

NYS Foster Parent Manual

January 2007



To the Foster Parent

This manual was developed for use in your day-to-day life with the children in your care. It gives you practical information on topics like medical care, payments, and the role of the court, and also provides guidance on areas like welcoming a child, discipline, and parent visits. Throughout the manual, we emphasize the role of foster parents in working together with caseworkers and birth parents in helping the child achieve permanency.

Each chapter contains information on state policies related to foster parenting. Where relevant, you are encouraged to check with your foster care agency for local policies on specific issues.

You provide a valuable service in helping families through temporary difficulties and meeting the needs of children in a time of crisis and change. We offer this manual as an aid to your role as a foster parent.

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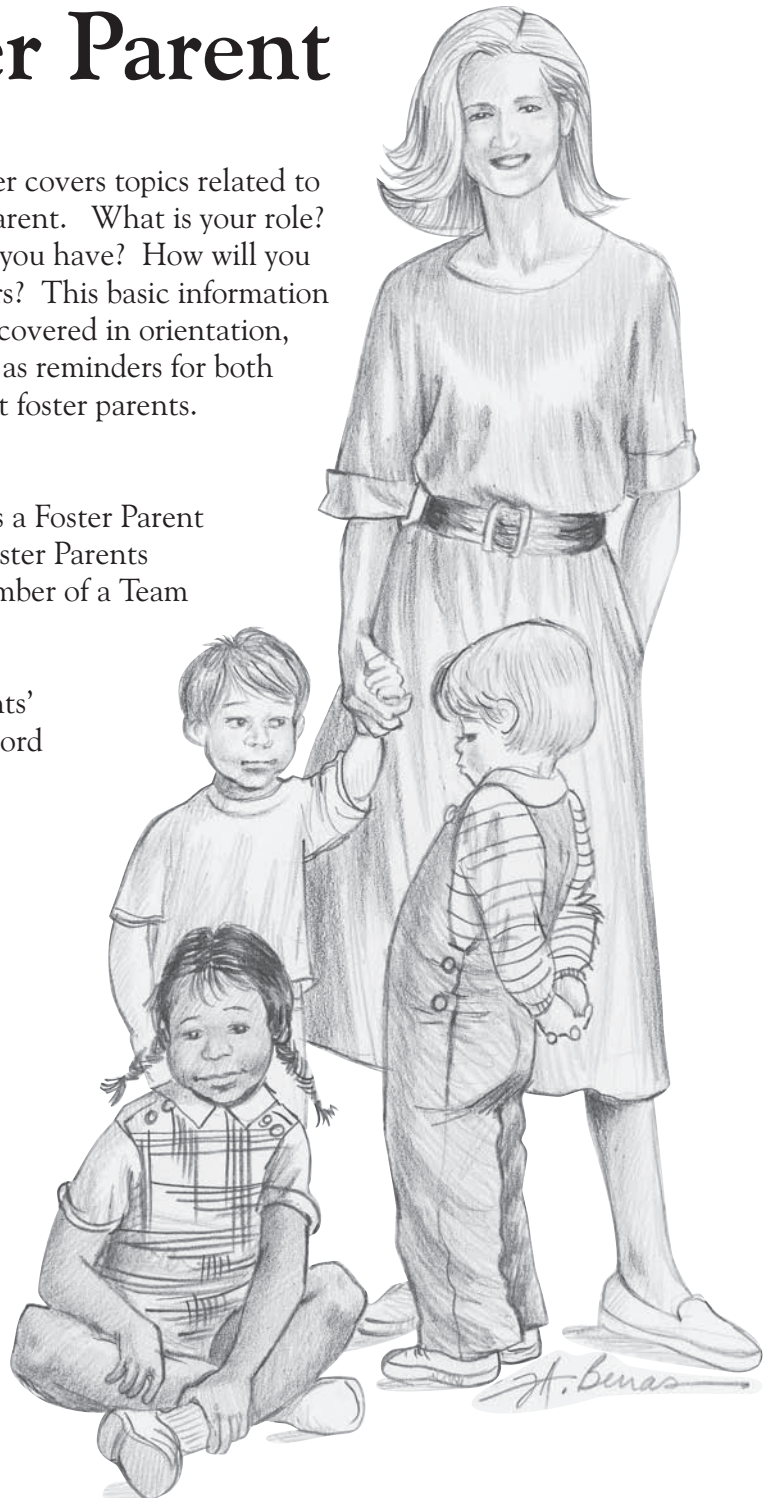
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Chapter 1 Being a Foster Parent

This first chapter covers topics related to being a foster parent. What is your role? What rights do you have? How will you work with others? This basic information may have been covered in orientation, but it can serve as reminders for both new and current foster parents.

Topics include:

1. Your Role as a Foster Parent
2. Rights of Foster Parents
3. Being a Member of a Team
4. Training
5. Payments
6. Foster Parents' Agency Record



1 Your Role as a Foster Parent

As a foster parent, you are responsible for the temporary care and nurturing of a child who has been placed outside his or her own home. During a time of disruption and change, you are giving a child a home. At the same time, your role includes working with the caseworker and the child's family so that the child can return home safely, when appropriate.

The role of the foster parent is to:

- Provide temporary care for children, giving them a safe, stable, nurturing environment.
- Cooperate with the caseworker and the child's parents in carrying out a permanency plan, including participating in that plan.
- Understand the need for, and goals of, family visits and help out with the visits.
- Help the child cope with the separation from his or her home.
- Provide guidance, discipline, a good example, and as many positive experiences as possible.
- Encourage and supervise school attendance, participate in teacher conferences, and keep the child's caseworker informed about any special educational needs.
- Work with the agency in arranging for the child's regular and/or special medical and dental care.
- Work with the child on creating a Life Book.
- Inform the caseworker promptly about any problems or concerns so that needs can be met through available services.

2 Rights of Foster Parents

Foster parents have the right to:

- Accept or reject a child for placement in a foster home.
- Define and limit the number of children that can be placed in the foster home, within legal capacity.
- Receive information on each child who is to be placed in the foster home.
- Expect regular visits (casework contacts) from the child's caseworker to exchange information, plan together, and discuss any concerns about the child. The visits (casework contacts) must take place every 30 days, with at least one visit taking place in the foster home every 90 days.
- Receive notice of Family Court permanency hearings to determine the appropriateness of the agency's permanency plan, and have the opportunity to be heard at the hearing.
- Participate in periodic case consultations to provide input into permanency hearing reports that must be prepared for Family Court. Participate in permanency hearings and Service Plan Reviews on behalf of a child placed in their home.
- Receive training on meeting the needs of children in foster care.
- Have their personal privacy respected.
- Participate, as an interested party, in any court proceeding involving the custody of that child.

Foster parents whose child has been in care for 12 continuous months or longer have the additional right to:

- Have their application to adopt that child be given preference and first consideration over all other applicants, *if the child is freed for adoption or the plan is to free the child for adoption.*

3 Being a Member of a Team

As a foster parent, you are part of a “team” working together for the sake of the family. Generally, the team consists of the foster parents, the birth parents, the child, the caseworker, and the law guardian. (In some cases, the birth parents may not be invited participants.) It may also include service providers, health care providers, and other family members. This means that you are not alone in caring for the child. You have support. It also means that you meet with the child’s family in visits and case conferences, and you keep the caseworker up-to-date on how the child is doing.

Working as a team member makes sense. If you don’t meet the child’s parents, you may have an unrealistic picture of them in your mind. They may become jealous of you if they don’t get to know you. All of this might have a negative effect on the child. Children will feel better about themselves if they know that their parents and foster parents are talking to one another and trying to help them get back home.

See **Chapter 6, Teamwork**, for more information.

4 Training

Requirements

Agencies must provide training for foster parents to help them meet the needs of children in their care, receive information on techniques in managing behavior and preventing abuse/neglect, and understand the expectations of the agency.

New foster parents need preparation and training to be effective in their role. Foster parents who have been accepted for a home study, or relatives who are in the process of a home study, must be oriented to:

- The social, family, and personal problems that led to family breakdown and the need for placement of the children.
- The problems and reactions of children upon separation, and the function and responsibility of the foster family in relation to the child, the birth parents, and the agency staff.
- The agency policy and practice to have defined goals to achieve permanency for each child entering the foster care system.
- The authority of the local social service districts, the Office of Children and Family Services, and the Family Court to supervise the agency’s practice.
- The nature of the relationship of agency staff to foster parents and children, including definitions of the function and responsibility of the caseworkers assigned to the children and their families.
- The payments to foster parents for care and expenses; the definition of foster family care; and certification or approval of the home.

- The rights and responsibilities of a foster parent as defined by a letter of understanding that must be executed at the time of certification or approval.

Foster parents who receive a higher level of board rate (e.g., special, exceptional) are required to actively participate in annual training: 4 hours to receive the special rate; 5 hours to receive the exceptional rate.

MAPP Training

Many counties and agencies use the Model Approach to Partnerships in Parenting/Group Preparation and Selection (MAPP/GPS) Pre-Certification Training Program. Although it is not required by the Office of Children and Family Services, it is the recommended selection and preparation program.

The MAPP approach to foster parenting encourages open communication and trust among foster families, adoptive families, birth families, and casework staff.

The MAPP program examines 12 criteria or skills necessary for successful foster/adoptive parenting. Through role playing, personal profiles, and other techniques, the homefinder and the applicant make mutual decisions about foster parenting.

Objectives of the training for prospective foster and adoptive parents are:

- Learning what to expect and what services are available.
- Looking at one's own strengths and needs.
- Developing skills in giving love and attention to a troubled child.
- Learning about stages of child development.
- Helping children manage behavior.

- Understanding the roles and responsibilities of teamwork.
- Helping foster parents develop a good understanding of the child's parents.

In addition to the MAPP/GPS training provided to new and prospective foster parents, in some agencies a Mini-MAPP training program is available to existing foster parents so that they too can learn the approach. Agency staff may attend Mini-MAPP training for the same reason.

Objectives of MAPP training for agency staff are:

- Helping applicants decide whether to become foster parents or adoptive parents.
- Helping foster/adoptive parents meet the needs of children in their care and their birth families.
- Creating teamwork between caseworkers and foster/adoptive parents.
- Creating partnerships between birth families and foster/adoptive parents.
- Helping new foster/adoptive parents be part of the child's permanency planning.

Other Training for Foster Parents

Other training may be available to support you in your role as a foster parent. Your DSS or other local agency may offer in-service training sessions for foster parents, arranged or conducted by staff, with guest speakers from community hospitals, schools, and local police and fire departments. Be on the lookout for such opportunities, and ask your caseworker about them.

Special training may also be available. Medical and mental health training can help foster parents manage certain issues and learn skills in dealing with them. Issues could include: child and adolescent development and behavior; emotional effects of child abuse and neglect; caring for a teen parent and her infant; domestic violence; loss and separation; behavior management; effects of drug and alcohol abuse; and depression.

Appropriate training can support foster parents with skills in being sensitive to signs of emotional distress in children and skills in crisis counseling. Such knowledge should help foster parents feel more confident in their role.

Health education programs for foster parents are valuable in covering many topics: childhood health requirements (e.g., immunization schedule); common health problems and dealing with emergencies; proper administration of medication and taking of a child's temperature; general infant, child, and adolescent health care issues; family planning and sex education; information on common chronic diseases (asthma, sickle cell anemia, diabetes, etc.); HIV/AIDS education, infection control, and universal precautions; fire safety training in the home; and nutrition and physical fitness.

