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ABSTRACT

This handbook outlines essential information for foster parents under these basic headings: (1) legal rights and responsibilities of children, parents and foster parents; (2) recruitment, licensing, training, and evaluation of foster homes; (3) placement and removal of foster children; (4) payments and expenses; (5) medical care; (6) confidentiality and family contracts; (7) agency and community resources; (8) education and religion; and (9) complaints and grievances about agency services and foster homes. Appendices include information related to foster home standards, study and evaluation; and lists of the responsibilities and duties of the juvenile court, guardianship administrator, field/casework staff, and foster parent or custodial institution. (ED)

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WE CARE FOR KIDS:



A Handbook for Foster Parents

PS 008370

Illinois Department of Children and Family Services

INTRODUCTION

This handbook represents a joint effort, between the Department and its foster parents, in recognition of our mutual obligation to help children grow into happy, healthy adults. The handbook will provide the information needed as we work together in caring for children.

We thank all who contributed to the development of the manual.

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Section 1 Legal Rights and Responsibilities

The rights of every individual are guaranteed by the United States Constitution, and, through various appeal proceedings, the United States Supreme Court has acknowledged these constitutional rights for children.

The Department has legal authority to accept children for care on four bases:

- Juvenile Court Order appointing the Guardianship Administrator as guardian of the person.
- Request and consent for temporary custody signed by parent(s). (CFS 444)
- Adoption surrender signed by parents.
- Temporary custody of abandoned child found in Illinois.

It is the responsibility of the Department to recognize and assure the rights of all children under care.

The position of Guardianship Administrator has been created for the Department of Children and Family Services to carry out the guardianship responsibilities, and this individual is named in the court order. A social worker, acting as the guardian's agent, may carry out some responsibilities.

1.1 Rights and Responsibilities of the Guardian Through the Juvenile Court Act

The Juvenile Court Act (1969) (Section 1-11) defines guardianship of the person as follows:

“Guardianship of the person of a minor means the duty and authority, subject to residual parental rights and responsibilities, to make important decisions in matters having a permanent effect on the life and development of the minor and to be concerned with his general welfare.”

It includes but is not necessarily limited to:

- The authority to consent to: (1) marriage, (2) enlistment in the armed forces of the United States, (3) major medical treatment, (4) psychiatric treatment, (5) surgical treatment, (6) represent the minor in legal actions, (7) out-of-state travel, (8) release of information, (9) obtain a permit or license to operate a motor vehicle, (10) make other decisions of substantial legal significance concerning the minor.
- The authority and duty to establish reasonable visitation, except to the extent that these have been limited by court order.
- The rights and responsibilities of legal custody except where legal custody has been vested in another person or agency.
- The power to consent to the adoption of the minor, but only if expressly conferred on the guardian in accordance with Section 5-9 of the Juvenile Court Act (1969).

- Investigating and expediting receipt of all possible benefits due wards, including insurance, Veterans Administration, Social Security benefits, Railroad Retirement, Illinois Veterans Commission education benefits, and damages due to the negligence or misconduct of others.
- Acting in such other ways and capacities as may be indicated in individual cases in order to assure that children may achieve healthy growth and development.

The guardian is an agent of and accountable to the court of jurisdiction and may be cited into court and required to make a full report on his actions in behalf of such child. His relationship and responsibilities continue until the child attains age 21, unless terminated earlier by court order, or upon the child's legal adoption, marriage, or death.

1.2 Rights and Responsibilities Through Voluntary Temporary Custody

The natural parent(s) or other legal guardian may voluntarily consent and request that the Department assume temporary custody of a child. In assuming temporary custody, the Department does not become the guardian of the child; guardianship is retained by the natural parent(s) or other guardian. When the *Department* has custody, it means that this *agency* has physical possession of the minor. It is the duty of the Department to protect, train and discipline the child; further duties are to provide the child with food, shelter, education and ordinary medical care. This agency then fulfills these duties through the foster care arrangement. In the situation of foster homes, the Department delegates the responsibilities to the foster parent(s).

In consenting to temporary custody, the parent or other guardian agrees to the following conditions:

- To consent to any necessary medical or surgical care and treatment for the child, including inoculations and immunizations, or hospitalization which may be recommended by a physician.
- To pay to the Department of Children and Family Services for care and training of the child in such amounts as the Department shall determine reasonable and in conformity with its policies.
- To keep the Department informed of any change of address or other changes in the family circumstances which may affect the care of the child.

In situations requiring the consent of natural parent(s) or legal guardian, all efforts are made to contact them to obtain the consent; however, if the parent(s) or other guardian is unavailable, the Guardianship Administrator may assume this responsibility.

If the parent or other guardian delivers a written request that the Department surrender the temporary custody of the child, the Department must comply, unless a petition is filed within ten days alleging neglect or dependency.

1.3 Rights and Responsibilities of Natural Parent(s) When Child Is in Placement under Court Order

According to the Juvenile Court Act (Section 1-16), natural parents retain residual rights and responsibilities when the child is under our guardianship or in our custody. These residual rights and responsibilities include, but are not limited to: (1) The right to reasonable visitation, (2) The right to consent to adoption, (3) The right to determine the minor's religious affiliation, (4) The responsibility for his support.

1.4 Rights and Responsibilities of Foster Parents

The concept of foster parenting is shared child-rearing responsibilities by the foster parents, Department, court, and natural parents. Foster parents:

- Have rights and responsibilities for the day-to-day decisions regarding the child's care; however, they have no legal rights for decision-making regarding permanent plans for the child.
- Have shared responsibility in planning for the child and the right to appeal the decision.
- Are not liable for personal injury that the child may incur *unless* negligence can be established; the foster parents have a duty, however, to take all reasonable measures to protect the child from self-injury or injury to or by another person.
- Are responsible for meeting the standards for foster care licensing.
Have the right to appeal a decision to close their home. The procedure is found in Subsection 2.6.5 of this booklet or in Section 9 of the Child Care Act (1969).
- Shall be notified of all court hearings. Foster parents may be subpoenaed by the courts.

Section 2 The Foster Home

2.1 Recruitment

Techniques used in recruiting for foster homes by individual Areas will be dependent upon (1) the volume of applications, (2) needs within an Area for certain types of foster care resources, and (3) local office service demands.

Licensing intake may be handled on an individual basis or through the use of introductory group screening meetings. However, if the local office chooses to handle this process, the following guidelines should be observed:

- Careful screening and evaluation of foster parent applications can help avoid problems for the agency, for children, and for the prospective foster parents themselves.
- Since it serves no useful purpose to accumulate unused foster homes, local offices should recruit, study and license the number of foster homes sufficient to meet the agency needs.
- Pre-licensing activities, whether done individually or in groups, should provide prospective foster parents with a thorough understanding of the agency, the children we serve, and the role and responsibilities of foster parents.

2.2 Licensing

Licensing is the method by which the Department affirms the eligibility of the applicant to receive a foster home license in accordance with the standards, policies, and procedures of the Department. The procedures for licensing are carefully detailed in Appendix C.

2.3 Training

Preservice and inservice training shall be provided for foster parents at the local level. Attendance at training sessions may be designated as "required." Reasonable assistance will be given to foster parents in order that they may attend.

Foster parents may be asked to assist in providing staff development for those staff members who work in the area of foster care.

2.4 Specialized Foster Homes

"Specialized Home" means a foster family home licensed by the Department for one of the following types of care:

- 2.4.1 **An Emergency or Receiving Home** is a foster family home utilized when determination of case goals is necessary. The home may serve children up to a maximum of 30 days when homemaker service and purchase of day care is impractical or when abuse, abandonment, or a family crisis necessitates immediate placement. The home must be available on a 24-hour basis for any child needing emergency care and can serve up to a maximum of eight children at one time.

2.4.2 A Diagnostic or Study Home is a foster family home utilized when determination or re-establishment of case goals is necessary. The home may serve children up to a maximum of 90 days whose living arrangement elsewhere cannot be maintained during the period of study and diagnosis; children thought to be mentally retarded or emotionally disturbed; infants whose adoption potential is being assessed; or other children when additional knowledge is essential for the establishment of realistic goals and a sound casework plan. The home may serve a maximum of eight children at one time.

2.4.3 An Intensive Service or Specialized Long-Term Placement Home is a foster family home utilized to achieve established casework goals for children requiring special care and service. The home may be used for physically handicapped children; young unmarried mothers for whom suitable maternity homes are unavailable; adolescents, male and female, for whom suitable homes are unavailable; seriously disturbed children who have had many previous placements including state hospital placement; and children with moderate or severe personality problems or behavioral disturbances. The home usually serves a child for a minimum of one year and may care for a maximum of eight children at one time.

2.5 Evaluation

Evaluation of foster homes should be a continuing process that enables foster parents to understand clearly agency expectations and their own performance in relation to those expectations. It should be handled in such a way that it is part of continuing education and development for foster parents, helping them to pinpoint their areas of strength and weakness. It should be a process engaged in jointly between foster parents and worker with a focus on promoting good child care, although it must be recognized that ultimate responsibility for evaluation rests with the agency, as represented by the worker. The evaluation should be clearly focused on child care.

Criteria for evaluation are outlined in the Child Care Act and in Department of Children and Family Services Reg. 5.12, Minimum Standards for Licensed Foster Family Homes, and are concerned with provision of a safe and comfortable physical environment and a nurturing emotional and social environment. A copy of standards is in Appendix C and should be carefully noted.

Though we stress the need for continuing, ongoing evaluation, a formal written evaluation shall be scheduled yearly. Prior to the evaluation conference, both worker and foster parents should review the standards set forth in Department of Children and Family Services Reg. 5.12. The evaluation should be clearly focused on those standards. The worker will submit the report to the foster parents, who may append a statement of agreement or disagreement to the evaluation, and both will be filed in the foster parent record.

In Appendix B is an annotated copy of the annual evaluation form for foster homes. This evaluation will be done by workers and the worker will record on each topic. This write-up in its entirety will be shared with foster parents upon completion.

(NOTE to worker: This annual evaluation will replace every other six (6) month recording for foster parents' records.)

2.6 Procedures for Refusal to Renew or Revocation of a Foster Home License

It is the responsibility of the agency to inform the foster parents of the Minimum Standards for Licensed Foster Family Homes.

2.6.1 Basis

Revocation of or refusal to renew a license must be based on a violation of one or more Minimum Standards for Licensed Foster Family Homes. When the social worker becomes aware of one or more violations, it is the responsibility of the worker to attempt to work with the foster family toward correction of the violation. However, it must be kept in mind that the social worker must exercise judgment. Certain kinds of violations may, in the worker's judgment, seriously jeopardize the welfare of the child, and immediate action must be taken.

2.6.2 Documentation

The social worker is responsible for maintaining information as to specific conditions or instances in which minimum standards have been or are being violated. The information should include dates and specific details as to the circumstances of the violation. Also, an account should be kept of the nature of the discussion with the foster parents pertaining to the violation and the foster parents' response to the issues.

2.6.3 Case Staffing

During the evaluation process of reaching a decision regarding closing a foster home, it is recommended that a case staffing be held with the attendance and participation of all social work staff who have had occasion to work with the foster parents. This staffing might result in some recommendations to worker and supervisor responsible for supervision of the foster family.

