ▶ Clothing
- ▶ School supplies
- ▶ Hair cuts
- ▶ Birthday and holiday gifts
- ▶ Occasional family fun activities – movies, theme park, family vacation

The board and care payment also includes allowances for older children. CFSA provides you with guidance to ensure that allowances provided to youth in care are reasonable and commensurate with allowances for other children of the same age. We do recommend that you try to avoid differences in allowance amounts between your own biological children and the children in your care. That way, the child in foster care will not feel any "different" and you can help maintain their sense of normalcy in the household. Also, older youth should be involved (as appropriate) in decisions related to allocation of their allowance and monthly foster care payments. For older youth, the board and care payment may also include a cell phone bill and contributions to the Capital Area Asset Builders (CAAB) matched savings program.²⁰

Board Rate Reviews and Adjustments

On an annual basis, CFSA reviews board and care rates, monthly expense allowances and miscellaneous reimbursements such as transportation costs. At the beginning of each fiscal year (October 1), CFSA may adjust the board rates based on any US Department of Agriculture

¹⁹ <https://www.cnpp.usda.gov/sites/default/files/crc2015.pdf>

²⁰ The Capital Area Asset Builders (CAAB) is a local non-profit organization dedicated to empowering low and moderate income residents of the Greater DC area to take control of their finances, increase their savings, and build wealth for the future. CFSA has contracted with CAAB to manage the matched savings program for youth in foster care. For more information, see <http://www.caab.org/en>.

(USDA) annual adjustment so that rates are maintained in a manner consistent with USDA standards. Whenever USDA modifies the annual adjustment, CFSA and the private agency will inform you of these modifications. Again, if you have any questions, please contact your assigned support worker.

Payment Methods and Schedules

Both CFSA and the private agency provide payments on a schedule. Although schedules may differ, all payments are expected to be distributed to resource parents in a reliable and timely fashion. In the event that resource parents have not received a monthly payment on time, they should immediately contact their assigned support person (either at CFSA or the private agency). On the other hand, if they have received overpayment, it is also important that resource parents immediately contact their support person and return the overpayment to CFSA or the private agency. Resource parents should not spend any funds from an overpayment unless they have discussed it with their support worker and received written approval to spend any overpayment funds.

In August 2018, CFSA replaced paper checks with electronic payments via debit card for CFSA foster and kinship parents. CFSA foster parent support workers will deliver a debit card to every CFSA foster and kinship parent currently caring for a child in foster/kinship care. They will also provide all the information and instructions resource parents need to activate and use the card. Contact your support worker for any questions or concerns about this change.

Bed Holds

In the event that a child is absent from a placement for a period of time, CFSA may continue to issue board rate payments based on the guidelines provided in CFSA's policy issuance CFSA-08-12 Bed Hold Payments. For example, CFSA will "hold a bed" for a child or youth who is receiving medical, mental health, or substance abuse treatment in a hospital if the child is expected to be discharged within 30 days. We will also "hold a bed" for a maximum of three days for a child or youth who has run away or is otherwise missing.

If the child is not expected to return to the placement resource, the social worker notifies the CFSA Placement Services Administration (PSA). The payment then ends on the day that the determination to change placement is made.

Demand Payments

Social workers may request demand payments for services that are needed for the immediate safety, permanence, and well being of a child or family. The demand payment process cannot be used for contracted services. Requests for demand payments are subject to supervisory and the Office of the Chief Financial Officer (OCFO) approval. The following services or supports may require a demand payment:

- ▶ Medically necessary payments that are outside of the Medicaid-serviceable area
- ▶ College tuition
- ▶ Graduation expenses (see Administrative Issuance CFSA-11-2 Graduation Expenses)
- ▶ Summer camps

- ▶ Daycare services
- ▶ Out-of-state birth certificates
- ▶ Back payments for utilities and water
- ▶ Security deposits and rent payments for first and last month (See Security Deposits section below.)
- ▶ Respite care
- ▶ Housing-related support for youth and families
- ▶ Application fees for post-transition housing for youth

Reimbursement for Expenses

There will certainly be times when the resource parents' board rates do not cover all expenses. In these cases, expenses may be funded from a source outside of the monthly board payment or you may be reimbursed for certain approved out-of-pocket expenses. CFSA and the private agency consider payment or reimbursement requests for the following types of expenses:

- ▶ Medical and dental care (e.g., if necessary but not covered by Medicaid or available from a Medicaid provider)
- ▶ Clothing needs, beyond the monthly allocation that is included in the board rate. For example, a child arrives at the resource parents' home without sufficient clothing or with no winter coat or warm clothing.
- ▶ Elementary/secondary school expenses (e.g., extracurricular fees, graduation fees)
- ▶ College expenses (e.g., Federal funds may cover part of the cost of college tuition for qualified District youth in the foster care system; fee waivers are typically available for ACT/SAT exams and college applications.)
- ▶ Day care, before or after school care
- ▶ Summer camp
- ▶ Counseling
- ▶ Tutoring

For reimbursements, it is very important that resource parents keep a record of all receipts.