5 Payments

Board and Care Rates

The annual board rate, which is set according to the child's age, is intended to reimburse foster parents for the cost of caring for the child. Foster parents receive schedules for the current board rate and for payment standards. County departments of social services set their own rates up to the maximum allowed.

There are three foster care payment categories for foster boarding homes: Basic, Special, and Exceptional. Basic foster care payments are made to foster parents who provide care for a child who has no identified special or exceptional needs.

★ *To receive special or exceptional payments, you will need to show your ability to care for children with special or exceptional conditions through past training and experience or by completing special training. You will need to participate in agency training every year and actively participate in case conferences. You must be able to work with the professionals involved in the child's treatment plan and to accept assistance and guidance in caring for the child.*

Within 90 days of placement, your local agency may designate the child's needs as "basic, special, or exceptional." A designation can be changed at any point during placement as the child's needs change.

Note: Districts must establish special and exceptional categories and the corresponding rates for each of those categories.

The designations are defined in the chart on the next page.

Special and exceptional rates need to be approved by the local DSS. Either a caseworker or a foster parent can submit a request for the special or exceptional rate.

Note: If the level of difficulty changes (decreases or increases) due to the child's need for care and supervision, the board rate will also change. The services expected of the foster parents will also change.

Board and Care Rates

BASIC	SPECIAL	EXCEPTIONAL
<p>The child has no diagnosed physical or mental handicap requiring special care, although he or she may have problems related to neglect, maltreatment, or lack of care and training.</p> <p>For children in the basic category, you should:</p> <ul style="list-style-type: none"> • give basic physical and emotional care, attention, and affection. • provide opportunities for educational, social, and cultural growth. • provide opportunities to be with peer groups and to have experiences in the school, church, and community. • encourage talents and interests. • cooperate in attending case conferences and training. • help in arranging for contact with the child's family when appropriate. 	<p>The child has a physical condition requiring a high degree of physical care; is adjudicated as PINS or JD (or is waiting for a Family Court hearing on such petitions); is moderately developmentally disabled, emotionally disturbed, or has a behavioral disorder requiring a high degree of supervision; or is a refugee or Cuban/Haitian entrant and cannot function because of factors related to that status (e.g., can't speak English well).</p> <p>For children in the special category, you should:</p> <ul style="list-style-type: none"> • provide all the services given to children in the basic category. • be more personally involved and give more time. • be patient and able to give attention and affection without a positive response from the child. • give more intensive supervision such as preparing special diets, giving medications, or assisting in a program of physical therapy. 	<p>The child requires 24-hour-a-day care by a qualified nurse or someone supervised by a qualified nurse; has severe behavior problems and requires high levels of individual supervision; has severe mental illness, such as schizophrenia, severe developmental disabilities, brain damage, or autism; or has AIDS or HIV-related illness.</p> <p>For children in the exceptional category, you should:</p> <ul style="list-style-type: none"> • provide all the services given to a child in the basic category. • provide one-to-one, 24-hour-a-day supervision. • work as an active member of the health care team in the treatment plan.

Therapeutic Foster Boarding Home Eligibility

In some agencies and local districts, Therapeutic Foster Boarding Homes (TFBH) are foster homes preapproved to provide intensive care to certain behaviorally disordered or emotionally disturbed foster children eligible for exceptional care who would otherwise require a higher level of care. These foster parents receive enhanced services from a foster care agency and specialized ongoing training.

Clothing Allowances

County departments of social services set their own clothing allowance rates up to the maximum allowed. A regular clothing allowance, based on the child's maximum age, is included with the board rate and is paid as a part of the monthly check. An emergency clothing allowance may be obtained in special situations. If approved, an initial clothing allowance is available for the child at the time of initial placement.

Foster parents should review the child's initial clothing needs with the caseworker and the child, if old enough, to determine an adequate basic wardrobe that is clean and fits well.

★ *Be tactful when reviewing clothing needs. For example, certain worn out or stained articles of clothing may represent a link with the birth family and may be important to the child.*

Any clothing purchased for a child in care belongs to the child and should be taken along whenever he or she moves or is returned home. It is expected that a child will leave with sufficient, clean clothes.

A diaper allowance is automatically authorized for children from birth through 3 years of age. If a child younger than 4 years old is toilet trained and no longer needs diapers, the foster parents should tell the caseworker. At that time the diaper allowance will be discontinued. If a child only needs diapers during the night, a partial diaper allowance can be authorized. Medical documentation of need is necessary to continue a diaper allowance for a child past the age of 4.

Day Care

Some county departments of social services may make payments for day care, when necessary, for the care and supervision of children in care. Check with your agency for its policy on day care.

Payment for day care is based on the actual number of hours of employment. The foster parent must submit to the child's caseworker:

- Foster parent's current work schedule.
- Name, address, and phone number of day care provider.
- Signed monthly day care payment request.

Direct payment may be made by DSS to:

- Licensed day care centers under contract with DSS.
- Registered family day care providers.
- Before and after school programs.

If a nonregistered child care provider is used, the foster parent pays the provider, and DSS will reimburse the foster parent at a rate set by the county.

Note: Foster parents receiving the exceptional rate are not eligible to receive additional day care payments.

★ *Foster parents, if you are beginning a new job you should notify your caseworker ASAP.*

Transportation

The board and care rate includes the cost of normal transportation.

Transportation provided by foster parents for visits to staff of an authorized agency, the foster child's parents, siblings living with relatives or in a different foster or adoptive home, and meetings about the child may be reimbursed at a rate set by the county. For children with a goal of return home, the agency must provide transportation assistance (if necessary) to make it possible for visits with their parent(s) at least every two weeks.

Reimbursement to birth parents, legal guardians, other relatives, or significant others, for travel to visit children in foster care may be paid at a rate set by the county.

For information on transportation for medical reasons, see **Chapter 4, Getting Started, The Basics.**

School-related Expenses

School expenses, such as books, activity fees, costs of field trips, school club dues, and art supplies, may be reimbursed. Special attire for senior proms, graduation, school jewelry or pictures, or religious ceremonies may also be reimbursed.

Tutoring expenses may be reimbursed if the service is remedial, requested in writing by the school, and not available from any other source.

Activity Fees

Special recreational/hobby/extracurricular activity expenditures may be reimbursed. This includes music, art and/or dancing lessons (not provided in school), and the purchase or rental of equipment; and membership and participation in organized groups, such as the Y, Scouts, or Little League.

Camp Fees

Day camp or residential summer camp costs, including registration and transportation expenses, may be authorized.

Damage or Loss of Property

Some agencies may consider compensation to foster parents for damage to and/or loss of personal property caused by a child in their care if the costs are not covered by the foster parents' insurance.

Miscellaneous Expenses

Extraordinary communication expenses for a child in care to maintain telephone contact with his or her parents and/or siblings may be reimbursed.

Chapter 2 When a Child Comes into Foster Care



The information in this chapter should help you better understand why children are placed in foster care and how you can be ready to have a foster child in your home. If you are a new foster parent, you will learn how to handle some of the tasks that need to be accomplished soon. Also, you will know more about the effect of placement on children. Topics include:

1. Why Are Children Placed in Foster Care?
2. Matching the Child and the Foster Home
3. Being Prepared When a Child is Placed
4. How Placement Affects Children
5. Welcoming a Child into Your Home
6. Creating a Life Book



1 Why Are Children Placed in Foster Care?

Children are placed in foster care either by order of a court (involuntary) or because their parents are willing to have them cared for temporarily outside the home (voluntary).

An involuntary placement occurs when a child has been abused or neglected (or may be at risk of abuse or neglect) by his or her parent or someone else in the household, or because a court has determined that the child is a person in need of supervision (PINS) or a juvenile delinquent (JD). The court orders the child removed from the home and determines the length of the placement.

A voluntary placement occurs when parents decide that they are temporarily unable to care for their child for reasons other than abuse or neglect. For example, the family is experiencing a serious medical, emotional, and/or financial problem. The parents sign a voluntary placement agreement that lists the responsibilities of the parents and the agency during the child's placement. (In a voluntary surrender, the parents voluntarily give up all parental rights forever and transfer "custody and guardianship" to an authorized agency.)

2 Matching the Child and the Foster Home

In placing a child in a foster home, agency staff try to find a home that best suits the child's needs. A successful match between the child and the foster home will make all the difference in a child's life during an extremely difficult period. It may be helpful to you as a foster parent to know what factors are considered when a child is placed in your home:

- **Relatives:** Are relatives available who would be willing to provide a safe and suitable placement for the child? *This should be the first consideration before placing a child in a foster home.*
- **Previous foster home:** If the child was previously placed in foster care, is it appropriate to return to the same foster home? *This question must be considered before looking for another foster home.*
- **Placing siblings together:** If the child already has sisters or brothers in foster care, can the child be placed in the same home, if appropriate? If several children need placement, can a home be found where they can live together? *Placing siblings together is mandated by state law except when deemed to not be in the child's best interests.*
- **Religious background:** If religion is a factor in the child's life, can a home of the same religion be found? The preference of the parent must be recognized whenever it is possible and in the child's best interests.
- **Native American identity:** Can a Native American home be found? *The child's tribe must be notified when placing a Native American child.*

- **Neighborhood and school:** Can a home be found in the same school district so that the child does not have to change schools?
- **Special needs:** Does the child have special physical, psychological, or medical needs that require a foster home that is equipped and trained to handle them? Has the foster home been approved to care for a child with special needs?
- **Emotional considerations:** If the child has specific emotional needs, can a foster home be found that would best meet those needs?
- **Other children in the home:** If the foster home already has other children (biological or foster), is this placement an appropriate one?

Cultural, ethnic, or racial background can be considered when determining the best interests of the child, but placement in a foster home cannot be delayed or denied based on these factors.

3 Being Prepared When a Child is Placed

The agency must provide basic information to the foster parents about each child to be placed in the home. When a child is placed on an emergency basis, such information must be provided within 30 days of placement. Topics should include:

- anticipated length of stay
- health of child and medical history
- physical and/or behavioral problems
- relationship of the child to his/her parents
- school and educational background
- visitation plan
- placement and discharge goals

Additional questions you can ask are listed below. The caseworker may not have all the information you want, but take the time to ask – anything you can learn will be helpful. Later you should be able to get more information. Be sure to get the caseworker’s telephone number.

1. Has the caseworker told the child why he or she is being placed in a foster home?
2. What type of bed/crib is needed?
3. Is the child potty trained?
4. Is a clothing voucher needed?



Reminder: Information you receive about the child’s or family’s social history is *confidential*. It is a requirement that you not discuss such information about a child (or family) with neighbors or friends.

Items to Have on Hand

- ✓ Toothbrush
- ✓ Hairbrush
- ✓ Rubber sheets
- ✓ Night light
- ✓ T-shirt (oversized for sleeping)
- ✓ A couple of toys
- ✓ Names and telephone numbers of friends to help out
- ✓ Babysitting plan
- ✓ Simple household rules/routine

Materials and Forms

At the time of placement in the foster home or shortly thereafter, you should receive the following materials:

- Boarding Home Register
- Medical Record form
- Temporary Medicaid card if the child receives Medicaid
- Clothing information and forms

If any of this information is missing, ask the caseworker when you will receive it.

4 How Placement Affects Children

Children can feel severe personal loss when separated from their families. They have lost the most important people in their lives – their parents, brothers, and sisters. They have lost their familiar pattern of living. They have lost their homes and the places that make up their own worlds.