2.6.4 Decision Making

The decision to close a home should be made jointly by the social worker and the supervisor. If worker and supervisor do not agree as to closing the home, it is recommended that the area administrator be called in to mediate. If the decision is to close the home, then the social worker has the responsibility of discussing this decision, including the specific violations, with both foster parents with the possible aim that the foster parents will desire to relinquish the license. Subsequent to the discussion, the worker has the responsibility of preparing a registered letter which would include the charges against the foster parents and advising them of their opportunity to use the Foster Parent Appeal System. Foster parents have up to ten days to respond to the established appeal system.

2.6.5 Appeal System

If the appeal system is set in motion, then the foster parents would discuss the matter in the following rotation: local supervisor, area administrator. The matter would move from level to level only if the foster parents were dissatisfied and request a conference with the next highest level. If the decision to revoke the license or refusal to renew is upheld through the utilization of the appeal system, then the next step would be for the social worker to follow the procedures for revocation of license, as outlined in the Child Care Act (Section 9).

If the worker's decision to close the home is reversed, he has the right to appeal first to the local office and then to the area administrator.

2.6.6 Revocation of License

The first step is for the social worker to notify the licensee by registered mail, advising him of the action, and including in the letter the stipulation

that the licensee may request, within ten days of notification, a public hearing before the Department. The licensee may also request a written statement of the charges. Upon written request, the Department shall furnish a written statement of the charges and will set the date and place for the hearing which is to be held within 30 days. License will be revoked or renewal denied if: (1) No request for a hearing is made within ten days, or (2) upon holding the hearing, it is determined that the license is to be revoked or renewal denied.

The Director of the Department or official or employee authorized by him shall hear the charges, and both the Department and licensee shall be allowed to present in person or by counsel statements and testimony pertinent to the charges.

If the license is denied as a result of the hearing, then the foster parents may initiate proceedings for a judicial review of the decision.

Section 3 The Foster Child

Most children share predictable reactions to separation, and the first of these is a feeling of abandonment. Along with this feeling comes a complete feeling of helplessness, of lack of control over what is happening to him. He reacts with anger directed toward his parents who have deserted him. Instead of facing these unacceptable feelings, he tries to deny them. In order to reassure himself, he begins to believe the exact opposite—that he is responsible for all the incidents leading up to the separation. This helps him deny his anger toward his parents and repress the feeling that he is a mere pawn, having no control over what happens to him.

When the child is placed with foster parents, he is moved from the known to the unknown. He tends to expect from them the drastic punishment which he feels he deserves and which he often experienced in the past. He is also afraid that the foster parents will desert him. He will fend off his new parents and keep them at a safe emotional distance. One of the most effective ways to keep the foster parents at a safe distance is to manipulate ways of making them angry.

During the first few weeks, the child will probably try to please them, as he gets acquainted with the foster parents and his new surroundings. However, eventually a testing pattern will develop. This might take the form of bed wetting, lying, truancy from school, or whatever happened to be the child's troubled behavior at the time of separation. He may attempt to reproduce in his new home the exact difficulties and circumstances of his previous home. By now the child knows what will upset his substitute parents and he will use these means to test their reactions. It is important to have the social worker tell foster parents what types of behavior could be expected from this child. In this way, they can be somewhat prepared when the testing begins.

The foster parents should expect that the testing pattern will reoccur from time to time. As the child adjusts to their family and becomes closer to them, he may feel guilt and anxiety because of the closeness. At this point he may re-establish his emotional distance by regressing to old patterns of disruptive behavior. By anticipating the reoccurrence of the problems, foster parents will not be disillusioned by them or feel inadequate because of them. Understanding the viewpoint of the child will help them interact more confidently and calmly with the child and thus provide more security for the vacillating child.

3.1 Foster Care Placement

Placements and removals of children in foster care involve numerous responsibilities. Some responsibilities are solely those of the social worker. Others relate only to the foster parent. Still others are a joint responsibility of the social worker and the foster parent. In order to make the placement or removal as easy as possible on the child, these responsibilities have been outlined below. A clear definition of responsibilities should also help us avoid inappropriate placements.

3.1.1 Worker Responsibilities

Initial Contact. Before a child is placed in a foster home, the worker who supervises the home or the placing worker will contact the foster parents. In considering a home for a particular child, the social worker will be guided by the

foster parents' wishes and preferences as well as by his understanding of the kind of child for whom the home is best suited. He will talk with the foster parents about the child and his family, special needs of the child, reasons for placement, and work out the details of placement. (See Section 6.1 on confidentiality.)

Pre-Placement Visits. In most cases, the social worker will see the need for a pre-placement visit. This can vary in time from a couple of hours to one week. These will be arranged in the initial contact.

Placement. The worker will bring the child to the foster home according to a prearranged schedule. At the time of placement he will provide the foster parents with a medical ID card and a Foster Home Placement Agreement. He will also provide an initial clothing allowance if this is the first placement for the child. If this is not a first placement, he will ensure that the child has adequate clothing. If the child lacks adequate clothing, he will ask for approval for an emergency clothing allowance.

A follow-up visit to the foster home should be made by the worker within a *maximum* of two weeks. Ongoing supervision of the child by the worker will be arranged on a case-by-case basis.

The worker will be responsible for authorizing payment for foster care within twenty-four (24) hours in order to avoid any delays in payments. (See Section 4 on payments.) The agreement signed by foster parents and the social worker describes the responsibilities of each in working together for the welfare of the child.

3.1.2 Foster Parent Responsibilities

Initial Contact. After the worker has presented the necessary background material on the child, the foster parents are responsible for letting the worker know if they feel the placement would be appropriate. They should communicate any possible problems they might foresee in the placement. Foster parents should not feel pressured to take any particular child and must let the worker know of their feelings.

Pre-Placement. Pre-placement visits are a most important time as they afford the foster parents, child, and worker the opportunity to ascertain the probability of success of the placement. If any party feels the placement would not work, the foster parents should try to prepare the child for his next placement and not create any undue guilt on the part of the child because the actual placement was decided against.

Placements. At the time of placement, the foster parent should do everything possible to ensure that the child feels comfortable in his new home. This includes such activities as showing him his room, helping him put up his clothes, explaining rules of the household, and introducing him to everyone in the family.

Medical Care. See Section 5.

3.2 Discipline

Discipline should be viewed as a continuum. The desirable movement is from discipline, which is administered externally, toward self-discipline. Discipline is an essential

aspect of child rearing; it should be *viewed as a learning experience* so that the child will develop accepted patterns of behavior and an understanding of responsibility and accepted rules of conduct. Therefore, the purpose of discipline is to teach the child to get along as a member of a family and community, and eventually to be a responsible, mature adult.

There are many methods of discipline, and the appropriate type should be selected for each individual child. It is recommended that there be joint discussions between the foster parents and social worker as to the appropriate discipline and management plan for each foster child. This should be included at the time of initial placement, as well as during ongoing supervision of the child while in the foster home. Often, because of the special behavioral problems of some foster children, it is necessary for foster parents and social workers to work together in finding an effective means of discipline for a specific child.

At the time of a child's removal from the foster home, information regarding the child's behavior and the most effective method of discipline for him should be provided by the foster parents, so that this information can be passed on to the next parents—whether they are natural parents, adoptive parents, or other foster parents.

Suggested considerations for determining an effective means of discipline for a child:

- Consider the child's age and level of social, intellectual, and emotional maturity.
- Both the parents and the child need to talk and listen to one another for an understanding of how the other thinks and feels.
- Establish definite limits and guidelines expected for the child's behavior and let the child know he will have to assume the responsibility of the consequences if his behavior is outside the established limits and guidelines.
- The child should understand the reason for disciplinary action.

The Department's policy specifically *prohibits* the use of the following punishments:

- Corporal punishment inflicted in any manner upon the body (this includes "spanking").
- Threats or derogatory remarks against the child or his natural parents.
- The depriving of meals.
- The depriving of visits with natural parents.
- Verbal abuse.
- Unusual, unnecessary, or severe punishment.

Physical restraint may be used in situations where a child's behavior demands immediate control in order to protect himself, other individuals, and/or property.

3.3 Removals

3.3.1 Worker Responsibilities

Agency Requested Removals

The worker should give the foster family at least two weeks notice (whenever possible) when a removal is being contemplated.

The worker should explain full details of the reason for removal.

The worker should explain the nature of the new placement to both foster parents and child.

The worker should make follow-up visits after informing the foster family of the removal plans, in order to prepare all persons for the removal.

Foster Parent Requested Removals

The worker should meet the foster parents' request for removal within two weeks when continued placement is not feasible.

The worker should offer assistance to maintain the placement when his judgment indicates that continued placement would be best for the child. He should not, in any way, pressure the foster parents into a plan they cannot accept.

3.3.2 Foster Parent Responsibilities

Agency Requested Removals

Foster parents should cooperate with the casework plan for removal of a child.

Foster parents should not communicate disagreement with the caseworker on his plan to the child. This only creates guilt and confusion in the child and can make adjustment in his new placement more difficult.

If foster parents disagree with plans for the removal of a child or the particular placement decided upon, they have the right to ask for further clarification. However, the agency is the direct representative of the guardian and reserves authority for the final decision regarding removal.

When a social worker requests removals, he generally has a specific placement planned for the child. These new placements include return to natural parents, placement in another foster home, placement in an adoptive home, institutional placement, independent living, marriage, or military service. Each new placement has in common the need for the foster parents to provide emotional support and preparation to the child. Each, however, is different and requires a somewhat different approach on the part of the foster parents. These placements will be treated separately below.

Return to Natural Parents. When a child is being returned to his natural parents, he is sometimes leaving a home with far more physical comforts than he experienced in his natural home. It is a very natural thing for foster parents to be concerned about children they have loved and cared for, especially if they were the first foster parents for them. They will remember that sometimes the children were not properly cared for in their natural home previously. However, people make gains and the foster parents can feel pride in the thought that they have helped the entire family by caring for the children on a temporary basis. This gave the natural parents time to improve their lives which eventually helps them care for the children. It is most important that foster parents not dwell on the condition of the children when they first entered their

home. Foster parents should point out to the child that the most important thing is that he is returning to his own parents. During this time children will find themselves with divided loyalties between foster parents and the natural family. It is not uncommon for them to reject their foster family when they learn they are going home. Foster parents should help the child understand that it is all right for him to love his own parents and support him in his love. Children often "act out" or experience behavior problems that were never before evident when they learn they are returning to their natural parents. This often stems from the fact that the child is somewhat fearful of the change. Foster parents can help by recognizing *with* the child why they are acting this way.

Placement in a New Foster Home. Children often react in many of the same ways as in a return to natural families, and many of those points may apply to this situation. The Department often has many different reasons for moving a child from one foster home to another. The foster parents should confer with the social worker on his reasons and be prepared to discuss them openly. During this time, the foster parents should communicate to the children that they still care for them and prepare them for the new placement.

Placement in an Adoptive Home. The foster parents should communicate to the child that they still love him. The positive value of the child having a permanent family (adoptive home) should be pointed out during this time. The foster parents should work together with the Department in preparing the child for his new home.

Institutional Placement. When a child requires institutional placement, it is generally because he has become emotionally disturbed to the point that he needs professional care on a 24-hour basis. Children often have many strange ideas about what an institution is like. Many see it to be like a jail. The foster parents should ask for information about the institution from the social worker in order to prepare the child for this placement.