Reimbursement for Property Damage

CFSA accepts and reviews reimbursement requests for damages and loss under the following conditions:

- ▶ Reimbursement requests shall be limited to damage sustained to fixed property (e.g., land, structures, buildings and properties attached to it) including damage to the family home, walls and fixtures.
- ▶ The damage resulted from the foster child's direct act or failure to act.
- ▶ The resource parent exercised adequate supervision and took appropriate precautions considering the child's maturity and behavioral history.

For details on how to request reimbursements, please read CFSA's policy on [Resource Parent Reimbursement for Property Damage](#).

Subsidy Reviews and Adjustments

Subsidy payments for adoptive parents and permanent guardians are reviewed annually based on the finalization date of the guardianship or adoption. Interim reviews may occur whenever there are changes to the foster care board and care rates. A permanent guardian may also request a review based on individual circumstances.

***NOTE:** Disputes related to subsidies are eligible for a fair hearing from a decision to deny, reduce, or terminate a subsidy.*

Income Taxes

As a resource parent, you may have some questions about filing your tax returns. Tax law is complicated and the information here is general information that might be a helpful starting point. You should consult a professional tax adviser or attorney before you file your taxes to review your particular situation.

- ▶ ***Do I have to report my foster care payments as income for tax purposes?*** Generally, foster care payments are not considered income. However, you should consult a tax professional for advice.
- ▶ ***Can I claim my foster child on my tax return?*** That depends. As a resource parent, you may be able to claim a foster child as your dependent. You should consult a tax professional for advice.

Frequently Asked Questions – Resource Parent Payments



Can a guardianship subsidy be transferred from one guardian to another? If a permanent guardian is no longer able to care for the child because of such instances as death or incapacity, the successor guardian may be granted a guardianship subsidy after a motion is filed by the private agency or CFSA and approved by the court to designate a successor guardian. Following the initial guardianship order and completion of the initial Guardianship Subsidy Agreement, any changes to the successor guardianship must be reflected in a modified Guardianship Subsidy Agreement, again approved by the court. More details are outlined in the policy issuance on Permanent Guardianship Disruptions CFSA-06-11.

I enrolled a child in summer camp at the last minute and paid for the camp with my own money. Can I request reimbursement? It is expected that resource parents will plan in advance for summer activities or camps. But in very limited situations where the request was not made up front, reimbursement of camp registration, on a one-time basis and up to \$1,000, may be paid directly to you as the resource parent. The private agency or CFSA social worker can submit the resource parents' receipts to CFSA's Accounts Payable division. You should also include the summer camp brochure or website printout with their receipt.

Frequently Asked Questions – Resource Parent Payments



NOTE: Resource parents are responsible for paying any fees more than \$1,000 unless the child is enrolled in a therapeutic camp. More details are outlined in the policy issuance on Summer Camp Subsidy Program CFSA-14-3.

Further Information

- ▶ Budgeting For Foster Care
<http://www.thefosterparents.com/budgeting-for-foster-parents/>
- ▶ Are We Fostering for the Money?
<http://www.amusingmaralee.com/2014/03/are-we-foster-parenting-for-the-money/>
- ▶ CFSA Youth Clothing Allowance Policy
<https://cfsa.dc.gov/publication/program-youth-clothing-allowance>
- ▶ CFSA Youth Personal Allowance Policy
<https://cfsa.dc.gov/publication/program-youth-personal-allowance>
- ▶ Summer Camp Subsidy
<https://cfsa.dc.gov/publication/ai-summer-camp-subsidy-program>
- ▶ CFSA Permanent Guardianship Subsidy Policy
<https://cfsa.dc.gov/publication/program-youth-personal-allowance>
- ▶ CFSA Guardianship and Grandparent Subsidies
<https://cfsa.dc.gov/publication/ai-guardianship-and-grandparent-subsidies>
- ▶ District of Columbia Adoption Subsidy Profile
<http://www.nacac.org/adoptionsubsidy/stateprofiles/dc.html>
- ▶ What is a Foster Care Subsidy?
<http://adoption.about.com/od/financialmatters/a/whatsubsidy.htm>
- ▶ Reimbursement for Property Damage
<https://cfsa.dc.gov/publication/ai-resource-parent-reimbursement-property-damage>
- ▶ The National Foster Parent Association Guide to Federal Tax Benefits
<http://www.nfpaonline.org/taxinfo>
- ▶ IRS Publication 501, Exemptions, Standard Deduction, and Filing Information
<https://www.irs.gov/forms-pubs/about-publication-501>
- ▶ IRS Publication 17, Your Federal Income Tax For Individuals
<https://www.irs.gov/forms-pubs/about-publication-17-your-federal-income-tax-for-individuals>
- ▶ Claiming a tax deduction for your foster child
<https://cfsa.dc.gov/page/foster-parents>