Children’s reactions to separation vary. Their emotional development is interrupted. They often feel abandoned and helpless, worthless, and even responsible for the family’s breakup. They may try to punish themselves. In general, the adjustment period for foster children typically follows a pattern that includes:

- **Moving toward** the foster family (a honeymoon period, during which the child is cooperative and well behaved but feels numb or anxious).
- **Moving away** from the foster family (a period of withdrawal, during which the child is hesitant, feels depressed and distrustful, and seeks solitude).
- **Moving against** the foster family (during which the child is rebellious and demanding, expressing anger and hostility).

Tips for Dealing with Separatio

- Let a child grieve or mourn for his or her parents. At the time of being placed in foster care, a child may feel a great sense of loss regardless of the parents’ past behavior or the circumstances that led to placement.
- Be prepared to work closely with the caseworker when children are separated from their parents without being prepared. You can help the agency arrange for the child and parents to see each other.
- Recognize that it is common for children to view foster care placement as a punishment for some real or imagined bad deed such as causing the breakup of their families. Listen to children when they express such thoughts and feelings.
- Allow children to share memories about their family. Also, permit children to make comparisons without feeling threatened; this allows them to bond and feel comfortable.

5 Welcoming a Child into Your Home*

The child who comes into your home will need to adjust to many things. Everything is new. There are new parents, perhaps new sisters and brothers, a new house, new foods, new rules and expectations, a new neighborhood, and possibly a new school.

It is hard for children to leave their homes and find themselves in strange new surroundings. To deal with this, children may fantasize about the positive qualities of their own parents, their own home, and their neighborhood. They may not want to get involved in a foster family's routine and activities out of a sense of loyalty to their own family. Outbursts of angry, aggressive language or behavior may occur, such as cursing or slamming doors. Even if they show no emotion, many questions, fears, and anxieties about the future may fill their thoughts and dreams. The child needs your understanding, patience, and support when settling into your home.

Some Do's and Don'ts of Welcoming the New Child

Experienced foster parents and social workers have several suggestions for new foster families preparing to welcome children into their homes. Some of these suggestions are:

- Welcome the child with some kind of activity, if appropriate.
- Offer the child something to eat. Let children know if they can help themselves to food or whether they need to ask first.
- Be sure children have a place to keep personal possessions.
- Let them unpack in their own time. Offer to help or just let them know where to put their things whenever they are ready to unpack.
- Let them know it is all right to put a picture of their mom, dad, brothers, sisters, or previous foster families up in their bedroom and that you understand how important these people are to them.
- Be sensitive to a child's feelings. Ask permission before hugging or touching children.
- Do not try to change things like their hair or clothing, or do anything that says, "You're not OK the way you are."
- Help them settle down to a regular routine as quickly as possible, but do not be disappointed if they do not respond right away.
- Give them opportunities to talk to you, but do not pry into their past or criticize their parents.
- Respect their right to privacy. Never talk about them when they are present, unless it is appropriate to include them in the conversation, for example, "Ms. Wilson, Andrew is doing so well in his new school." This includes your conversations with agency workers, friends, or other children.
- Contact your caseworker when concerns or problems arise.
- Help children develop a sense of pride and accomplishment by giving them tasks within their abilities. Let them know regularly how much you appreciate their help around the house.
- Catch them being good by noticing the little things!

* Adapted from *Deciding Together, Book 6*, New York State Department of Social Services, 1994.

- Things like bed-wetting and soiling are not children’s fault. Shaming or punishing them will make the problem worse. Rather than using punishment, use positive techniques to help the child learn to manage his or her behavior.
- Punishments like hitting, grabbing, yanking, or pinching as a means of discipline are not allowed and can be very damaging to children. Such actions are also damaging when you use them to “get children’s attention.”
- *Never* threaten a child who misbehaves with removal from your home.
- Depending on the age of children, you may ask them what they think foster care is and what they expect from you as a foster parent. Don’t make children answer if they choose not to respond. Give them time.

Helping the Child Understand Your Family Routine

The everyday routine of your family may take place without much thought or discussion. All families have a pattern of behaving and living together that works for them. Your home may have a schedule that you regularly follow, or it may vary and be quite flexible.

The kind of routine a child brings to your family will depend on where and with whom the child has been living. Some children may come to your family from shelter care, other foster families, or group homes where there may have been many rules and a planned daily schedule. Other children may come to you from families where there were few rules and no set schedule.

Most children will need some time alone to become comfortable with their space. They will need time to watch the family’s routine before

they can be active participants. Think about some of your family’s routines that might take a child some time to learn. For example, who usually gets up first, and who usually goes to bed last? Is there a daily newspaper? Who reads it first? Is there someone who gets to use the bathroom first? Do people take telephone calls during dinner? Do children get a snack after school? Do they get a snack before going to bed? Can people help themselves to things in the refrigerator or cupboard?

To help bring a child into the routine of their home, many foster parents spend some fun time with the child. They may bake cookies, go for walks in favorite places (by the lake, along the creek, or in the park), go roller skating, play games such as Monopoly, checkers, or computer games, or go swimming. Doing things together helps the child settle into the family’s routine.

Going to sleep and waking up can be very scary times for children just placed in foster care. Many foster parents have developed routines to help children go to sleep and wake up. There are good reasons for bedtime stories and night lights. It is also important to give children permission to get up and use the bathroom.

Helping the Child Understand Family Rules

Children who have been mistreated and have experienced out-of-home care need limits and boundaries, just as all children do. All children need to know what is and is not allowed. Your foster child will need to know that the rules in your home are consistent and predictable. Over time, knowing this helps children feel more secure. They will come to trust the home and the other family members. Remember, children new to your home have very little idea of what you are like or what to expect. You can help ease the adjustment by being consistent.

A family's "rules" are often informal and unspoken. A new person entering your family's world, however, needs to be oriented and helped to learn and practice these rules. Before the child enters your home, your family should sit down together to discuss what you feel is most important in your family. You should discuss the way you live together on a daily basis, and you should ask yourselves what a new person would need to know to become a part of your family.

There is a fine line between routines and rules, especially some of the routines that set the pattern for our informal rules. Informal rules may be things such as who sits where at the dinner table; not wearing shoes in the house; telling mom or dad if you use the last of something (toilet paper, toothpaste). Other rules are important to help maintain health and safety. Be sure to explain the rules to your foster child.

6 Creating a Life Book

Foster parents are encouraged to work with the caseworker to help the child develop a "Life Book." Ask the caseworker who will begin the process and what will be included. The best time to begin a Life Book is when a child is first placed in foster care.

A Life Book is a combination story, diary, and scrapbook. It can be a tool to help children understand their past experiences so they can feel better about themselves and be better prepared for the future.

The process of creating a Life Book can:

- help the caseworker, foster parent, and child form an alliance.
- help a child understand events in his/her life.
- provide tangible links to the past which provide chronological continuity.
- provide a vehicle for the child to share his/her life history with others.
- increase a child's self-esteem by providing a record of the child's growth and development.
- help the child's family of origin share in the time when they were living apart.
- contribute to the adoptive family's understanding of the child's past.

Material to put in a Life Book may include: *

Birth Information

- birth certificate
- weight, height, special medical information
- picture of the hospital

Child's Family Information

- pictures of child's family
- names, birth dates of parents
- genogram (a visual map displaying family history and patterns)
- names, birth dates of siblings, and where they are
- physical description of parents, especially pictures of parents and siblings
- occupational/educational information about birth parents
- any information about extended family members

* Adapted from *Adoption of Children with Special Needs: A Curriculum for the Training of Adoption Workers*. Prepared by the Office of Continuing Social Work Education, School of Social Work, University of Georgia, Athens, GA, 1982. Published by the U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau.

Chapter 3 Communication Ongoing & Emergency

The goal of this chapter is to make it easier to know when and where to call for support and information. The chapter covers:

1. Ongoing Communication
2. Calling the Caseworker
3. Events in the Child's Life
4. Changes in the Foster Home
5. Calling Another Foster Parent
6. Emergencies



1 Ongoing Communication

As members of a team, foster parents need to communicate regularly with their caseworkers. Foster parents and caseworkers should:

- communicate often
- communicate effectively
- respect each other's roles
- make decisions together
- solve problems together
- resolve conflicts

All team members have a common goal – to provide a safe, nurturing environment for children in care. When communication is open, it will be easier to accomplish this goal.

2 Calling the Caseworker

If you have a problem or concern related to the care of a child, call the child's caseworker. The caseworker is responsible for assessing the care of the child and for keeping the agency informed about the child's situation. If you need help with handling a problem, or you are concerned about a child's behavior, or you need information about services, call the caseworker.

You are also encouraged to tell the caseworker when something positive happens. For example, let the caseworker know when a problem from the previous week has been resolved positively or the child is doing better in school.

Foster parents are required to inform the caseworker of any changes in:

- marital status.
- family composition or number of persons living in the home.
- physical facility (major changes in the foster home).

The following are examples of situations when it is appropriate for foster parents to call the caseworker:

- To ask for advice on how to handle a problem or a crisis situation.
- To express concern about a change in the child's behavior, development, or social functioning (e.g., family, school, peer relationships, attitudes, habits, conduct, symptoms).
- To discuss plans affecting the child.
- To make the agency aware of sudden changes in the foster family's circumstances that may affect the child's placement or planning.
- To obtain information about community services or resources that might be useful to the child.
- To keep the agency informed about a parent-child visit that was not observed by an agency representative.
- When you need to be away from your home overnight, and there will be a substitute caretaker.

- When there is an error in your board and care or clothing checks.
- When you will be going on vacation or taking the child out of your county or New York State (you will need permission in advance).
- To obtain consent for surgery or medical care for the child (you will need permission in advance).
- When the child is hospitalized (the caseworker will need to obtain the child's family's consent) or needs emergency medical care.

If you question an agency decision or do not agree with the caseworker's actions, first try to have an open discussion with the caseworker. When an issue is not resolved through such discussions, you may request a meeting with the senior caseworker or supervisor or director of social services. A meeting should be scheduled at a mutually convenient time and held in a place that is private and free from distractions or interruptions. In preparing for the meeting, you may want to draw up a list of concerns and questions. If the problem remains unresolved, you may contact the Director of Social Services.

3 Events in the Child's Life

Foster parents are encouraged to bring up issues around key events in the child's life. Certain events can have a powerful impact, resulting in changes in behavior or conduct, sleeping and eating patterns, and temperament. Dealing with the issues that often arise around these events may require additional contact and support.

Examples of such events are:

- first day of school.
- birthdays, holidays, Mother's Day, Father's Day.
- changes in visits (parent or siblings) such as the frequency or duration.
- meetings with school staff.
- Family Court hearings.
- Service Plan Reviews and other conferences.

Ideally, you and your caseworker will have developed a good team relationship. The above list is a reminder to stay on top of these events as they occur.

Tips for Foster Parents

- Share positive information about the child with the caseworker and birth family, such as report card grades or a child's achievements in sports, school activities, or church. This kind of information sharing keeps the communication positive among all parties of the team.
- Consider the caseworker as a resource. Don't hold back from asking questions about services, community resources, programs for foster parents, training activities, and other ways in which the caseworker can be helpful to you. Don't be afraid that the caseworker will think you can't cope on your own; *rather, think of yourself as taking responsibility for the situation by taking advantage of opportunities.*

4 Changes in the Foster Home

If there are changes in your home, call your caseworker or your homefinding worker, depending on what your district requires. For example:

- You plan to move.
- You have changed your telephone number.
- Your family composition has changed.
- Your financial status (income) has changed.
- Your employment has changed.
- You have an emergency requiring relocation of the family.
- Your family has a serious illness or is having personal family problems.
- You plan to go on vacation.