Independent Living, Marriage, Military Service. When a child leaves the foster home to one of the above situations, it is usually after he, the social worker, and the foster parents have discussed the matter. However, it is often difficult for the foster parents to see the child as "grown up," and they frequently worry that the child is not capable of "making it on his own." It is most important to give the child recognition that he has grown up and is assuming adult responsibilities. As much as possible, the foster parents should begin treating the child more as an adult. The child needs much support at this time in helping him gain the necessary confidence to function as an adult.

Each of the points mentioned above is part of the social worker's responsibility as well. Both the social worker and the foster parents should be working together to make the adjustment to the new situation as easy as possible.

Foster Parent Requested Removals

When foster parents feel they can no longer offer their home as a resource to a particular child or foster children in general, it is important that this be discussed openly and honestly with the social worker before the child is told of a definite decision. There may be times when solutions foster parents weren't aware of can remedy the problem, and removal will not become necessary.

If there are no alternatives, however, the foster parents and social worker will decide together what each individual child is to be told. As children vary greatly in their abilities to understand, this step is extremely important. Usually the social worker will want to have time to develop another plan for the child before he is told of his upcoming removal.

Although a two-week period is used as a general guideline, the social worker must make individual decisions for each child. At times the child can handle a sudden removal better than a drawn-out ordeal. With information about the child from the foster parent, the social worker will make these types of decisions. If the social worker and foster parents continue to work together during this stressful time, all can benefit and learn from the experience.

Preparation of the child for this type of removal is very similar to those discussed above under *Agency Requested Removals*.

3.3.3 Foster Parent Contacts with Child after Removal

After a child has been removed from a foster home, it is often a natural desire of the foster parents to want to keep in touch with the child and, in fact, is sometimes encouraged by the worker. In certain instances, however, these contacts can be detrimental to the child in his new placement.

Before contacting the child who is now in another placement, a former foster parent should call the worker for information about what effect this contact will have on the child. The former foster parents should then act according to the social worker's recommendation.

3.4 Emergency Service

Since the Department of Children and Family Services has responsibility for dependent, neglected, abused or abandoned minor children on a 24-hour basis, a system for responding to crises which occur after regular office hours was devised. Staff are assigned to emergency service on a rotating basis to respond to calls made after regular working hours.

3.4.1 Procedures for Use of Emergency Service

In the case of a bona fide emergency, the foster parent should call the worker. When the answering service operator answers, the foster parent should identify herself or himself, briefly state the nature of the crisis, and ask for the worker who is on call for the Department of Children and Family Services, making sure to identify the specific office involved. The answering service operator will take the foster parent's name and number and contact the worker who is on duty. The emergency worker will then call the foster parent back and, at that time, the foster parent should relate the details of the crisis.

3.4.2 The Nature of an Emergency

Those things which can possibly wait until normal office hours are not emergencies. In other words, chronic behavior problems are best discussed with

the child's social worker during regular office hours. Major casework decisions can be made best after everyone involved has had time to consider all circumstances and consequences. Foster parents should exercise good judgment and common sense in determining when an emergency exists. When it has been determined that a call to the emergency service is justified, the procedure should be used properly, remembering that the emergency worker will not be making casework plans. He will only be intervening to resolve an immediate crisis.

3.4.3 When to Use the Emergency Service

Medical Emergency. The agency should be notified immediately in any case of medical emergency. This topic is detailed completely in Section 5.

Runaway Child. Foster parents should remember that most children absent themselves from home for varying lengths of time without permission. If a worker has reason to believe a child is likely to run, he should leave specific instructions for the foster parents to follow.

On receiving notification that a child has run away from his placement, the Area Office staff shall obtain factual information about the circumstances which seem to have precipitated the runaway and shall make diligent search for him by contacting parents or other persons who might know of his whereabouts. It is the *foster parents'* responsibility to notify DCFS that a child has run away; it is the *Department's* responsibility to see that the child is found, if necessary by enlisting the help of law enforcement officials. The Department worker will notify the assistant guardianship administrator of the child's absence. The assistant guardianship administrator will, in turn, notify the court.

Extreme Behavior Problem. A situation in which a child is threatening bodily harm to himself or to others with *serious* intent must also be considered an emergency which may require the intervention of a social worker. It is still best, even in this situation, that the foster parent attempt to calm the child and take advantage of a "cooling off" period before the worker is contacted.

It is understood that the matter of an "emergency" actually becomes the judgment of the foster parent. If a foster parent judges a certain situation to be an "emergency," then a call to the emergency service is appropriate.

Section 4 Payments and Expenses

The amount of board paid is agreed upon prior to the placement of the child in the foster home and is confirmed by the signed placement agreement. The monthly rate is based on the age of the child. The board is increased automatically in the month following that in which the child's first, third, fifth, ninth, or 12th birthday occurs. Board care checks are mailed from Springfield once each month. For example, the check sent out in February is for the care of the child during January. The check will cover the portion of the preceding month that the child was in the foster home. Board is paid for the day the child is placed in the foster home, but not for the day he leaves.

If the school attended by the child participates in the national and Illinois School Lunch Program, he is eligible for free lunches and milk (unless he is in an adoptive placement or has an annual income of over \$2,910). Foster parents should apply to the school for this benefit. If the school does not participate in the program, foster parents can furnish money for lunches from their board payment or make some other arrangement for the child's noonday meal.

In addition to the board, the payment includes a monthly *clothing* payment and the child's *personal* allowance. Payment will be included also for any special item approved by the social worker, such as car fare, if needed for a school child.

Some children have funds held in trust by the Department, which may be disbursed for all or part of their maintenance needs. As a result, some foster parents may receive monthly checks from both the state and the trust for board or other items of care. These checks will generally arrive on different dates. If a boarding care check is incorrect or lost, the social worker should be notified immediately. The initial boarding care check, after placement, should be received by the foster parents within 45 days.

4.1 Clothing Allowance

4.1.1 The monthly clothing allowance is paid to foster parents for each child on the basis of age. See chart at the end of this Section.

Foster parents may use their judgment in purchasing clothing as needed, but keeping in mind the seasonal need. Allowances should be made for the child's normal growth, particularly in buying coats and suits.

The social worker has the ongoing responsibility for seeing that the child's clothing is adequate and that his allowance is being used appropriately. Special clothing needs should be discussed by the social worker with the foster parents. The social worker can, in special situations, authorize purchase of additional clothing.

4.1.2 Initial Placement Clothing

The social worker may authorize "placement clothing" for a child in his first placement who needs clothing immediately. Purchase of such clothing is not intended to completely outfit the child, as the monthly payment rate provides for replacement clothing. For amounts, see payment charts at the end of the Section.

It is the responsibility of the social worker and the foster parent to decide together on the clothing to be purchased. The social worker will send the foster parent a *purchase authorization*, itemizing the articles and the maximum price that may be paid for each, and *invoice-voucher* forms. The foster parents are free to shop at the store of their choice, but all items listed on one authorization must be purchased at the same store.

The store is not allowed to substitute articles of clothing for those listed on the purchase authorization. *These clothing purchases must be made within a month after the child is placed in the foster home.* If for any reason the foster parent does not use all the purchase authorizations, they should be returned to the social worker for cancellation.

Payment is made directly to the store. The two copies of each authorization and the accompanying invoice-vouchers are to be given to the store where the purchases are made. It is the store's responsibility to send the itemized invoice-voucher to the Department of Children and Family Services, 524 South Second Street, Springfield, Illinois 62706. This itemized invoice-voucher is to be sent with all sales tickets and the original copy of the authorization.

In general, it is expected that a child moving from one foster home to another will have adequate clothing and that the monthly clothing allowance will provide for additional needs as they arise. The social worker has the responsibility to see that all of the child's clothing is transferred to his new foster home. If there is a major shortage in the child's clothing, the social worker should determine what urgent needs should be taken care of and how.

4.1.3 Unmarried Mother's Maternity Wardrobe

If the unmarried mother is a ward of the Department, clothing would be inclusive in the monthly payment rate. However, a special clothing allowance for maternity clothing not to exceed \$100 may be authorized.

If the unmarried mother is not a ward of the Department and she is unable to provide herself with a minimum necessary maternity wardrobe, a clothing allowance not to exceed \$100 may be authorized.

Such clothing must be purchased within 10 days after placement.

4.2 Payment of Personal Allowance to Foster Child

Each child over the age of five years will receive a personal allowance. The social worker will decide with the foster parent and the child how the allowance will be handled and the items which it should cover. The allowance is to be given to the child, and he should not be expected to spend it for things which are covered by the board payment. It is a joint responsibility of the social worker and the foster parents to see that each child receives his monthly allowance.

4.3 School Expenses

The Department prefers to pay the school directly for textbooks and other items which are furnished by the school. *The Department will pay for insurance for participation in school activities* such as athletic events, gym, school plays, etc. This refers to insurance available through the school specifically for this type of participation in school activities. *However, no general school insurance, either through the school or from private companies, will be paid for by the Department,* since the Department has an adequate medical program that provides this coverage for children under its care. The Department will not authorize payment of tuition to a parochial or public school.

4.4 Tutoring and Summer School Tuition

When tutoring during the school year is recommended by the classroom teacher, a tutor who is a qualified teacher may be paid the prevailing hourly rate in the community. Payment for more than one semester requires a conference between the worker, classroom teacher and tutor and a written recommendation from the teacher and tutor recommending continuation for a specified period of time.

Summer school tuition and transportation may be authorized when recommended by the teacher as necessary to enable the child to maintain his grade placement or obtain credits needed for graduation.

4.5 Preschool Readiness Program

Payment may be authorized for a private kindergarten, nursery school, or day care center and for transportation for a foster child who needs a structured group setting to help him develop self-care skills, to help him acquire social attitudes and the ability to get along with children and adults, or to stimulate learning and/or achieve readiness for entering school. Payment is limited to the maximums allowed for day care centers.

4.6 Medical Expenses

Medical expenses incurred for routine physical examinations are covered by the Medichek program. Most illnesses or injuries are generally covered under the Department of Public Aid Medical Assistance Program. See Section 5 for further information.

4.7 Special Service Fees

Although the monthly payment rate is intended to pay for the ordinary basic maintenance and needs of the child, *additional payment may be made when the care of the child requires considerable extra expense*, for example, an expensive special diet, extra laundry because of severe bed-wetting, frequent trips to a clinic or physician, or transportation to a special school or day care facility. The foster parent may request this additional payment from the social worker for extraordinary expenses that occur; however, the social worker has the responsibility for determining the need and submitting the request in writing to his supervisor for approval. Such payments are reviewed at six-month intervals to determine if the need still exists.

Special service fees cannot be authorized for children in specialized foster homes.

4.8 Music Lessons and Rental Fees

Payment may be authorized for music lessons at the prevailing rate in the community. Payment may be authorized for rental of musical instruments.

4.9 Camp Fees and Other Non-Recurrent Items

Camp fees may be authorized for up to a two-week period.

Day camp fees may be authorized at the same rates as for day care centers.

Payment may be authorized for other non-recurring items such as expenses for Scouts, 4-H Club, other club projects, educational trips made by school groups or transportation for other purposes.