5 Calling Another Foster Parent

An additional resource for foster parents can be other foster parents. If you have a simple question and don't feel that it is necessary to call your caseworker, you may wish to call another foster parent. Sometimes you may also want to check ideas with another parent. Remember that calling another foster parent does not alleviate your responsibility to call your caseworker.

Some districts have foster parent associations or local chapters of the New York State Foster and Adoptive Parent Association (NYSFAPA). Check with your caseworker or NYSFAPA for information. Foster parent associations provide valuable support and resources for foster parents.

Questions or problems that you might want to talk about with another foster parent include:

- how to fill out some of the paper work.
- how to prevent head lice.
- if the foster child has been in another home.
- for reassurance when you are having a rough day.

6 Emergencies

An emergency is a situation that occurs outside the normal responsibilities of a foster parent. An emergency demands immediate advice or assistance. For example, you must call the child's caseworker or supervisor if any of the following events occur:

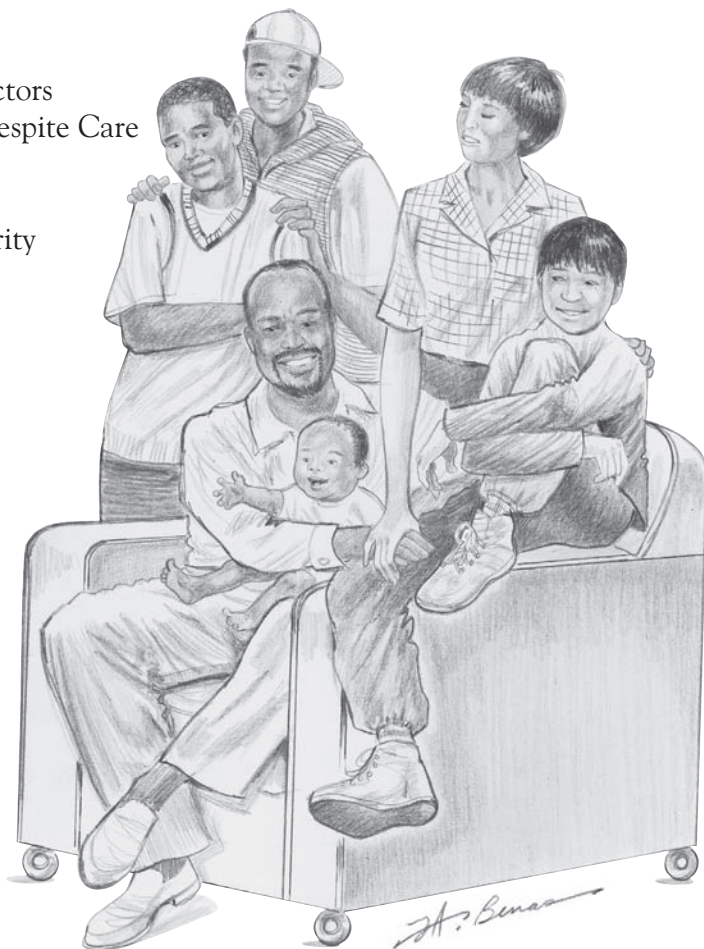
- A medical emergency.
- The child runs away.
- You have an acute problem with the child.
- The child has problems with the law.
- There are problems related to a birth parent's visit (e.g., an unexpected visit from a parent or any unauthorized visitor).
- The child is kidnapped or taken by his or her parents without consent.
- The child is expelled or dismissed from school.
- The child attempts suicide.

Note: These are not the *only* times to call your child's caseworker; when in doubt, call. It is a good idea to keep a record of contacts and attempts to contact the caseworker.

Chapter 4 Getting Started *The Basics*

As a foster parent, what should you know about the basics of caring for children in your home? This chapter gives information on:

1. Confidentiality and Right to Privacy
2. Discipline
3. Health and Medical Care
4. Developmental and Behavioral Factors
5. School
6. Religion
7. Cultural Factors
8. Day Care/Respite Care
9. Safety
10. Liability
11. Social Security



1 Confidentiality and Right to Privacy

To develop and sustain a positive, trusting relationship that protects the rights, privacy, and dignity of the child and family, foster parents must keep the child's and family's social history and personal information confidential. Information should be disclosed and discussed only for purposes of treatment and/or decision-making.*

Confidential information includes information furnished by the agency, the caseworker, the child, the child's birth family, or the foster parents. It may concern the family background of the child, the child and family's medical history and condition, and/or the services being provided to the child. These matters *cannot* be discussed with the foster family's friends, neighbors, or other relatives who are not part of the foster parent's household, nor with any other professional who is not specifically authorized to receive the information.

Information can be shared in limited circumstances with individuals providing services to the child when relevant to the service. For example, a child's medical history should be provided to appropriate medical personnel. A child's HIV status can be discussed with the person who is caring for, treating, or supervising the child.

As a foster parent and member of a team, you have agreed to respect the confidentiality of the child and family and to share information only with authorized individuals. You may introduce the child to other people very simply by name or as your foster child – whatever makes you comfortable. When you are asked about his or her background, you should reply that you cannot discuss it with others. When foster children are present, consider their ages and needs, and don't act as if they're not there.

The Child's Right to Privacy

State regulations protect the following privacy rights of children in care. These provisions apply unless a condition in a court order states otherwise.

- **Mail.** A child in care has an unrestricted right to send or receive mail without prior censorship or prior reading. A foster parent may require the child to open the mail in the presence of a caseworker or the foster parent if there is reasonable cause to suspect that the mail contains drugs or weapons. As part of the child's treatment plan, approved by the local district, a foster parent may require the child to open mail from a predesignated person in the presence of a caseworker or the foster parent if the mail is likely to cause emotional harm to the child, and the harm could be lessened with the presence of the staff person or foster parent. The child must be informed of this aspect of the treatment plan and the reason for it.
- **Telephone.** A child in care has the right to receive or refuse any calls made during reasonable hours that are determined by the foster parent. The foster child should be allowed to call anyone he or she wants to; however, the time, duration, and cost of such calls may be restricted. Except at the child's request, neither agency staff nor foster parents should listen in on a child's phone conversation. There may be times when a foster parent and caseworker may want to discuss phone calls and possibly restrict certain calls, based on the particular case situation.
- **Access to Law Guardian or Clergy.** A child in care has the right of access to an attorney or clergy by face-to-face contact, mail, or telephone.

* A breach in confidentiality is a violation of New York State Social Services Law § 372(4).

- **Searches.** Searches of a child's property may be made only when there is reasonable cause to suspect that the child has in his or her possession:
 - an item belonging to someone else.
 - an item that is a crime or offence to possess, such as a weapon, firearm, controlled substance, or illegal drugs.
 - an article that the authorized agency or foster parent may consider to be dangerous or harmful to the child, other children in the home or agency, or the home's physical structure.

A search may include having a child empty out his or her pockets.

Foster parents should make every possible effort to have the child present whenever his or her room or possessions are searched. If the child cannot be reached, the foster parent or caseworker must notify the child as soon as possible.

Personal Property

The personal belongings that children bring to the foster home are theirs and may be of particular importance to them. Every child should have some place to call his or her own, and this personal area, along with his/her possessions should be respected.

When children leave the foster home, they must be allowed to take their personal items and clothing and any gifts or possessions that have been acquired.

Gifts of money, savings, or earnings belong to the child. (See **Chapter 5, Section 7, Allowance.**) Any substantial sum of money that a child receives from any source should be reported to the agency.

Media

Permission must be obtained from your local agency before a foster child can be involved in any newspaper articles, photographs for the press, or TV and radio programs that would identify the child as a foster child.

Discipline

Helping children develop an attached and trusting relationship with foster parents is one of the main goals of discipline. Foster parents will have a great deal of influence on teaching children positive behaviors through the discipline methods that are used.

Remember that many children have been neglected or abused before being placed in your home and may not have the same sense of security as your own children. When you need to discipline a child, consider the child's background and emotional, social, and mental maturity. Also, what works for one child might not work for another. You may find the following suggestions helpful:

1. Both the foster parents and the child need to talk and listen to one another for a better understanding of how each thinks and feels.
2. It is important to set limits, which show the child you care. Establish definite limits and guidelines that are within the child's ability; let children know that they will have to be responsible for the consequences if their behavior goes beyond these limits.
3. Make sure the child understands the reason for the disciplinary action.

At times it is very difficult for foster parents to cope with the acting out behavior of some children in care. Ask your caseworker if you need help in developing appropriate methods of discipline that will be most effective for the child.

Helping Children Manage Their Behaviors*

The following techniques of discipline can help children manage their own behavior and also feel lovable, capable, and worthwhile:

- Be a role model.
- Provide positive reinforcers and privileges.
- Provide natural and logical consequences.
- Replace negative time with positive time.
- Help the child understand feelings.
- Make a plan for change with the child.
- Provide alternatives for destructive acting-out behaviors.
- Provide the child with time out.
- Take away privileges.
- Ignore the behavior.
- Hold family meetings.
- Use “grandma’s rule” or “this for that.” **
- Plan for change with child and professional.

Tips to Enhance Family Life & Prevent Problems

- Every family has its own rules and ways of doing things. It will take time for a child to learn what is expected in the foster home. When a child does something wrong for the first time, explain exactly what he or she did wrong and why the right way is important in the foster home. Try to prevent discipline problems by helping the child understand your family’s rules and expectations.
- Praise and reward good behavior; compliment the child whenever he or she does well, including ordinary and expected tasks.
- Hold family meetings to solve problems. Cooperation and mutual respect can help create an accepting family atmosphere in which children can develop self-discipline, responsibility, cooperation, and problem-solving skills.
- Don’t make threats to send the child away. This will only increase the child’s anxiety and intensify the problem or conflict.
- Spend special time with the child. This means doing something that the child and foster parents can enjoy together. For some children the special time may have even greater meaning than it does for the foster parents’ own children. Children in care may have an intense need for attention, reassurance, and acceptance by the foster parents and members of the family.

* MAPP Training materials

** “Grandma’s rule” is a rule of the house: e.g., do your homework before you watch TV. “This for that” means “If you do this, you can do that,” (e.g., if you clean your room, you can go to the park).

New York State Office of Children and Family Services Regulatory Standard on Discipline of Children in Foster Care

The New York State Office of Children and Family Services (OCFS) Regulatory Standard on Discipline, 18 NYCRR 441.9, states:

- Deprivation of meals, snacks, mail, or visits by family as a method of discipline is prohibited.
- Room isolation as a method of discipline is prohibited.
- Corporal punishment is prohibited.
- Solitary confinement is prohibited.
- Discipline shall be prescribed, administered, and supervised only by adults. Such responsibility shall never be delegated to children.

The above list of prohibited punishments is not an exhaustive list of the inappropriate methods used to control the behavior of children.

Additional examples of unacceptable methods of “discipline” include:

- verbal abuse.
- ridicule.
- washing a child’s mouth out with soap.
- excessive physical exercise.
- forcing silence for long periods of time.
- unreasonable denial of clothing or bedding.
- requiring child to stand erect for specified periods with his/her nose against the wall.

- standing at attention with eyes turned toward the ceiling.
- forcing a child to crawl on knees across a floor strewn with rice.
- frightening, humiliating, or demeaning a child.

Any abuse or maltreatment of a child, either as an incident of discipline or otherwise, is prohibited, as stated in OCFS regulation 18 NYCRR 441.8.

Sending a child to his or her room for reasonable periods of time is acceptable. A child is not to be locked in his or her room, however.

For helpful suggestions on handling issues and relating to children in care, see **Appendix B for Positive Approaches to Discipline.**

3 Health and Medical Care

Once a child is placed in foster care, the responsibility for the child’s medical care is a shared one. Several people – the caseworker, the supervisor, the foster parents, as well as the parents – have a role to play in the child’s medical care and treatment. Everyone involved in the placement should be aware of the child’s current health, medical problems, and need for medical examination and immunization.

Foster parents should always be alert to any symptoms that indicate an ill child, such as runny nose, sore throat, cough, headache, inflamed eyes, stomach ache, rash, etc. Such signs should not be ignored. Do not hesitate to consult the child’s doctor.

Consent and Medical Treatment

Before the child is placed, or within 10 days of placement, the caseworker must ask the child's parents to sign a consent form for routine medical treatment and immunizations.

The form also gives consent to emergency medical or surgical care if the birth parent cannot be located at the time such care is needed. If consent cannot be obtained from the birth parents, the local social services commissioner is authorized to sign the form. Follow your agency's on-call procedures for emergencies that occur after business hours.

For surgery scheduled in advance (e.g., tonsillectomy), contact the caseworker to obtain the birth parent's and/or the commissioner's written consent.

Tips for Going to the Emergency Room

- Call the on-call worker to:
 - obtain consent if the birth parent is not available.
 - obtain appropriate billing information (e.g., Medicaid number).
 - let the agency know that follow-up may be needed.
- Bring the child's medications, including allergy medications.

Medical Examination Requirements for Children in Foster Care

Minimum medical examination requirements include:

An initial comprehensive medical examination. This should occur no later than 30 days after placement in foster care or upon return to care after a period of 90 days out of care.

Periodic physical examinations. These are required by OCFS regulation 18 NYCRR 441.22(f) at the following intervals:

- Birth to 1 year: at 2-4 weeks; 2-3 months; 4-5 months; 6-7 months; and 9-10 months.
- 1 to 6 years: at 12-13 months; 14-15 months; 16-19 months; 23-25 months; 3 years; 4 years; and 5 years.
- 6 to 21 years: at 6 years; 8-9 years; 10-11 years; 12-13 years; 14-15 years; 16-17 years; 18-19 years; and 20 years.

Every examination must include the following, as appropriate by age:

- Comprehensive health and developmental history.
- Comprehensive unclothed physical examination.
- Assessment of immunization status and provision of immunizations as necessary.
- Assessment of whether HIV-related testing of the child is recommended based on the child's medical history.
- Vision assessment.
- Hearing assessment.

- Laboratory tests, as appropriate.
- Dental care and screening. Children 3 years old and older must have a dental examination by a dentist each year.
- Observation for child abuse and maltreatment, which, if suspected, must be reported to the State Central Register of Child Abuse and Maltreatment.

Discharge Examination. Before being discharged from foster care, a child must receive a comprehensive medical examination unless he or she has had such an examination within the previous year.

Your local agency may expand on these requirements.

Prescriptions

Any prescribed medications used to treat a child must be ordered by a doctor. Even over-the-counter medications should be used with caution because of possible allergic reactions. It is wise to consult the child's doctor when giving any of these medications to a child. Also, communicate regularly with the caseworker about what medication(s) the child is taking.

Before you order and pay for any prescription (regular or emergency), check with your caseworker for appropriate billing information. Prescriptions can only be paid for through the child's private insurance plan, managed care benefits, or Medicaid. If you have any questions or problems in filling a prescription for a foster child, contact the child's caseworker or emergency on-call worker if after business hours.

(See the *Medication Guide* on the next page for more information on prescriptions.)

Immunizations

Remember to take the child to the doctor on a regular basis for routine check-ups and to keep immunizations up to date. The doctor will keep track of which immunizations the child needs as specified in the recommended childhood immunization schedule. Foster parents do not have legal authority to request or authorize immunizations.

Family Planning Services/ Sexual Counseling

Family planning services are available to any adolescent in foster care. Such services include counseling provided by a doctor or qualified person at a family planning center or clinic. This enables young people to ask questions and discuss their sexuality in a confidential, professional setting. If you feel that the child placed with you could benefit from these services, contact the caseworker.

Medical Transportation

Foster parents are expected to transport and accompany foster children to their routine medical or other appointments. As the foster parent, you know the child's needs. In addition, you can be a comforting and familiar presence for the child especially during stressful appointments.

For children eligible for Medicaid, agencies must provide transportation and other related travel expenses as necessary. Travel expenses include the cost of transportation by ambulance, invalid coach, taxi, common carrier, or other appropriate means; the cost of outside meals and lodging en route to, while receiving medical care, and return from medical care; and the cost of an attendant to accompany the patient, if medically or otherwise necessary. For nonemergencies, obtain prior approval from the caseworker. Decisions regarding reimbursement are made in partnership with the agency.

A Medication Guide*



Note: This section is a guide for foster parents on the safe use and management of a child's medications.

In order for children to receive the greatest benefit from medications, it is essential that foster parents make certain that they are taken exactly as prescribed. This information is on the prescription label. Foster parents should read the label carefully. If foster parents have any questions about a medication which the label does not answer, they should feel free to ask their pharmacist or the child's doctor.

Whenever foster parents receive a medication from a pharmacist, *they should know the answers to these questions:*

- What is the name of the medication?
- What is the purpose of the medication?
- Are there any precautions they should be aware of while the child is taking the medication?
- Are there any other medications the child should not take at the same time?
- Is there any food or beverage the child should avoid?
- How and when should the child take the medication?
- How long should the child continue to take the medication?
- Can the prescription be refilled and how?

Have all prescriptions filled at the same pharmacy so that the pharmacist can keep a complete record of the child's medications.

If the child visits more than one doctor the foster parents should tell each one what medications the child is taking. This should include prescription and nonprescription medications, as both could interfere with a new medication that the doctor may prescribe for the child. The doctor should be told if a prescription was not filled or if the child did not take the medication; otherwise, he or she may conclude that the medication was not effective.

In addition to their benefits, some medications have additional effects beyond the intended effect, some of which can be detrimental to a person's health. Side effects vary from one patient to another, and at times a particular medication produces an unpleasant side effect in one patient, whereas another medication that is almost identical will have no unpleasant effect. If a child develops an unexpected side effect, the foster parent should contact the child's doctor.

Be careful in giving any medication that can be purchased without a prescription. Always read the directions on the folder and if not understandable, consult your pharmacist. These medicines are usually designed to alleviate a symptom and they do not cure a disease. Do not continue using the medicine if the first few doses do not help to relieve the symptom. If a symptom is severe or persistent, consult a doctor.

If a child is taking a medication that has been prescribed by a doctor, always be careful in self-medicating with substances that can be purchased without a prescription, i.e., cough syrups, laxatives, nasal sprays. Some substances can interact and cause unpleasant reactions. Always check with the pharmacist before purchasing these products.

* Medication Guide for Patient Counseling, Dorothy L. Smith, Pharm. D., Lea & Febiger, Philadelphia, 1977, pages 27-29. Reprinted with permission of the publisher.

Check with the doctor before giving any nonprescription medications to a child under one year old. Do not give any nonprescription medications to children between 1 and 12 years of age unless the doses for the different age groups are listed on the package container.

Remember that the medication foster parents have received for a child is specifically for the child. It should not be shared with other members of the family or friends who seem to have the same symptoms.

The way in which medications are stored is important. Certain medications require refrigeration; if this is the case there will be a Keep Refrigerated label on the container. A cool, dry, dark cupboard is the best storage for most medications; remember that a bathroom medicine cupboard often becomes hot and steamy and is not the best place to store medications. Above all, keep medications in a safe place and away from the reach or sight of small children.

Always keep medication in the container in which it was received from the pharmacist. Do *not* remove the label until all the medication is finished. The information on the label is necessary to properly identify the patient, the doctor, the medication, the instructions for use, and the date the prescription was dispensed.

Over the years numerous medications may have been prescribed for the child. If these are discontinued by the doctor, destroy the remaining portion by flushing it down the toilet. By doing this you avoid building up a cupboard of old, outdated, and potentially dangerous medications.

Foster parents must maintain a careful record of important facts about the child's health and medications. This allows the foster parent to have a complete list of the medications should the child see another doctor. If the child moves to another home, the medication record and

the medication must be given to the agency caseworker responsible for helping the child to make the transition from a foster home to another placement. It is important that the new pharmacist and doctor are thoroughly familiar with the medications the child has taken and his or her medical history. See the sample *Medication Log* on the next page.

4 Developmental and Behavioral Factors

Foster parents should encourage the normal emotional, intellectual, social, and physical development of children who have been placed in their care. When a child is placed, foster parents will need to know about any developmental or behavioral factors. The caseworker should inform you of the child's development and whether there are any known developmental delays or behavioral problems.

In caring for children, remember that:

- Each child develops at his or her own pace within each developmental stage.
- When children do not develop within the range of each developmental stage, they may be experiencing developmental delays.
- Foster parents and birth parents can work with children to enhance “normal” development and help children “catch up” in areas where they are experiencing delays.
- Child abuse and neglect may affect how children develop.
- Separation and loss affect development.
- Cultural factors may influence perceptions about appropriate child development.

Medication Log

CHILD'S NAME:				FOSTER HOME:				
Prescribed By	Name of Medicine	Dose	Refrigeration Needed		Date	Time	Given By	Comments*
			Yes	No				
1			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
2			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
3			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
4			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
5			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
6			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
7			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
8			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
9			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
10			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
11			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		
12			<input type="checkbox"/>	<input type="checkbox"/>	___/___/___ M D Y	<input type="checkbox"/> am <input type="checkbox"/> pm ____:____		

* For example: fever broke, fell asleep, became agitated.

The chart beginning on the next page is a guide to stages of childhood development and activities that can help encourage normal, healthy development. Foster parents may work together with the child's parents to carry out the activities.

5 School

Foster parents are expected to actively participate in their foster child's education. Helping the child with homework and school projects, attending teachers' conferences, joining the PTA, and participating in field trips are some of the important ways that you can get involved.

You should also discuss the child's educational progress with the child's parents and encourage them to attend school meetings and events, if appropriate.

While children are in foster care in your home, they will be registered in your local school using their legal name. You will need to sign their report cards (returned to the school, which should make copies for the birth parents) and attend school functions. If you are asked by the school to sign papers of any kind, contact the caseworker. The agency should know what is being signed and whether it is your responsibility to sign.

It is important that all interested parties be aware of the school achievement and special needs of your foster child. Therefore, when a child is placed in your home, the child's caseworker will share with you information about the child's academic standing. It is important that you involve yourself in the child's school progress and activities; this shows the child that you are interested and that you care. The agency should also be kept informed of your child's school progress at all times.

If possible, it is preferable for a child to stay in the same school after entering care. However, if it is necessary to change schools, it is best for you to physically take the child to the new school. Foster parents are usually familiar with the neighborhood schools, may know officials personally, and can introduce a new child to the principal and teachers. This introduction will help the child adjust more quickly to unfamiliar surroundings.