4.10 Payments for Specialized Foster Family Care

In addition to those policies, procedures and placement rates for conventional DCFS foster family homes, the following applies to specialized homes:

4.10.1 Retainer Fee

When an agreement is made (Form CFS-424, *Specialized Foster Home Agreement*) a monthly retainer fee of \$100 per space reserved shall be paid in addition to the authorized monthly payment rate for each child placed.

Payment of the *total* retainer fee shall be initiated when the *first* child is placed in the home.

The foster family should be informed that the *retainer fee is taxable income* and should be reported as income on federal and state tax forms.

4.10.2 Annual Vacation

An annual vacation not to exceed two weeks shall be planned with foster parents providing specialized care in recognition of their need for relief from the stress of their daily duties.

If temporary placement of the children during this vacation is necessary, all payment except the retainer fee shall be suspended during this period.

If employment of a substitute resident parent is required during the absence of the foster parents it may be provided through assignment of a Department homemaker, purchase of homemaker service through another agency, or employment of a qualified person of the foster family's choice.

4.11 Internal Revenue Ruling on Payment for Foster Care

By a ruling of the Commission of Internal Revenue of September 10, 1974, payment which foster parents receive for the care of children placed with them by a child-placing agency is considered reimbursement for expenses incurred in taking care of the child. Therefore, foster parents are not required to report either expenditures or reimbursements for care of a child placed by a child-placing agency. *Special Service Fees* are also not taxable and are not to be reported as income.

You may be able to claim your foster child as a tax deduction if you had the child in your home a full calendar year and contributed more than half of the actual expenditures. *Internal Revenue Service is the authority, and, if there are questions, you may want to discuss them with your local office.*

This ruling is not applicable when foster parents care for children placed with them directly by parents.

4.12 Use of Clothing and Personal Allowance

Handling of allowances depends on the age and maturity of the child. Therefore, it is the worker's responsibility to set up a plan for allowances in consultation with the foster parents, with the foster parents having responsibility for carrying out the plan and assuring that the child is adequately clothed. In general, older children should be given as much freedom as possible in handling of both clothing and personal allowance with accompanying responsibility and accountability. Supervision and help in this will be given by the foster parents.

Care of clothing is the responsibility of the foster parents except as they may delegate all or part of that responsibility to the child. Such delegation of responsibility should be made in consultation with the worker.

It is expected that a child moving from one foster home to another will take with him an adequate wardrobe so that the ongoing clothing allowance will serve his needs. If, however, such does not prove to be the case, the social worker, in consultation with the foster parents, will determine what action should be taken.

Personal allowance should cover such expenses as recreation, cosmetics, personal grooming, etc. Handling of personal allowance should follow the general guidelines outlined above for handling the clothing allowance.

4.13 Transportation

Transportation for clinic or medical appointments is the responsibility of the foster family. Situations which create hardship on the foster family should be brought to the attention of the social worker for consideration of alternate arrangements.

It is the responsibility of the worker to make travel arrangements for the child for visits with natural parents, relatives, or other visiting resources. The social worker must be contacted for written consent for out-of-state travel.

The foster parent has the responsibility to call to the attention of the social worker any reimbursable expenditures that are required to provide transportation for a child. The worker then has the responsibility to see the necessary procedures are followed for payment.

For explanation of reimbursable transportation costs associated with medical treatment, see Section 5.



Suggested Monthly Payment Breakdown for Foster Children

<u>Age</u>	<u>Board</u>	<u>Clothing</u>	<u>Personal Allowance</u>	<u>Total</u>
0 - 1	\$ 96.00	\$10.00	\$ - 0 -	\$106.00
1 - 3	95.50	13.50	- 0 -	109.00
3 - 5	95.00	16.00	- 0 -	111.00
5 - 9	100.50	18.00	3.50	122.00
9 - 12	99.50	22.50	6.00	128.00
12 & over	104.00	29.00	17.00	150.00

Initial Clothing Allowance

<u>Age Group</u>	<u>Allowance</u>
Infant to 1 year	Up to \$56.00
1 to 3 years	Up to \$85.00
3 to 5 years	Up to \$97.00
5 to 9 years	Up to \$113.00
9 to 12 years	Up to \$141.00
12 to 21 years	Up to \$202.00

Section 5 Medical Care

Foster parents have overall responsibility for the health of children under their care, since they are the ones who are in the best position to observe him and to note his needs in this area. The Department, represented by the worker, has responsibility for assisting foster parents in assuring good attention to health needs.

5.1 Preventive Care

5.1.1 Routine Examinations

- Children aged one to 21 years should have a medical examination within 30 days of the date of their initial placement and as specified in the Medichex program, or as requested by a physician.
- Children three years old or older should have a dental examination as specified in the Medichex program.
- Examinations required or recommended by the schools shall be provided promptly.

5.1.2 Immunizations

- Each child should have those immunizations recommended by the Department of Public Health which includes polio, diphtheria, tetanus, pertussis, measles and smallpox. Boys 10 and older shall have mumps vaccine unless there is evidence that they have had the disease.
- The worker shall be responsible for assuring that there is proper recording of immunizations and/or boosters in Child's Medical History Record. He will also be responsible for assuring that immunizations continue if replacement occurs.

5.2 Emergency Medical Care

In case of sudden illness or accident requiring that the foster parent take the child to a hospital immediately, the hospital should be given the child's name and green card number and the name and phone number of the assistant guardian for the Area in which the foster home is located. Hospital staff cannot treat a foster child without that person's approval unless it is a matter of life and death. If necessary, hospital staff can call collect.

If the Area's assistant guardian is not available, the hospital should call Richard Laymon, (217) 782-6533. If he is not available, his answering service will be able to contact another assistant guardian.

This procedure is the same whether the child is in Illinois or out of state when treatment is needed.

Foster parents are cautioned about signing anything when the child is in the hospital. If they do, they may be making themselves liable for the bill. Or they may be approving improper treatment and become subject to a lawsuit if anything happens to the child.

5.3 Treatment

5.3.1 Green Medical (MANG) Card

Each child is assigned a MANG (Medical Assistance—No Grant) number as soon as he goes into foster care, and the worker is responsible for giving the MANG card to the foster parent. The card authorizes the following:

- Medical care from a licensed doctor or dentist
- Hospital care
- Psychiatric treatment
- Eye care and treatment
- Approved drugs and medications prescribed by the physician or dentist (Medication that is not prescribed by a doctor is not reimbursable.)
- Orthopedic shoes prescribed by a doctor
- Transportation to and from medical facilities

Almost all physicians, dentists, hospitals, clinics, and pharmacies are familiar with the MANG program.

The Department of Public Aid will supply billing forms to any doctor, dentist, pharmacy, or hospital on request. In accordance with instructions stipulated on the forms, medical vendors are to complete and submit them to the Department of Public Aid for payment.

Bills for transportation by the foster parents and bills for authorized orthopedic shoes should be submitted to the social worker for processing through the fiscal unit in the Area Office. Bills for transportation by the foster parents should include: (1) child's name, (2) date of transportation, (3) address of place of departure and destination, (4) mileage, and (5) foster parent's name.

Exceptions to Automatic MANG Coverage

Some medical and dental procedures, as well as some drugs, are not automatically covered by the MANG green card. The physician, druggist or dentist should be requested to check his list before undertaking a course of treatment. In some instances, the physician or dentist must obtain prior approval from the Department of Public Aid for the procedure. In other instances, MANG may not cover the procedure or drug at all. In that case, the worker shall be consulted to see if the Department of Children and Family Services can pay for it.

5.3.2 Foster Parent Responsibilities

The foster parent is responsible for noting symptoms of ill health in children under care and seeking treatment as needed.

To help the Department maintain up-to-date medical records, it is important for foster parents to keep a record of immunizations, illnesses, allergies, special food requirements, and any other pertinent information on each child. A form for this information is provided to the foster parent by the worker.

5.3.3 Worker Responsibilities

The worker has responsibility for assisting foster parents as needed, i.e., helping find a physician or dentist, if there is difficulty; suggesting specialized resources such as the University of Illinois Division of Service to Crippled Children, etc., if the child is eligible; helping with

arrangements for transportation, etc., as ongoing care is needed over a long period. The worker further has responsibility for initiating plans for medical care if the foster parent has failed to take the initiative.

5.4 Consent for Surgery

Surgery or unusual treatment must have prior consent from the legal guardian or parent. The foster parent must inform the worker of such recommendations far enough in advance for the worker to obtain consent. The worker will submit CFS 431 to the legal guardian or, if the child was received through Voluntary Placement Agreement, to the parent for signature, and will send the signed forms to the physician or hospital.

Section 6 Confidentiality and Family Contacts

6.1 Confidentiality

Information regarding children in foster care and their families should be held in confidence by all concerned. It is, however, appropriate that some confidential information be shared between social worker and foster parent. This sharing should always be done with a constructive purpose in mind, this being to ultimately benefit the child. The sharing of confidential material brings responsibilities to social workers and foster parents alike.

6.1.1 Responsibilities of the Social Worker

Since it is the social worker who has access to case material, guarding confidential information should be his responsibility. Confidential information should be shared with foster parents when it will assist them in deciding whether or not to accept a foster child into their home; understanding the child and his behavior; and dealing effectively with problems as they arise, both in the early stages of a placement and as it continues.

This information should include:

- Basic reasons why the placement was necessary
- Explanation of any physical or mental handicaps
- Candid information about behavior problems and personality disorders
- Life experiences which may affect the child's behavior and about which the child might wish to talk
- Objective information about the child's natural family

The social worker shall interpret the strengths and weaknesses of the child's natural family. The social worker should also be responsible for relating to the foster parents the confidential nature of information shared with them and be cautious to respect the confidential nature of information known about the foster family.

6.1.2 Responsibilities of Foster Parents

- Foster parents should assume the responsibility of guarding confidential information provided to them.
- The foster family should elicit no more information from the child about himself and his family than he is willing to relate.
- Foster parents should assist the child in understanding that information about him may be shared between social worker and foster parent.

Both foster parents and social workers should not share confidential information about the child or his family with any source without proper authorization.

6.2 Family Contacts

Since the ultimate intent is to return the child to his natural family if at all possible, periodic visits by the natural parent are a major part of the rehabilitative process in the plans to reunite the family. Natural parents have a right to periodic visits with their children (unless the court order states otherwise). Workers have the responsibility of arranging the time and appropriate place, and supervising the visits, if necessary.

Under no circumstances are parents to visit in the foster home unless the individual visits are planned and approved. Foster parents are under no obligation to accept unplanned visits by parents and should report such incidents immediately to the social worker for handling. There will be no telephone contact between families and children unless specific plans for this have been worked out between caseworker and foster parent. The name and address of the foster home *shall not* be given to parents *unless* there is specific reason agreed upon by caseworker and foster parent. When addresses are not revealed, correspondence between the parents and children should be routed through the Area Office.

Section 7 Resources

7.1 Resources and Responsibilities

The social worker has the responsibility to make foster parents aware of agency and community resources and to make appropriate referrals. The foster parent has the responsibility to allow the foster child to participate fully in the resources. The social worker and foster parent should work cooperatively to assure the full use of the available service.

7.1.1 Agency Programs

The following programs are the agency resources which are most frequently utilized to meet the needs of foster children.