Attending/Quitting School

Children age 6 to 16 are required to attend school unless they have received a high school diploma. Sixteen-year-olds must complete the current school year. Foster parents are required to arrange for children to attend school in compliance with the Education Law.

Special Education Needs

When foster children are assessed as being educationally disabled (handicapped), they will be referred to the school's Committee on Special Education (CSE) for special education services. Services include an annual assessment of strengths and needs, an Individualized Education Plan (IEP), special education services in the "least restrictive environment," and due process and confidentiality rights. Foster parents are expected to attend meetings held by the CSE, along with the child's parents and the caseworker, and to support the child with his or her educational needs.

Special Payments

Payments may be authorized to assist foster children with necessary items that are purchased once during the school year or at irregular intervals. Special payments may be authorized for graduation expenses, field trips, and other special, one-time expenses.

Developmentally-Related Activities*

This chart lists appropriate activities that correspond to general developmental stages of children and youth.

Note: *Ages are indicated as guideposts only and are not “written in stone.”*

Stage: Infancy (0-2)	
Goals/Tasks	Activities
Develop primary attachments.	Meet basic needs (feed, change, hold, cuddle).
Develop object permanence.	Play peek-a-boo games.
Develop basic motor skills (sit, read, stand, crawl, walk).	Help with standing, walking, etc., by holding hand and “come to me” games.
Learn word recognition.	Name objects, repeat name games, read picture books.
Begin exploration and mastery of the environment.	Child-proof environment; encourage exploration; take walks; play together with colorful, noisy, moving items.
Stage: Toddler and Pre-School (2-4)	
Develop impulse control.	Make and consistently enforce rules.
Develop language.	Read simple stories; play word games.
Do imitation and fantasy play.	Play “let’s pretend” games. Encourage imitative play by doing things together such as “clean house” and “go to store.”
Develop large motor development skills (run, climb, dance).	Play together at the park; assist in learning to ride a tricycle; dance together to music.
Develop small motor coordination.	Draw together; string beads together.
Develop basic sense of time.	Discuss visits and visit activities in terms of “after breakfast,” “after lunch,” “before supper,” etc.
Assert preferences.	Allow choices in activities, clothes worn, foods eaten.
Stage: Early School (5-7)	
Develop sex role identification. Avoid limiting opportunities through sex role stereotyping.	Be open to discussing girl/boy physical differences. Be open to discussing child’s perception of sex roles; read together books about heroes and heroines.
Begin development of conscience.	Make and enforce consistent rules; discuss consequences of behavior.
Develop ability to solve problems.	Encourage choices in activities.
Begin concrete operations (time, space, hierarchy).	Point out cause and effect.
Complete tasks.	Plan activities with a beginning, middle, and end (e.g. prepare, make cake, clean up).
Play games with rules.	Play simple games such as Candyland or Old Maid.
Begin school.	Shop for school clothes together; provide birth certificate, medical record required for school entry; visit school, playground with child before the first day; accompany child on first day.

* Adapted from NYS Department of Social Services Summary, Working with Birth and Foster Parents, by Peg Hess. Copyright 1981 by the Office of Continuing Social Work Education, University of Tennessee School of Social Work.

Stage: School-age (8-12)	
<i>Goals/Tasks</i>	<i>Activities</i>
Develop skills (school, sports, special interests).	Help with homework; practice sports together; support special interests (e.g., help with collections); go fishing; attend school conferences and activities.
Develop peer groups.	Involve peers in visitation activities.
Learn team play.	Attend team activities with child (child's team or observe team together).
Develop self-awareness.	Be open to providing feedback.
Prepare for puberty.	Discuss expected physical changes; answer questions openly.
Stage: Early Adolescence (13-17)	
Cope with physical changes.	Help with attention to personal appearance (e.g., shaving, buying cosmetics, bra); provide information about physical changes.
Begin abstract thinking.	Plan, discuss future; discuss politics, religion.
Develop interest in dating.	Set clear rules; be open to discussing problems.
Become more independent of parents.	Help learn to drive; delegate responsibility; allow to handle money.
Handle changes in peer group associations.	Transport to peer activities; include peers in visitation plans.
Stage: Late Adolescence (18-22)	
Separate from family.	Encourage independence through actions such as helping to move to own apartment; help apply for job. Be aware of and tolerate independence-dependence conflict.
Develop life goals and values.	Be open to discussing adolescent's options and "thinking through" together.
Rework personal identity and sex role identity.	Share own experiences as young adult.
Develop capacity for relationships.	Encourage socialization at work, school, and in the community.

After High School

Youth in care who wish to attend college or a vocational program should plan ahead early in high school, or by no later than their junior year. The youth and the caseworker and/or foster parent can work together to visit and apply to schools and obtain funds for room and board deposits. The high school guidance counselor should have information about scholarships.

Check with your local agency to find out how it handles the board rate when the youth is in college or vocational school. The youth's per diem clothing assistance, which is usually sent to the foster parent, can be paid to offset room and board expenses.

Foster parents can provide valuable, ongoing support when youth attend school away from the foster home. This can include encouraging the youth by phone or mail, listening to the youth, and sending cookies from time to time.

6 Religion

Birth parents have the right to determine their children's religion and to request that their children be placed in a foster home of the same religious faith. If possible, such a request must be honored when it is in the child's best interests.

As the foster parent, you should make every reasonable effort to enable the child to practice his or her religious faith even if it is different from yours. This means arranging for the child to attend services conducted in his or her own religious faith and to receive instruction, unless the birth parents expressly request otherwise in writing. The child's religious faith designation cannot be changed except by written request of the parent.

The agency must obtain the birth parents' consent for a foster child to be baptized. All religious certificates (baptism, first communion, confirmation, bar/bat mitzvah, etc.) must be recorded in the child's legal name, never in the name of the foster parent. You should keep such certificates in a safe place and give them to the caseworker when the child leaves the foster home.

If a foster child needs certain clothing for religious purposes, check with the caseworker to see if you can obtain a special clothing allowance.

7 Cultural Factors

Children who have been placed outside their home need continuity of care, including continuity of their cultural identity. Therefore, it is important that foster parents be culturally sensitive and willing to support the child's culture. In addition, they should be able to work as partners with the birth family; if foster parents are not culturally sensitive, they may be less likely to form an effective partnership.

Cultural factors that may affect family life include attitudes toward, or perceptions of: age, gender, race/ethnicity, sexual orientation, religion/spirituality, education, socioeconomic level, language, family structure, geographic location, and art, science, customs, communication, expression, holidays, recreation, music, food, and heroes/role models.

In accordance with the federal Multiethnic Placement Act (MEPA) of 1994, agencies cannot delay or deny any applicant the opportunity to become a foster/adoptive parent on the basis of race, color, or national origin of the applicant or the foster child. One of the purposes of MEPA is to better identify and recruit foster and adoptive families that can meet children's needs.

8 Day Care/ Respite Care

Children under the age of 10 may not be left alone without the supervision of a competent adult (18 years or older).* Use your judgment as to whether to leave children over the age of 10 alone or with an adult, according to the same guidelines you would use for your own children.

Respite care may be available on a limited basis. Check with your agency. If respite care is desired, contact the child's caseworker for arrangements.

* OCFS regulation 18 NYCRR 443.3(b)(3)

9 Safety

Fire Safety

Smoke alarms must be maintained in working order. It is strongly recommended that each home be equipped with at least one fire extinguisher.

Foster parents must have a fire evacuation plan, which includes a designated meeting place outside the home. All household members must know the designated meeting place. Review this plan with each child at the time of placement, and hold fire drills periodically.

Cars and Bicycles

All children under age 4 or under 40 pounds of weight are required by law to be in an approved car seat. The car seat *must* be placed in the back seat. All children in care are required to wear seat belts while traveling in a foster parent's vehicle. If there is a passenger-side airbag, children should ride in the back seat.

All children age 14 and under are required by law to wear helmets while riding a bicycle.

Firearms and Hunting

If foster parents own any firearms, they must store them safely; they must also maintain and license them in accordance with state and local requirements.

Foster parents should check with the caseworker if a child in care asks about hunting. Depending on the local district, children in care may need to discuss this with the caseworker and, if approved, notify the caseworker before registering for the Hunter Safety Training Course or buying a hunting license. In some districts, hunting and/or the use of firearms or bow and arrows will only be allowed if the

child is accompanied by – and under the direct supervision of – his or her foster parent.

Foster parents should also check local policy if foster children want to buy or receive as a gift any type of firearm (e.g., BB gun, pellet gun, rifle, shotgun, pistol) or archery equipment (bows and arrows).

Day-to-Day Safety

In addition to following the above guidelines, foster parents should take certain day-to-day safety measures. For example:

- Any prescribed medicines must be kept in a locked box, in a closet, out of reach and sight of a child.
- A fire drill plan should be developed for the family; batteries in smoke detectors should be replaced every 6 months.
- Foster parents should have an awareness of household hazards that cause burns (e.g., pot handles on the stove, electrical outlets, and hot water in the bathtub).
- Pets must be immunized against rabies and distemper.
- Children should be taught appropriate behavior around pets and how to share in their care.
- Swimming pools must comply with local ordinances. They should be fenced and have a safety latch on the fence gate. Children should never swim unattended.

Chapter 5 Daily Life

This chapter deals with the day-to-day activities of foster children. It focuses on the daily life of a foster family and includes guidelines for issues that may occur frequently.

The chapter covers:

1. Consent
2. Social and Recreational Activities
3. Dating
4. Transportation
5. Trips and Vacations
6. Clothing
7. Allowance
8. Chores and Work
9. Babysitting
10. Savings
11. Joining the Armed Forces
12. Driving and Owning a Car
13. Getting Married
14. Smoking
15. Hair Care
16. Piercing and Tattooing



1 Consent

Depending on the activity, consent of the agency or the child's parent may be required. This chapter includes guidance on the types of activities that may need consent.

Foster parents can give permission for the child to engage in routine types of activities such as joining a school club and dating.

As legal guardians, birth parents have the legal right to make decisions about their children and to be informed about what their children are doing. In fact, it is good practice to consult the parents about any activity involving their child, when appropriate. However, foster parents should ask the caseworker whether consent of the birth parents is required.

Each agency has policies on approving participation of foster children in certain activities. These may include activities like driving, smoking, participating in specific sports (e.g., horseback riding, downhill skiing), and operating power tools. When you have a question, check with your local agency.

2 Social and Recreational Activities

It is important for foster children to participate in recreational, school, religious, and community activities. Participating in activities can help children and adolescents develop skills, build self-esteem, and gain a sense of achievement.

You are encouraged to give your foster child opportunities to participate in groups such as Scouts, 4-H, church or synagogue, and Little League, and to take lessons in their areas of interest (music, dance, art, swimming, etc.).

School and religious activities may not be removed for disciplinary purposes without direct consultation with and approval of the child's caseworker. If you are considering removing other activities for disciplinary purposes, discuss the situation with the caseworker first.

It is essential that a child's activities take place within a safe environment. This requires common sense and good judgment on your part plus a full appreciation of your responsibility, a concern for the protection of children in your care, and commitment to maintaining high standards of safety. Foster parents should be sound adult role models and teach good safety habits by example.