Casework Services. This is professional counseling service provided by the social worker.

Day Care. On the recommendation of the social worker, when funds are available, day care can be provided to preschool children who need the emotional climate of a peer group setting.

Homemaker Service. Temporary homemaker service is available to prevent replacement of foster children when the foster mother is temporarily ill or unavoidably absent from the foster home. Homemakers can also be provided to help in the care of a handicapped child or assume some of the responsibilities for the other children in the home so that the foster mother can give more attention to the handicapped child.

Volunteers. In certain instances, volunteers can be provided for meeting some of the needs of the foster child. This could include transportation, being a big brother, or big sister, etc.

Advocates. Providing troubled youth with companions who serve as counselors, big brothers and friends in need is the goal of the advocate program. Advocates, usually college-age men and women, spend up to 15 hours weekly with their younger friend. Activities include walking, talking, attending movies or sporting events, job counseling, and making tutoring arrangements. In some cases advocates receive a stipend, although some work on a volunteer basis.

Adoption. When a foster child becomes legally free for adoption and if the foster parents wish to adopt the child, they may apply to adopt. If the foster parents meet the desired qualifications of an adoptive family, except for finances, a subsidy is available and will be considered.

Subsidized Adoption.

- **Special Service Subsidy.** This is time limited and in some cases may be a one-time payment. It is the special help given to handle an anticipated expense when no other resource is available. This can be to help with legal fees or special medical costs (for a specifically identified medical problem which would not be covered by the adoptive family's medical coverage).
- **Time Limited Subsidy.** This type of subsidy provides a monthly payment beyond the legal finalization of the adoption for a specified length of time.
- **Long Term Subsidy.** This is provided for those families whose income is limited and will probably remain so. This monthly payment may continue until the child reaches 18. This, however, must be reviewed yearly.

Unmarried Mother Service. In the event a foster child becomes pregnant out of wedlock, we provide counseling services to the child; adoptive home resources are available, if this is the best plan for the mother and her baby.

Education and Training. See Subsection 2.3.

7.2 Community Programs

The following are the community resources which are most frequently utilized to meet the needs of foster children:

7.2.1 Citizen Advocacy Councils

These are action-oriented groups concerned both with the needs of individual children through volunteer advocate programs and with the needs of all children and families in their communities through group programs. Citizens from all walks of life may serve on councils, although professional social workers and elected public officials participate only in an advisory capacity.

Although DCFS has helped councils get started, its ultimate goal is to see them operating independently of any established social welfare agency, public or private. Councils will focus on: establishing a volunteer advocate program for children in their communities, insuring that existing services for children and families are being used to their fullest potential, promoting development of resources when necessary, making communities aware of the needs of children and how they can best be met, and monitoring services provided by DCFS.

There is a council coordinator for each Department Area and also a coordinator whose job it is to help foster parent groups throughout the state organize.

A thread running through each council activity is prevention. Whatever the program, councils try to help a child or family before a crisis develops, instead of afterwards.

7.2.2 Community Mental Health Services (public and private)

Psychological Services. Local community mental health clinics receiving funding through the Department of Mental Health are required to serve, without cost and on a priority basis, children under care of DCFS. Referral to psychologists can be made by the social worker in the following situations:

- When institutional planning is being considered
- As part of the adoption process
- For educational and vocational planning
- When a child is displaying behavioral difficulties in the foster home, at school, with peers, or within the community

Psychiatric Services. When appropriate, the social worker can refer a foster child for psychiatric examination and/or therapy, if he is displaying unusual behavior.

Social Services. The services of psychiatric social workers can be provided through community mental health clinics or private family service agencies for children with problems in social functioning. When appropriate, these services of social workers in a community-based clinic may be used to supplement regular agency services.

7.2.3 Community Vocational Services

Division of Vocational Rehabilitation. Upon referral by the caseworker, the Division of Vocational Rehabilitation can arrange and pay for vocational, academic, and on-the-job training to children who are disabled to the degree that they might not be able to get a job without this help.

Illinois State Employment Service. This agency provides testing and job placement service. In addition, Illinois State Employment Service has a branch which deals exclusively with children under 21 known as the Youth Opportunity Commission. Among other things, they screen and refer applicants to Job Corps, Neighborhood Youth Corps, etc., for training.

7.2.4 Medical Resources

Please refer to Section 5.

7.2.5 Recreational Resources

With the approval of the social worker, a foster child may participate in activities conducted by such organizations as YMCA, Boy Scouts, 4-H summer camp, etc. The fees connected with these activities may be paid by the agency.

7.2.6 Education

Please refer to the next Section.

Section 8 Education and Religion

8.1 Education

As the foster child enters school, the foster parent stands in place of a parent; for example, the foster parent will be the one to sign the report card, attend parent-teacher conferences, and attend P.T.A. meetings. When called upon either by school personnel or the foster parents, the social worker will assist in problems concerning the education of the foster child.

When the social worker feels it is necessary to contact the school in regard to a specific problem, he should feel free to do so. This should be done in cooperation with the foster parent.

The child must be enrolled in school under his own name unless the use of another name has been approved by the social worker.

The foster parent should contact the social worker when problems arise concerning physical examinations, immunizations, textbook purchase or rental, carfare, tutoring fees, summer school tuition, music lessons, and graduation expenses.

It is the responsibility of the foster parent and the social worker to enroll a child in special education classes, if this is what the child needs. It is also the social worker's and foster parents' responsibility to assure the child's attendance in these classes after he has been accepted.

When appropriate, the foster parent and social worker have responsibility to assist in planning for college or vocational training for the child. The plan should reflect the feelings of the foster parent and the child as well. Planning should begin as early as possible.

8.2 Religion

Religious life may become an important part of a child's development. Harsh measures to enforce the participation of children in religious activities may, however, lead children to react against all forms of religious life. The foster child should rather be made to feel welcome to attend religious services.

8.2.1 Religious Affiliation

Natural parents have the right to designate the religious affiliation of the child. The Area Office has responsibility for selecting a foster care resource of their religious faith, if possible, or one whose religious faith and practices are not in conflict with those of the natural parents.

Natural parents shall be asked to sign a statement to the effect that they have been told the facts about the religious practices of the foster home and that they have no objections. (Form CFS 433)

8.2.2 Religious Training

The foster parents shall be expected to respect the wishes of the parents in the matter of religious training. Foster parents should be advised that they have no authority to arrange for baptism or to consent to a child becoming a member of a church. In fact, they should not discuss these matters with the natural parents, but with the social worker who will, in turn, handle them with the natural parents.

Section 9 Complaints and Grievances

9.1 Complaints about Agency Service

Foster parents who request service from a worker and hear nothing in response to their request within a reasonable time (a maximum of two working days), should ask to speak to the worker's team leader or Area Administrator. It is the responsibility of the agency to give reasonably prompt service or an explanation to foster parents as to the intent of agency plans. Once the complaint is made above the worker's level, the foster parents will be contacted by a worker within one day as to the service requested.

9.2 Complaints about Foster Homes

If a community complaint is made about a foster home, it is the responsibility of the Area Office worker to immediately investigate the charge. The foster parents and the worker are expected to cooperate with each other to establish whether the complaint is or is not valid. The cooperation and understanding on the part of both the agency and the foster parents is necessary so that the final resolution is made in the best interest of the foster child, the foster parents, and the Department.

APPENDIX A

Study and Evaluation

Licensing is the method by which the Department affirms the eligibility of the applicant to receive a foster home license in accordance with the standards, policies, and procedures for licensing of foster family homes.

Recommendation of a home for the original or first, renewal or relocation license shall be in conformity with the current standards, policies, and procedures of the Illinois Department of Children and Family Services.

A. Time Limit

All foster home studies should be completed within 90 days following the date shown on the application.

Foster home studies not completed within this time limit are to be discussed with the immediate supervisor and the reason for the delay entered in the record.

B. Foster Home Study Evaluation

Foster home studies shall be based on casework process and methods which should result in:

1. An understanding on the part of the worker as to the kind of family making application.
2. A greater understanding on the part of all concerned as to what the family can give to the foster child for his physical, emotional, and social growth.
3. An evaluation of whether the family can share responsibility for the physical and emotional care of the child with the worker and the child's own parents or agency.
4. Knowledge of the family's financial status and the physical facilities of the home for caring for a child.
5. Some preparation or orientation of the family toward caring for a particular child or for recognizing their inability to do so.
6. During the foster home study, there shall be separate and/or joint interviews with the foster parents; interviews with other members of the household, when indicated; contacts with references either through personal contact or, where this is not possible, by letter or phone.
7. All material secured should be recorded and kept in the agency service record.

C. Use of Medical Statement Forms

Form CFS-602, Medical Report of an Adult or Child in a Licensed Child Care Facility, may be used for obtaining medical information. Instructions are as follows:

1. A medical statement form must be completed for each member of the household. This means foster parents, their children, and adults employed by or residing in the family home. The purpose of this requirement is to verify that no member of the household has any health condition which would affect the foster child's welfare adversely or deprive him of adequate care and supervision. Completed forms are a permanent part of the record.
2. In general, a medical report shall be requested of the applicants after it is established that there is reasonable compliance with other licensing standards. Whether a doctor issues his statement on the basis of a current physical examination or on his knowledge regarding the health of individual members of the household acquired through previous diagnostic or professional service is within his discretion and judgment. The comprehensiveness of examination is also a matter of his professional judgment. However, a Mantoux test or chest X-ray is required, and the doctor shall report his findings on the medical report. If the doctor has recommended a chest X-ray, he will, in addition to reporting his findings, report his suggestions regarding subsequent examinations.
3. If the worker has questions about the health of any member of the household, it is desirable that the worker consult the physician in person or by letter.
4. The foster home record shall include information regarding instructions given to the applicants as to the records that they shall keep and their obligation to notify the licensing office of changes during the year which affect license status. If the home was disapproved, the specific reasons and the explanation that was given to the applicants shall be recorded.

APPENDIX B

Evaluation Guidelines

Worker must record on all topics for the annual evaluation of the foster home. This evaluation is to be shared, totally, with the foster parents and a copy is to be filed in the case record. (NOTE to worker: This annual evaluation will replace every other six (6) month recording for foster parents' records.)

I. Case Name License Capacity Worker's Name

II. Dates Covered by This Recording From To

Following Information on Significant Phone Contacts and Face-To-Face Contacts:

Date of Contact—Persons Contacted—Purpose—Outcome (Briefly stated)

III. Current Address, Phone Number and Directions to Home

IV. Family and Home Information

Composition of Family _____

Physical Standards of Home _____

Employment _____

Income _____

Other Related Areas Requiring Comment or Reflecting Change _____

V. **Health of Family Members** _____

This should be discussed with licensee and recorded. A medical report, CFS 455, from the doctor shall be requested, or the doctor shall be consulted—with consent of the individual concerned. This should be done if information is considered essential in establishing that there is no health condition which would adversely affect the child(ren) who are cared for or who may be received for care. The findings should be recorded in the relicensing evaluation.

VI. **Inter-Relationships of Family Members** _____

Their affection, tolerance, and understanding of child's behavior and habits; wisdom and judgment in guiding and directing child; sensitivity to his feelings about his own parents and past experiences; feeling and attitude toward child's parents.