The following guidelines should help you ensure a safe environment for children:

- Know your children, who they are, who they are with, and what they are doing.
- Know what equipment is being used, if it is safe for use by children – and in particular the child or children in your home – and whether it is in safe operating condition.
- Know the nature of the activity and the setting where the activity is taking place.
- Know whether a reasonable adult (21 or older) is supervising the activity.
- Be sure the child is dressed properly for the activity and the climate.
- Plan ahead by anticipating situations and behaviors, thereby reducing risks and hazards.
- Plan ahead so that the child does not become overtired.

A particular child may have a health or physical problem that requires special attention and supervision. For example, a child with a history of seizure disorder requires one-on-one

supervision in a swimming activity. (This is true even when the seizures are under control with medication). Or a child may have allergic reactions to such things as insect bites or bee stings.

Protection from sunburn is a concern for all children but especially for children taking certain medications. When a child has a specific health problem, it is crucial for you to discuss it with the child's doctor and to review it with the child's caseworker.

3 Dating

Dating is a normal part of adolescence that is important for individual development and social adjustment. As the foster parent, you can help guide the teen in your care so that dating becomes a source of enjoyment and personal enrichment. Be clear that you are responsible for setting the rules and boundaries for dating.

4 Transportation

Foster parents are expected to provide transportation for the child for the usual daily living situations, school functions, church activities, medical visits (including mental health appointments), dental visits, treatment conferences, and occasional court hearings.

5 Trips and Vacations

Each local agency or district determines its own policies for requiring consent for trips and vacations. When a trip, an overnight stay, or a vacation is planned, foster parents should contact the caseworker to ask whether consent is needed.

Trip and vacation activities may include:

- Field trips with the school, church or synagogue, or other community group.
- Family vacations. Whenever possible, it is hoped that you will be able to take your foster children with you on family vacations. All vacations, trips, or other alternative arrangements involving a child in care must be discussed with the child's caseworker (as far in advance as possible). Each situation must be individually evaluated and approved by the local agency.
- Trips outside the county, state, or country.
- Spending the night with a friend's family.

If it is necessary to be away from your home overnight without the foster child, notify the caseworker.

6 Clothing

At the time a child is placed or soon after, you will receive forms related to clothing; you may need to make a list (inventory) of the clothes that came with the child. You may receive an initial clothing or diaper allowance to supplement the child's wardrobe, depending on the child's needs. A regular clothing allowance is provided. Check with your local agency for the specific policy and forms.

Make sure that each child in your care has a basic wardrobe consisting of play, school, and dress clothes. If possible, go shopping with your foster child as a way to model appropriate choices and budgeting. Children who are old enough to make clothing decisions should be involved in the process.

Children in care should be dressed appropriately for the occasion, the weather, and current fashion in clothing that is clean, attractive, and

well fitting. As adult role models, be mindful of the example you are setting for children by your own appearance and grooming.

Any clothing purchased for a foster child belongs to the child. When children move to another foster home or return home, they should take their current wardrobe with them. Remember, too, that clothing and other possessions from home may have a very special meaning for a child.

7 Allowance

If an allowance is provided, it should be given freely and not linked to the amount of chores a child performs. Allowance is not to be used for the child's basic needs.

Giving a child an allowance is helpful in teaching the use of money. It is suggested that your foster children be allowed to spend at least a portion of their allowance as they wish since this helps promote independence and responsible decision-making.

Check with your agency for its policy on allowances. Space is provided below for you to enter your agency's recommended allowance by age.

Agency's Recommended Allowance by Child's Age

\$_____ for children ages 10 - 11 years old

\$_____ for children 11 - 12 years old

\$_____ for children 13 years and older

8 Chores and Work

Performing chores that help maintain household order or satisfy a family need will help children feel useful and competent and learn how to be responsible. Giving chores to children, however, should be done in a thoughtful way and in accordance with the following guidelines:

- Arrange for the child to feel successful in the early stages of the task or chore that he or she is given.
- Start with simple chores and tasks and work up to more complex ones as the child's skills increase and ability to persevere becomes stronger.
- Design the chore or activity according to the child's level of development.
- Rotate chores so that the child can develop different skills and have a variety of experiences.
- Chores or work should not be associated with discipline or punishment. Rather, they should be seen as part of the child's participation in family life.
- A prolonged amount of time should not be required for any chore. The time that chores are to be performed should not interfere with family activities, school, regular play time, visits to the birth family, or the child's normal contacts. Any morning or noon chores should not affect the child's ability to attend school without stress.
- Let the child know that you are interested in working *with* him or her rather than being an overseer or critic. Be sensitive to the needs of the child for help and support in carrying out chores. Work can provide an

ideal situation for you to be in the role of an interested, helpful adult.

- Praise the child for a job well done. Praise will help instill a sense of pride in achievement and a feeling of self-confidence.
- Be cheerful, supportive, and understanding when the child’s capacity or interest diminishes, and show your willingness to be helpful. The child who is given help when he or she needs it is best prepared to give help to others when they need it.
- Encourage foster children to take care of their own personal belongings, make their bed, and keep their closet, drawers, toys, and other items in order.

After checking first with the caseworker, you might want to encourage a teenager in your care to earn some money, when appropriate and possible; even a little self-support helps a youth become mature and independent. Such work could include shoveling snow, raking leaves, and having a paper route. Make sure that teens obtain a work card before applying for a job.

As foster parents, you should know and approve of the nature of the work; you should also know who is employing the teenager to make sure that the work is appropriate and that there is no exploitation. Youth should not be engaged in work that is potentially hazardous or use equipment (e.g., power mowers) that might be unsafe. Teens should be adequately paid.

Be absolutely certain that the situation does not violate any child labor laws.

Be careful that the part-time employment is appropriate for the teen’s level of maturity and that it does not interfere with school work. Encourage the teen to discuss any prospective job – and employment goals in general – with the caseworker.

9 Babysitting

If a foster child is considered mature enough, and if the situation is appropriate, he or she may babysit. Check with your local agency for the policy on babysitting.

Remember that foster parents may never leave a foster child under the age of 10 without competent adult supervision. Before leaving children over 10 alone, take into account the unique needs of children in care, the issue of safety, and the maturity level of the child.

10 Savings

Children in foster care who are earning money may keep as much as they want for future needs. There is no limitation on the amount that they may deposit in a savings account or that may be used to purchase savings bonds, etc. A child may choose to use all or a portion of his or her earnings for day-to-day expenses.

A savings account is an appropriate way for a young person to gain skill in both banking and responsibility. The account belongs only to the youth; as such, it should always be in the youth’s legal name, not the foster parent’s name.

Some foster children have guardianship accounts, trust funds, etc., that they are entitled to have at age 18. The caseworker will inform you of any available funds, and arrangements will be made to transfer the funds directly to the youth.

11 Joining the Armed Forces

Youth age 17 in foster care need the consent of their parents to enlist in the armed forces. The local agency needs to give consent when guardianship of the youth has been transferred to the Commissioner of Social Services. Youth age 18 or older in foster care may enlist in the armed forces without the need for consent.

12 Driving and Owning a Car

Youth in foster care who want to apply for a learner's permit must notify their caseworker before doing so. Consent will be required from either the parents or the agency.

Whenever possible, youth in foster care should enroll in a driver education course if they want to drive. Sometimes a teen who has obtained a learner's permit or license wants to drive the foster parent's car; foster parents who allow this must have their own insurance policy extended to cover under-25 drivers. Foster parents should make clear the expectations and obligations associated with the privilege of using the family's car. Check with your local agency.

Foster parents may co-sign a contract to buy a car if they wish (they are not obligated to), but they are advised not to since they would be liable for any failure to pay. Youth age 18 or older in foster care may enter into a contract without anyone's permission, and they will be obliged to fulfill the contract.

13 Getting Married

Children age 16 or 17 need the written consent of their parent or guardian to marry. Youth age 18 and over do not need consent.

14 Smoking

Foster parents have the right to forbid or allow smoking in their own home, but given the known health risks, they should discourage foster children from starting or continuing smoking. Foster parents should not purchase tobacco products for any foster child, and it is illegal in New York State for children under 18 to purchase cigarettes.

Foster parents who smoke should do so in an area where foster children are not subjected to second-hand smoke. *Smoking should never be allowed in the foster child's sleeping areas.*

15 Hair Care

Whenever possible, foster parents are encouraged to consult with the birth parents – and the child, if old enough – about the child's hair style. Foster parents should not change the hairstyle of a child in care (cut long hair short, give perms, color, straighten, etc.) without checking first with the caseworker to see if consent is required. Changing a child's hair style without any discussion could affect his or her self-esteem and could also affect your relationship with the birth parents.

16 Piercing and Tattooing

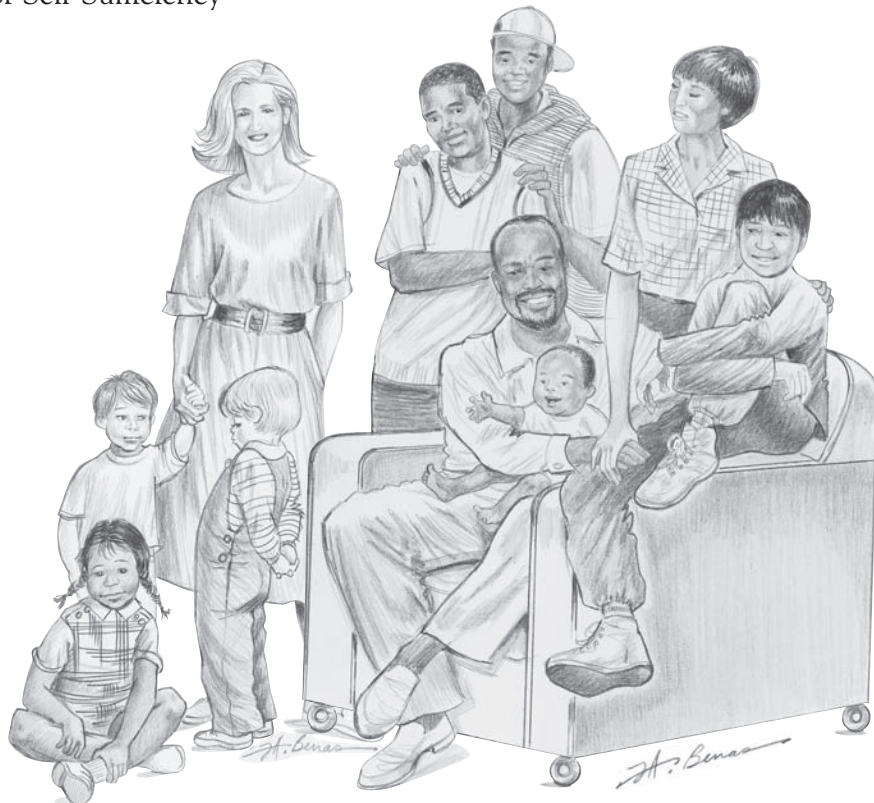
Foster parents cannot allow a foster child's ears (or other body parts) to be pierced, or any part of the body tattooed, without checking first with the caseworker to see if consent is required.

Chapter 6 Teamwork

As a foster parent, you are a member of a team with the caseworker, the child's parents (if possible) and/or other relatives, and the child's law guardian, along with service providers and health care providers. This means that you are not alone in caring for the child. You have support. It also means that you meet with the child's family in visits and case conferences, and you keep the caseworker up-to-date on how the child is doing.