VII. **Interest in Adoption** _____

Record if foster parents have expressed interest in adoption (if generally or in regard to a particular foster child) or if worker sees this as possibility.

VIII. **Relationship with Agency** _____

Understanding and acceptance of their role, the worker's and the agency's. Do these attitudes and feelings promote or hinder child's growth? Foster parents' involvement in Foster Parent Association.

IX. **Present Problems or Developing Problems** _____

In regard to worker's assessment of the present foster home situation or indications or clues worker thinks might lead to development of future problems.

X. **Goals and Plan Information**

Statement of Long Range and Short Range Goals _____

Movement Toward Accomplishing Long Range Goals _____

Movement Toward Accomplishing Short Range Goals _____

Success of Goals and Plans to Date: Modifications Necessary—Reasons—New Plans _____

Expected Time Necessary to Accomplish Goals _____

XI. Evaluation and Recommendations

Outstanding strengths and weaknesses of this home _____

If home can serve additional children, describe by age, sex, and type of child for whom it is best suited. _____

Statement regarding compliance or non-compliance with minimum standards. Include recommendations regarding capacity change and other changes seen to be necessary. _____

(This section will determine relicensing of home)

APPENDIX C

Minimum Standards for Licensed Foster Family Homes

Children and Family Services Regulation No. 5.12
Revised January 1, 1970

Section One

The Legal Basis for Licensing Foster Family Homes

I. The Child Care Act—Authority and Definitions

The Child Care Act is the statutory authority under which the Department of Children and Family Services, hereinafter referred to as the Department, licenses foster family homes, as defined in the Act, and prescribes minimum standards for licensing such homes.

The Act defines "foster family home" to mean "a facility for child care in residences of families who receive no more than 8 children unrelated to them, unless all the children are of common parentage, for the purpose of providing family care and training for the children on a full-time basis. The family's own children, under 18 years of age, shall be included in determining the maximum number of children served. The term 'foster family home' includes homes receiving children from any State-operated institution for child care; or from any agency established by a municipality or other political subdivision of the State of Illinois authorized to provide care for children outside their own homes. The types of foster family homes are defined as follows:

- "(a) 'Boarding home' means a foster family home which receives payment for regular full-time care of a child or children.
- "(b) 'Free home' means a foster family home other than an adoptive home which does not receive payments for the care of a child or children.
- "(c) 'Adoptive home' means a foster family home which receives a child or children for the purpose of adopting the child or children.
- "(d) 'Work-wage home' means a foster family home which receives a child or children who pay part or all of their board by rendering some services to the family not prohibited by the Child Labor Law or by standards or regulations of the Department prescribed under this Act. The child or children may receive a wage in connection with the services rendered the foster family.
- "(e) 'Agency-supervised home' means a foster family home under the direct and regular supervision of a licensed child welfare agency, of the Department of Children and Family Services, of a circuit court, or of any other State agency which has authority to place children in child care facilities, and which receives no more than 8 children, unless of common parentage, who are placed and are regularly supervised by one of the specified agencies.
- "(f) 'Independent home' means a foster family home, other than an adoptive home, which receives no more than 4 children, unless of common parentage, directly from parents, or other legally responsible persons, by independent

arrangement and which is not subject to direct and regular supervision of a specified agency except as such supervision pertains to licensing by the Department."

II. Licensing of Foster Family Homes

A. Application for License

1. Application for license of a foster family home shall be filed by the supervising agency on forms prescribed and furnished by the Department. The official form for this purpose is CFS 501, "Application for License for Foster Family, Day Care, or Night-Time Home."
2. The application filed shall be in effect until it is withdrawn, or otherwise becomes invalid, or there are changes in the home necessitating a change in the licensed status. The official form for this purpose is CFS 501-1, "Application for Change in Licensed Foster Family, Day Care, or Night-Time Home," to be submitted by the supervising agency as the change or changes occur.
3. CFS 501-2, "Instructions for Filing CFS 501 and CFS 501-1," are detailed procedures to be followed in filing applications for licenses and applications for changes in licensed homes.
4. A new application shall be filed when:
 - a. Application for license has been withdrawn, and reinstatement is sought.
 - b. The Department has revoked or refused to renew a license and reinstatement is sought.

B. Provisions Pertaining to the License

1. No foster family home shall be licensed for the care of children in excess of the number specified by law. A home may be licensed for the care of fewer children than the stipulated legal maximum, but shall not receive more than the number of children for which it is licensed.
2. License shall be effective for two years from date issued unless there are changes in the provisions of the license necessitating reissuance; the license is revoked; or license is invalidated for other reasons.
3. License shall not be transferred to another person nor be valid for an address other than that shown on the license issued.
4. A current license shall be readily available for display by the licensee.
5. There shall be no fee nor charge for license issued.

III. Published Standards Based on Official Regulations—Discrepancies Between

Published standards are based on the Department's Regulation No. 5.12, "Minimum Standards for Licensed Foster Family Homes." Should there be any discrepancy between any section or item of the standards, as published, and the official Regulation, as filed with the Secretary of State, requirements under the Regulation shall apply.

IV. Deputy Director, Area Operations, Delegated Responsibility

The Deputy Director, Area Operations, is delegated responsibility by the Director of the Department to see that minimum standards, contained herein, are met and maintained by foster family homes subject to licensing:

Section Two

The Home Environment and Family

I. Home Conditions

A. General Provisions for Child Care

1. The foster home shall be safe, clean, well ventilated, properly lighted and heated. The water supply and sanitation of the home shall comply with all requirements of the local and/or state health authorities, and where there is question or need for details, the State Department of Public Health shall be consulted. There shall be reasonable protection from all fire hazards. The foster parents shall protect children by storing drugs, household supplies and dangerous tools, weapons, and ammunition in places inaccessible to them.
2. The foster home which proposes to receive children for care shall provide each child with a separate bed, or crib, except that two siblings between 2 and 6 years of age, or two unrelated children of the same sex between 3 and 10 years of age, or two older brothers or two older sisters may share a full sized bed.

Grouping of children in sleeping rooms shall take into consideration the age and sex of children. Children over six years of age shall not share a room with children of the opposite sex. No child one year of age or older shall share the bedroom with either or both of the foster parents. There shall be a minimum of 400 cubic feet, or 40 square feet, of space per child with adequate outside window exposure or auxiliary means of ventilation.

Sleeping rooms shall be suitably and comfortably furnished. There shall be good level springs and mattresses and comfortable bedding. Linens shall be changed at least weekly, and more frequently for an enuretic child. Waterproof mattress covers shall be provided for children under three years of age and for any child who is enuretic.

3. There shall be safe outdoor space for active play protected against such hazards as traffic, pools, railroads and construction, and from temperature extremes.
4. There shall be provisions for removing a child who is ill, or suspected of having a contagious disease, from other children pending medical determination.
5. Food products from home-raised animals shall meet the standards of the Departments of Agriculture and Public Health. Household pets must be inoculated if required by state or local regulations.
6. The foster home shall provide food with good nutritional content, and in sufficient quantity to meet the needs of children.

B. Other Businesses

- 1.. Foster home applicants operating a rooming or boarding house, or other business enterprise on the premises, shall present evidence that the operation of such a business does not interfere with family life.

A rooming house is defined as a commercial residential facility which provides living quarters for individuals apart from those occupied by the operator. They may share facilities such as a kitchen and bathroom in common, but there are no mutual relationships and responsibilities such as characterize family living.

A *boarding house* is defined as a commercial facility which serves meals to persons who live on the premises or elsewhere. Although such persons may eat at the table with the operator and his family, the relationship between the operator and the recipients of the service has none of the elements which characterize family living.

2. The foster mother shall not be employed or conduct business within or away from her own home, except that special permission may be granted by the supervising agency upon determination that such plans will not interfere with child care.

II. The Foster Family

A. Both Parents Involved

The foster family shall be a complete family group with both foster parents actively interested in the child, except that single parent homes may be utilized to meet the needs of certain children. Each foster parent shall be willing and able to assume appropriate individual and mutual responsibilities for the child or children received for care.

B. Personal Characteristics of Foster Parents

1. Foster parents shall be stable, responsible, physically able, mature individuals of reputable character, who can exercise good judgment in caring for children and who have the capacity to accept agency supervision.
2. Foster parents shall evidence a genuine concern for and understanding of the child's total needs. They shall have an appreciation of the child's relationship with his own family.
3. The foster family shall have sufficient income and resources to provide adequately for themselves and the children under care.
4. The foster parents shall respect the child's religious background and affiliation.

C. Health of Foster Family

1. Prior to licensing, the foster parents shall furnish the supervising agency with a medical report on each member of the household, including foster parents, their children, other persons residing in the foster home, and other persons assisting in child care. Persons employed in the foster home, in other than a child care capacity, may be required to have physical examinations if the supervising agency deems it necessary.
2. The medical report shall provide significant findings of the physician, including a tuberculin skin test or a chest X-ray if the skin test is positive, and a general statement from the physician as to the presence or absence of any communicable disease or infectious diseases and the state of the individual's mental health.
3. Medical re-examinations may be required at the discretion of the physician or the supervising agency.
4. The medical report shall be submitted on forms provided by the supervising agency.

Section Three
Services to Children

I. Number of Children Served

A. Maximum Number of Children Served

The maximum number of foster children permitted in a licensed home shall be in reverse ratio to the number of own children under the age of 18, in the home.

The following table illustrates the numbers of children permitted:

Own Children, under the Age of Eighteen in the Home	The Maximum Number of Foster Children Permitted
8	0
7	1
6	2
5	3
4	4
3	5
2	6
1	7
0	8
0	9 or more if of common parentage

B. Child Care Assistants

The number of non-related children placed in the home shall be determined by their ages, the ages and number of own children in the family, and the child care or household assistants available to the foster mother. There shall be a responsible person to assist the foster mother with special activities, with routines, such as toileting and feeding, and to help during other crisis periods when a second person is needed to assist with the children or relieve the foster mother. The extent and type of assistance needed shall be determined by the foster mother in cooperation with the supervising agency, considering the total number and ages of children under care.

1. No more than four children under 6 years of age, including own children, shall be cared for unless there is another responsible person to assist the foster mother in the home.
2. If there is a total of four children in the home, two or more of whom are under 2 years of age or handicapped, there shall be another responsible member of the family or other responsible person to assist the foster mother.
3. If there is a total of five or more own and foster children under 6 years of age in the home, including two or more under 2 years of age or handicapped, there shall be another responsible member of the family or other responsible person to assist the foster mother.
4. The person assisting the foster mother shall be at least 16 years of age, except that the person may be 14 years of age when school is not in session. If the person assisting is 14 to 18 years of age, and not a resident in the home, he is to be considered only as a helper, not as a child under care.

II. Child Care

A. Planned Activities and Personal Effects

1. The daily routine shall be such as to promote good health, and provide an opportunity for normal activity with time for rest and play. Each child shall be given training in good health habits and shall be adequately clothed.
2. All children between the ages of 7 and 16 are required by law to attend school regularly. If a child is excluded from school or cannot benefit from regular school attendance, special schooling shall be sought and, wherever possible, provided for him. Every child shall be given the opportunity to complete high school or vocational training in accordance with his aptitude.
3. Each child shall be given an opportunity for religious training. Whenever practicable, the child shall be placed with foster parents of his own religious faith, or in accordance with the wishes of the natural parents.
4. Every child shall be given the opportunity to develop healthy social relationships through participation in neighborhood, school, and other community and group activities. He shall have the opportunity to invite friends to the foster home and to visit in the home of friends.
5. Work assignments shall be in keeping with the total healthy development of the child. Exploitation of the child is prohibited. No child shall be permitted to do any hazardous tasks, or to engage in any work which is in violation of the child labor laws of the state. Every child shall have the opportunity to learn to assume some responsibility for himself and for household duties in accordance with his age, health, and ability. Tasks shall not be assigned as punishment, nor shall such assignments interfere with school, sleep, play, or study periods.
6. Space shall be provided where each child may keep his personal belongings.

B. Medical Examinations, Records and Care

Each child shall have a physical examination by a physician prior to placement in the foster home to determine that he is free from contagious or infectious diseases. If a complete physical examination cannot be given prior to admission, it shall be given within 30 days after placement unless there is clinical reason for further delay.

Examination shall include a tuberculin skin test or a chest X-ray if the skin test is positive.

1. The foster parent shall have knowledge of what immunizations children under care have had and any physical limitations and medical recommendations. They shall have available, at all times, the name, address, and telephone number of the child's physician, parents, or guardian, and the supervising agency.
2. Each child shall be under continuing medical and dental supervision. Foster parents shall keep the supervising agency informed of any health problems. In case of sickness or accident, immediate medical care shall be secured for the child in accordance with the supervising agency's predetermined directions.

3. A child may be exempt from immunizations on constitutional grounds upon written request of the child's parent or guardian. A home admitting such a child shall do so on its own or supervising agency's responsibility.

C. Training and Discipline

Child training and discipline shall be handled with kindness and understanding. No child shall be deprived of a meal as punishment. No child shall be subjected to unusual, unnecessary, severe, or corporal punishment inflicted in any manner upon the body, or to verbal abuse, threats, or derogatory remarks about him or his family.

Reports of mistreatment coming to the attention of the supervising agency shall be investigated promptly and referred to proper authorities if this is indicated.

D. Emergency Care and Release of Children

1. Children under care shall be supervised at all times. In case of emergency requiring the foster parents' temporary absence from the home, arrangements shall be made with designated, responsible persons for the care of the children during the period of absence.
2. The foster parents shall not release a foster child to anyone other than the agency, parent, or guardian from whom the child was received for care, or a person specifically designated by said agency, parent, or guardian.

E. Information about Child to Be Confidential

Information concerning a child, his family, and his background shall be regarded and handled as confidential by all persons involved in his care.

III. Records to Be Maintained by Foster Family

The foster family shall maintain records regarding children received for care as required by the supervising agency. Records shall be current and shall be open to inspection by the supervising agency, upon request.

IV. Agency Supervision

A family shall be visited by a representative of the agency responsible for the children placed in the home as frequently as needed to assure the continuing well-being of the children and that the home continues to meet standards for licensing. Visits shall be made at no less than six-month intervals.

A family receiving children independently of an agency shall be visited by authorized representatives of the Department at periodic intervals deemed necessary to determine that the home continues to be eligible for license to care for unrelated children.

V. Adoptive Homes — Special Considerations

The purpose of adoption shall be to provide a permanent, legal home for a child who, otherwise, would not have a family of his own.

A. Content of Study

Since lifetime relationships for the child are involved, the adoptive home study shall be done with sensitivity and professional competence. The study of an adoptive home shall indicate a thorough knowledge of the adoptive couple and the adoptive family unit. There shall be ample evidence that the adoptive family can be reasonably expected to offer an adoptive child full opportunity for his potential individual growth and development.

B. Special Considerations

In addition to all applicable standards prescribed for foster family homes, in general, special consideration shall be applied to adoptive homes.

1. If a married couple is adopting, there shall be determination that the marriage is a stable one and that a healthy, mutually satisfying relationship exists between them.
2. The applicants shall be of legal age. In general, adoptive parents shall be within an age range usual for natural parents of a child of the age to be adopted.
3. The adoptive applicants' reasons for seeking a child through adoption shall be related to a healthy desire for a child.
4. The adoptive parents shall evidence a genuine concern for and interest in children, and shall show promise of understanding the special need of an adoptive child and an ability to help him come to know about his adoption and heritage in a constructive way.
5. The adoptive family shall show evidence of ability to accept an adoptive child as a member of the total family group.
6. The adoptive family shall have sufficient total income to assure financial stability and security to meet current expenses for the daily care of themselves and the child, and evidence of financial planning for the future care of the family.
7. The adoptive parents shall have an appreciation of spiritual values, with indication of ability to relate them to the adoptive child through an active religious affiliation or otherwise.
8. During the supervisory period, the child shall be under continuing medical supervision, and a final medical report shall be submitted to the supervising agency prior to the legal consummation of the adoption.

APPENDIX D

Responsibilities and Duties of the Juvenile Court

It must be recognized that all responsibilities and authority for Department wards originate with and remain with the Juvenile Court, and that the court has complete authority and power of direction and decision in all matters affecting the life and welfare of the ward. While statutory provisions set forth certain responsibilities and prerogatives of the guardian and custodian, the court has the ultimate responsibility for the care and conduct of the ward's life, and the guardian and custodian are, at all times, accountable to the court for their actions and activity. Although the following outlines certain areas in which the court must or should be involved and/or informed, it should be kept in mind that the court may at any time require involvement in and provide direction for any aspect in the ward's life, and the guardian and custodian must be responsive to such court involvement/direction.

Subject to the above, following are the areas in which the court must be advised or take action:

1. Adjudication of wardship and decision as to disposition of ward, including appointment of guardian and/or custodian with specific powers and duties.
2. Supplemental Orders concerning specific powers and duties for guardian and/or custodian, such as power to consent to the ward's adoption, or other matters relating to parental visitation and conduct and other aspects of the ward's life.
3. The court may require reports from the ward's guardian or custodian at any time, or at specified intervals.
4. The court may, either on formal petition or by its own motion, discharge a ward from guardianship or control of the court. It may also, subject to certain procedures, transfer guardianship or custody of the ward to another person.
5. When placement of a ward outside of the state of Illinois is planned, prior consent of the court must be secured.
6. When specifically provided for by court order, consent of the court must be secured prior to the movement of a ward from one placement to another, whether within or outside of the state.
7. The court may at any time stipulate the frequency and terms of parental visitation of ward. All matters involving strong differences between parents and the agency with regard to parental visitation of the ward should be referred to the court for decision and direction.
8. When specifically provided for by court order, consent of the court must be secured prior to the return of a ward to the custody of its natural parent(s).
9. Consent of the court must be secured prior to the return of a ward to the custody of a parent or individual who was found to have abused the child prior to the child's having been adjudicated a ward of the court.

10. The court must be informed when a ward is placed in any security detention facility without having secured a prior court order for such placement.
11. The court must be informed when a ward has been committed to the Department of Corrections.
12. The court must be informed when a ward is placed in any Department of Mental Health facility.
13. The court must be informed when a ward who is placed in a Department of Mental Health facility requests his release from such facility.
14. The court must be informed when a ward is released from a Department of Mental Health facility, for any reason.
15. The court must be informed when a ward marries.
16. The court must be informed when a ward enters military service, Job Corps, Peace Corps, or like programs.
17. If the court has indicated such, either formally or informally, it must be informed when out-of-state travel is authorized for a ward.
18. Prior consent of the court is required for out-of-country travel by a ward.
19. The court must be informed when a ward suffers serious illness or injury; becomes pregnant; without authority absents himself from the control of his custodian (runaway); or becomes the subject of a formal criminal complaint or petition for delinquency.
20. The court must be informed of unusual events and incidents having a major import in the life of the ward.
21. Only the court may consent to the baptism of a ward.
22. The court should be informed when a ward acquires a substantial estate, or a guardian of the estate for a ward is appointed.
23. The court must be informed of the death of a ward.
24. The consent of the court must be secured for the performance of an autopsy on a deceased ward in the event that a parent is available and refuses such consent.

APPENDIX E

Responsibilities and Duties of the Guardianship Administrator

The Juvenile Court Act provides that when a child is committed to the Department of Children and Family Services, the Guardianship Administrator of the Department shall be appointed guardian of the person of the ward. The powers and duties of a guardian are set forth in the Juvenile Court Act, and these are supplemented by administrative policy statements and directives, as well as by specific court orders and directives in individual cases. The Guardianship Administrator is, in effect, an agent for the court and is accountable to the court for the conduct of all matters affecting wards' lives. He, necessarily, must delegate many of his responsibilities and duties to field staff and actual custodians, but he remains accountable for the actions of field staff and custodians and must be involved in all matters of major concern in wards' lives.

1. He must be advised and provided with a certified copy of the court order when a child has been placed under his guardianship by the court.
2. He must be advised and be provided with a copy of any supplemental orders entered by the court.
3. He must be provided with a copy of any report made to the court pursuant to court order. It is desirable that he be provided with a copy of any report made to the court.
4. Only the Guardianship Administrator may petition the court for discharge from guardianship of a ward.
5. Only the Guardianship Administrator may consent to the adoption of a ward.
6. The Guardianship Administrator must be involved in the planning and conduct of guardianship cases appealed to a higher court or federal courts, contempt citations, and all court matters which may have statewide import relating to his wards.
7. His consent is required for the placement of a ward outside the state of Illinois.
8. In cases where court consent is required, he should be advised of the movement of a ward from one place to another.
9. The Guardianship Administrator executes interstate placement agreements on behalf of the Department, only if requested by another state for an individual child.
10. He must be advised when the court has entered an order relating to parental visitation of a ward.
11. In those cases where court review/consent is required, he must be advised of a ward's return to the custody of his natural parent(s).
12. He must be notified prior to the return of a ward to the custody of a parent or other individual who was found to have abused the ward prior to the child's adjudication as a ward of the court.
13. He must be consulted/advised when a ward is placed in any security detention facility without having secured a prior court order for such placement.

14. When a ward is committed to the Department of Corrections, the Guardianship Administrator shall determine if guardianship of the ward is to be continued or if a petition for discharge from guardianship is to be submitted to the court.
15. Only the Guardianship Administrator may authorize placement of a ward in any Department of Mental Health facility on a voluntary basis.
16. He shall be informed when a ward exercises his right to request release from a Department of Mental Health facility.
17. Only the Guardianship Administrator shall execute the required forms for release of a ward from a Department of Mental Health facility.
18. He shall be provided with a copy of the progress report made for a ward placed in a Department of Mental Health facility.
19. He shall be consulted concerning future plans for a ward, no later than six months before the ward's 21st birthday, who is placed in public or private facilities for the mentally retarded.
20. Consents, generally, which would be required of a parent were the child not a ward of the Department are the prerogative of the Guardianship Administrator.
21. Consents for major medical, dental, surgical, or inpatient psychiatric treatment of a ward may be executed only by the Guardianship Administrator.
22. Only the Guardianship Administrator may consent to the marriage of a female ward under age 18 or a male ward.
23. Only the Guardianship Administrator may consent to a ward's enlistment in the armed forces, Job Corps, Peace Corps, and similar programs.
24. Consents for the issuance of a driver's license and permits, and for ownership of motor vehicles by wards under age 18, are the prerogative of the Guardianship Administrator.
25. He should be advised when field staff authorizes out-of-state travel for a ward.
26. His consent is required, in addition to that of the court, for out-of-country travel by a ward.
27. He must be advised of any serious illness or injury to a ward, pregnancy of a ward, unauthorized absence of a ward, or when a ward is criminally charged or made the subject of a delinquency petition.
28. He must be advised and consulted in the event of an unusual event or incident having a major effect on a ward's life.
29. Only he may consent to the participation by a ward in a possibly hazardous activity such as airplane rides, race-car driving, use of firearms, etc.
30. He consents to the issuance of a passport for a ward under age 13.
31. Only he may authorize the administration of a polygraph or similar test to a ward.
32. He should be advised when the court has authorized the baptism of a ward.
33. The Guardianship Administrator is responsible for the application and receipt of benefits to which a ward may be entitled. These include Social Security, Veteran's Administration, Railroad Retirement, and similar benefits.
34. He shall advise the local office when a ward's benefits are terminated or adjusted for any reason.
35. He shall be advised when a ward acquires an estate or a guardian of the estate is appointed for the ward.

36. The Guardianship Administrator has the responsibility for arranging legal representation on behalf of a ward in litigations which may affect him, except in criminal or delinquency matters wherein the court is required to appoint counsel in cases where the defendant cannot afford to pay for counsel.
37. Only the Guardianship Administrator may execute releases from liability (including releases for photographs and publicity) on behalf of a ward to an individual or agency having some involvement with a ward.
38. The Guardianship Administrator shall file the necessary alien-status report forms on behalf of wards with the U. S. Department of Immigration.
39. He shall be informed immediately of the death of a ward.
40. Consents for performance of autopsies on deceased wards, when no parent is available, shall be executed by the Guardianship Administrator.

APPENDIX F

Responsibilities and Duties of Field/Casework Staff as Agents for the Guardianship Administrator

Field/casework staff has the basic responsibility for the conduct of a ward's life, arranging for proper care, education, and training, planning for his future, and assuring that the mandates placed upon the guardian by statute and court order are properly met. Subject to statutory requirements, administrative policy and directives, and court orders, field casework staff:

1. Serves as the agency representative in initial court proceedings to secure custody and guardianship of a ward; arranges for the filing and processing of supplemental court petitions, or represents the agency/guardian when supplemental petitions are initiated by others; informs and provides the guardian with copies of court orders.
2. Provides the court with reports concerning the ward's adjustment and progress, when so ordered; transmits copy of court report to guardian.
3. With advice of actual custodian, recommends to guardian termination of guardianship when agency protection and assistance is no longer required or possible; transmits completed Petition and Order for Discharge forms, when received from guardian, to State's Attorney for processing; transmits to guardian copy of Order for Discharge when signed by court.
4. Advises guardian when consent for ward's adoption is indicated; prepares and transmits to guardian necessary forms.
5. Reports to guardian when case involving ward is appealed to a higher court, is filed in federal court, a contempt citation is entered against the guardian or caseworker, or a court action is pending which may have a statewide effect on all wards; works with the guardian and Department legal counsel in resolving such matters.
6. Locates and arranges necessary placement resource for ward.
7. When ward is in placement, works with and supervises activity of actual custodian of ward.
8. When indicated, arranges out-of-state placement of ward and secures consent for such placement from court and guardian.
9. When necessary, arranges for replacement of ward from one placement facility to another; when specifically so required by court, secures consent of court for replacement and provides Guardianship Administrator with copy of court's consent.
10. Forwards to the Guardianship Administrator, for his signature, Interstate Placement Agreement forms which are required by another state.
11. When indicated and legally possible, places and supervises ward in suitable adoptive home.
12. Works with parent(s) and custodian in arranging suitable parental visitation of ward, subject to any court order that may be in force concerning visitation.

13. Arranges for ward's return to custody of natural parent(s) on trial basis when circumstances so indicate. If court so requires, secures consent of court prior to replacement and provides guardian with copy of court order.
14. If return of ward to parent who abused child prior to his or her removal from that home is indicated, confers with Guardianship Administrator and custodian concerning proposed plan and, with concurrence of guardian, secures consent of court for replacement.
15. When placement of a ward in a security detention facility, without prior court order, has been made or is contemplated, advises and confers with Guardianship Administrator as to proper procedures; advises court of placement.
16. Advises Guardianship Administrator when ward has been committed to Department of Corrections; assists Guardianship Administrator in determining if a petition for discharge from guardianship is to be filed, or if guardianship is to be continued.
17. If ward's interests require placement in a Department of Mental Health facility, secures appropriate medical/psychiatric recommendation and guardian's consent prior to placement.
18. Advises guardian and court when a ward age 13 or older files a request for release from Department of Mental Health facility, and reports as to DMH intent to file for involuntary court commitment.
19. When ward is released from Department of Mental Health facility for any reason, makes necessary plans/arrangements for ward's care; secures guardian's consent for release; advises court of release.
20. Receives and takes appropriate action on reports concerning ward placed in DMH facility; transmits copy of such reports to guardian.
21. Develops plans for and confers with guardian concerning future protection of ward, no later than six months before ward's 21st birthday, who is placed in public or private facilities for the mentally retarded.
22. Secures consent of Guardianship Administrator when ward requires major medical, dental, surgical, or inpatient psychiatric treatment in public or private facility.
23. When ward requests consent to marriage, confers with custodian and advises guardian concerning all aspects of situation. If guardian consents, works with ward in developing plans.
24. Evaluates ward's plan for enlistment in armed forces, Job Corps, Peace Corps, and similar programs; advises guardian as to his consent.
25. Evaluates ward's request for driver's license or permit, or motor vehicle ownership if ward is under age 18, and counsels Guardianship Administrator concerning consent.
26. Consents, on behalf of Guardianship Administrator, to out-of-state travel within continental United States by ward; if required by local court, secures prior court consent for travel; provides guardian with copy of consent.
27. For out-of-country travel by ward, secures consent of both court and Guardianship Administrator.
28. Reports to court and Guardianship Administrator, and takes appropriate action, concerning ward's serious illness or injury, pregnancy, runaway, or criminal or delinquency charge filed against ward.
29. Reports to and works with court and Guardianship Administrator concerning unusual events/incidents having a major effect on life of ward.

30. With advice of custodian, secures guardian's consent for ward's participation in activity which may be hazardous, such as airplane rides/instruction, race car driving, firearms use.
31. Secures guardian's consent for issuance of a passport to ward under age 13.
32. Counsels with Guardianship Administrator concerning his consent to administration of a polygraph or similar test of a ward.
33. With advice of custodian, petitions court for consent to ward's baptism; advises guardian of court's action.
34. Provides necessary reports and information so that Guardianship Administrator may apply for and receive benefits to which ward may be entitled.
35. Reports to court and Guardianship Administrator when ward acquires substantial estate, or a guardian of the estate is appointed for a ward.
36. Advises the Guardianship Administrator when situations arise which indicate that a ward may require legal representation, except in cases where the ward is involved in a criminal charge or delinquency petition in which the court is required to appoint counsel.
37. Refers to Guardianship Administrator all matters in which a release from liability, including photo/publicity consent, is required by an individual or agency having some involvement with a ward.
38. Advises the Guardianship Administrator when a report of alien status is required for a ward by the U. S. Immigration Department.
39. Reports to the court and Guardianship Administrator upon the death of a ward.
40. Advises the Guardianship Administrator when a consent for autopsy on a deceased ward is needed and there is no parent available to execute such consent; advises the court when a consent for autopsy is required, a parent is available, and parent refuses consent.

APPENDIX G

Responsibilities and Duties of Foster Parent or Institution as Actual Custodian of Ward

Although having no specific legal "status" in the majority of cases under existing law since they are appointed administratively as actual custodians rather than by the court as legal custodians, foster parents and other child care facilities have a very real and significant stature and role in the life of any/every ward. Theirs is the responsibility for the conduct of the ward's day-to-day life and the provision of food, shelter, education, training, and ordinary medical care. In virtually all situations, the involvement and counsel of the actual custodian is vital in making sound casework and guardianship decisions and they should, wherever possible, be consulted and considered.

Following are the areas in which the actual custodian is, or should be, involved:

1. The custodian advises the caseworker in situations in which supplemental court orders may be indicated, such as seeking the power to consent to the adoption of the ward, control of parental visitation, and like matters.
2. The custodian advises the caseworker as to the ward's adjustment, maturity, and ability when request for discharge from guardianship is contemplated.
3. He should be advised when the guardian has consented to the ward's adoption.
4. The custodian is responsible, subject to the advice and supervision of the caseworker, for the provision of routine education, training, food, shelter, immunizations, and ordinary medical care.
5. The custodian is involved by the caseworker in making placement of a ward and the movement of a ward from one placement resource to another; he interprets and prepares the ward for movement to another placement resource.
6. The custodian advises the caseworker with regard to problems existent or anticipated with regard to parental visitation.
7. The custodian advises the caseworker concerning the ward's readiness for return to natural parent(s).
8. The custodian advises the caseworker of his observations concerning need for placement of a ward in a mental health treatment facility.
9. The Department of Mental Health, as custodian, reports to the caseworker when a ward requests release from the DMH facility, advises as to the ward's future needs and placement planning when discharge from the facility is contemplated, makes progress reports concerning the ward in placement, and works with the caseworker in developing plans for the ward approaching age 21 who is in a facility for the mentally retarded.
10. The custodian reports to the caseworker situations which require the approval and consent of a parent or guardian.
11. He reports to the caseworker any needed major medical, dental, surgical, or inpatient psychiatric treatment required by the ward; in emergencies when the caseworker cannot be readily located, the custodian advises the Guardianship Administrator directly of the situation.

12. The custodian discusses with the caseworker his thoughts and recommendations concerning the ward's request for consent to marry.
13. The custodian discusses with the caseworker his thoughts and recommendations concerning the ward's plan to enter the armed services or similar program.
14. The custodian advises the caseworker as to the ward's maturity and adjustment with regard to securing a driver's license or permit, or acquiring a motor vehicle.
15. The custodian requests consent for out-of-state and out-of-country travel for the ward.
16. The custodian reports to the caseworker the serious illness of or injury to the ward, pregnancy or suspected pregnancy of the ward, runaway of the ward, and incidents in which the ward is charged with a criminal offense or as a delinquent.
17. He reports to the caseworker any event or incident having a major effect on the life of the ward, and works with the caseworker in resolving the problem or taking appropriate action.
18. The custodian advises the caseworker concerning consent for the ward's participation in potentially hazardous activity.
19. The custodian cooperates with the caseworker in securing a passport for the ward.
20. The custodian advises the caseworker when a law enforcement agency has requested that the ward be administered a polygraph or similar test.
21. He advises and consults with the caseworker concerning the ward's request for baptism.
22. The custodian reports to the caseworker any situation in which it appears that the ward may require legal representation.
23. He discusses with the caseworker any situation in which the activity of the ward may involve the execution of a release from liability for an individual or agency having involvement with the ward.
24. He immediately reports the death of a ward to the caseworker, or to the Guardianship Administrator if the caseworker cannot be reached.
25. The custodian advises the caseworker if a request is made to perform an autopsy on a deceased ward.

ABRIDGED INDEX

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