All members of the team should be acting on behalf of the child. They should do everything they can to provide a caring, safe temporary home while at the same time working toward a permanent situation for the child in the future. This chapter gives information on:

1. Helping Plan for Permanency
2. Relationship with the Child's Parents
3. Role in Parent-Child Visits
4. Relationship with the Caseworker
5. Participating in Service Plan Reviews
6. Participating in Court Hearings
7. Services to Parents, Children, and Foster Parents
8. Preparing Youth for Self-Sufficiency



1 Helping Plan for Permanency

As a foster parent, you are a continuing presence in the child's life. You are familiar with the child's personality and emotional and intellectual development since you care for him or her 24 hours a day.

Therefore, you can contribute valuable information about the child as you work closely with the caseworker/agency, participate in meetings about the child, and communicate with the parents. Foster parents are often the main source of information about how a child is adjusting to the separation from home, interacting with other children, and performing in school.

Even more important, you are a primary source of support for the child. When you have a positive, healthy relationship with your foster children, you help build their trust in adults. This helps prepare them for changes in their living situation that might be necessary to achieve their permanency goal. For example, they may return home, or they may be adopted. As you continue to nurture the child day after day, you are helping to plan for his or her permanency.

The rest of this chapter describes specific ways that foster parents can help plan for permanency – through parent-child visits, contacts with the caseworker, service plan reviews, court hearings, and discharge activities.

2 Relationship with the Child's Parents

Below are examples of what some foster parents have done to help create and maintain a working relationship with their foster child's parents:

1. Praise and recognize decisions and activities related to positive parenting.
2. Make scrapbooks or photo albums containing mementos for the child.
3. Construct a family tree or a Life Book with the child. (See **Chapter 2, When a Child Comes Into Foster Care, Section 6.**)
4. Send parents a birthday or holiday card.

Some suggested topics for discussions between foster parents and birth parents include:

- School conferences, school functions, and PTA meetings.
- The child's clothing and shopping plans.
- The child's health, behavior, or school experience.
- The child's social activities, relationships (including siblings), social development, and special needs.
- The child's visits to the doctor and dentist.
- Plans for holidays that are special to the child, e.g., birthday parties, graduations, and holiday celebrations.



Note: The intent of these activities is to engage the child's parents in the lives of their children. Be sure, however, not to promise that you will keep from the caseworker information given by the parents.

3 Role in Parent-Child Visits

Foster parents can play an important role in visits between a child and his or her parents. If the visits take place in the foster home, you may be more involved in the visit. But even if visits take place elsewhere, you can help the child adjust before and after the contact. Your role is to help make the visit an experience that satisfies the child and strengthens the child-parent relationship.

Keep in mind that visiting is an important part of the child's adjustment to his or her situation. Regular, constructive visits help lessen a child's separation anxiety.

Visiting is also critical to successful family reunification. Parents who have frequent, regular, and meaningful visits have the best chance of reunification with their children. As time approaches when a child will return home, visits may occur more often, and they may last a longer time.

Visiting Plans

The agency is required to plan and facilitate biweekly visiting (every two weeks) between the parent and child unless biweekly visiting is prohibited by court order. Visits could be more frequent depending on the permanency plan.

Visiting plans are developed on an individual basis. In setting up a visiting plan, the caseworker will consider factors such as:

1. Location (may include the foster home).
2. Length of the visit (amount of time).
3. Responsibility for transportation to home visits (can include foster parents).

Foster parents need to confer with the caseworker to change visiting plans. Visits need to be scheduled. However, if the parent, foster parent, and caseworker agree, unscheduled visits may be allowed.

If your agency asks you to keep a log of all visits, stick to facts, not opinions. For example, you might write brief comments such as: "parent came on time," "parent praised child," "parent yelled at child," "parent brought food for snack." Any notes you take to document visits may be used in conferences or court hearings and may be subpoenaed.

Helping Make Successful Visits

Foster parents can do a great deal to help make visits in the foster home go well. Some suggestions are:

- Try to make the child's parent feel welcome by being as natural as possible. Try not to be too intimate or too reserved. It may be helpful to offer a cup of coffee or a snack.
- Try to give the parent and child some privacy during the visit by either going about your normal routine or making a separate space available.
- Have some toys and games available for the parent when playing with the child.

When There Are Problems With Visits

It is important to keep in mind that for many parents, visiting their children in foster care is an experience that may heighten their sense of personal failure and inadequacy. Their anxiety causes some parents to make unrealistic promises or to agree to plans that have little chance of success.

At the time of placement, or shortly after, visiting “ground rules” should be discussed and agreed to by all team members – foster parent, birth parent, relatives, and caseworker. This should prevent problems.

At times, a specific problem may arise. Contact the caseworker *as soon as possible*. This may include any incidents, observations, feelings about something that occurred, or the child’s reactions. Because every situation is different, the caseworker is in the best position to advise you on how to handle different issues.

Problems, which sometimes occur around parent-child visits in the foster home, include:

- **Failure of a parent to show up for a visit.** Inform the caseworker as soon as possible. It is the caseworker’s responsibility, not the foster parent’s, to deal with the parent.
- **Parent continually comes late for visits.** Ask the caseworker to discuss this with the parent. The parent should be asked to call if he or she is going to be late.
- **Parent arrives unannounced.** You should be prepared to know what to do. The caseworker should discuss this with both you and the parent.
- **Parent arrives in a state of tension, visibly angry, or intoxicated.** You will have to decide whether to allow the visit. First, assess the threat of danger, potential injury to the child, and the ability to control the situation. If possible, contact the caseworker.
- **Parent upsets the child by saying destructive things or tries to physically reprimand him or her.** Intervene in the situation. Try to stay calm but firm. If the situation does not improve, suggest that the visit end. Contact the caseworker.

- **Parents call constantly.** Limit calls to a specific time that is both convenient for the foster parents and fair to the parents and the child.

Helping the Child With Visits

- If the child is upset after a visit, allow him or her to have those feelings. Sometimes visits can be upsetting. Saying goodbye is difficult. It helps the child to know when the next visit is scheduled.
- Don’t conclude that it is a mistake for the foster child to visit his or her family. Even if occasionally upsetting, in general there are more advantages than disadvantages to such visits for most children. Visits help children maintain a sense of reality about their family.
- If something unusual happens during a parent-child visit, or if the child always returns upset or unhappy, report this to the caseworker. Always report any physical abuse.
- If children are allowed to talk freely about their parents and their situation, they may feel less anxious. Answer their questions clearly, simply, and sensitively if they are confused about why they are in foster care.
- Children often continue to love their parents no matter how they are treated or what problems the parents have. Be careful about what you say and how you say it. If you are negative about their parents, children may respond defensively, and this could have a negative effect on their self-esteem. It could also force them to take sides.
- It is important to be honest in acknowledging parental behavior that is not in the child’s best interest. Putting behavior in terms of “choices the parent made” is more objective and non-blaming.

4 Relationship with the Caseworker

Ideally, the caseworker and foster parents will develop a team relationship. This benefits the child and makes your life easier as well.

Casework Contacts

The child's caseworker is responsible for holding regular face-to-face visits (casework contacts) with the foster parents at least every 30 days or more frequently, with at least one of the contacts held at the foster home every 90 days.* During the first month of placement, casework contacts must be held as often as necessary but at least once in the foster home.

Whenever possible, the visits should be prearranged and held at a mutually convenient time. In situations involving sudden problems, emergencies, or crises, there should be casework contacts to assess the situation and arrange for appropriate services.

Casework contacts are also helpful when certain key events take place in the child's life. Key events (such as the first day of school or a change in visiting plan) can have a powerful impact, resulting in changes in behavior or conduct, sleeping and eating patterns, and temperament. Dealing with the issues that may arise around these events may call for additional contact and support.

The caseworker's initial visit is particularly important. It is the first opportunity to meet the caseworker and obtain information on the facts of the case, the visiting plan, and board rate. **Chapter 2, When a Child Comes Into Foster Care**, has more information on the first visit by the caseworker.

During your regular contacts with the caseworker, you may be asked about – or you may bring up – the following topics:

1. The child's adjustment to foster care.
2. The child's behavior in the foster home, school, and community.
3. The child's health.
4. Need for additional services.
5. Discipline issues.
6. Assessment of parent/child visits.
7. Review of service plan goals, tasks for child and foster parent, and assessment of progress.

When communicating about a foster child, caseworkers and foster parents can help one another. Since you have a day-to-day relationship with the child, you know the child's personality and behavior. You can observe the child before and after parent visits, and you can see progress, or lack of progress, over time. Foster parents have a lot to contribute to the assessment of a case.

You know the child much better than the caseworker does. But to have a good working relationship, you need to keep the caseworker informed about the child's situation and achievements as well as problems. Take the initiative to call the caseworker regularly even when things are going well.

The caseworker is also responsible for meeting with the child at least every 30 days to assess the child's safety and well-being in the foster home and to assess the permanency plan for the child. During the first month of placement, caseworker contacts must be held at least twice, with at least one of the contacts held in the foster home.*

* OCFS regulation 18 NYCRR 441.21(d)(2)

5 Participating in Service Plan Reviews

Service Plan Reviews (SPRs) are meetings scheduled at regular intervals to assess and review the service plan, previous decisions, and outcomes. Participants discuss the continuing need for foster care; they also assess the appropriateness of the permanency goal and the services needed over the next six-month period to achieve the permanency goal. When a child is placed in foster care, the first Service Plan Review must be held within 30 days of the child's removal from home or within 30 days of placement for PINS and JDs.

The agency should involve the following people (if applicable) in developing the service plan and participating in the Service Plan Review: the child (age 10 and up, unless there is a

documented reason why the child should not be involved); birth parents unless their rights have been terminated; child's guardian; relative to whom the child is to be discharged; child's tribe/tribal expert if the child is an Indian child; child's current foster parent or caretaker relative or pre-adoptive parent; case planner, supervisor, case manager, CPS monitor; service providers; child's law guardian; and any other person the child's parent identifies. In addition to the case planner, a third party reviewer must be present at the Service Plan Review. The third party reviewer is a staff member or consultant who is objective but knowledgeable about best social work practices and requirements.

Depending on the permanency goal, a family's service plan identifies what needs to change to enable the child to safely return home and states the goals of the needed service, the tasks to be performed, and the date by which family

Tips for Foster Parents

- Share positive information about the child, such as report card grades or a child's achievements in sports, school activities, or church. This kind of information sharing keeps the communication positive between you and the caseworker. Of course, this type of information should be shared with the child's parents as well.
- Consider the caseworker as a resource. Don't hold back from asking questions about services, community resources, foster parent groups, training activities, and other ways in which the caseworker can be helpful to you. Don't be afraid that the caseworker will think you can't cope on your own; rather, think of yourself as taking responsibility for the situation by taking advantage of opportunities.
- If the caseworker calls you to discuss a problem, try to stay calm and listen. The more defensive you are, the less likely you will be able to hear what is being said and to respond effectively. Be aware that it may not be easy for the caseworker to make this kind of call. Trust that the worker has good intentions.
- If you call the caseworker first, frame your concern in terms of, "This is a problem that we need to address together." Realize that by alerting the worker to a certain problem, you are taking responsibility for the situation.
- When bad news needs to be communicated to a child, talk to the caseworker about who should deliver it. Sometimes it is better if both of you talk to the child at the same time.

members are expected to achieve the goals. The foster parents should work closely with the parents on accomplishing the goals they agreed to in the service plan. The caseworker monitors the impact of services and the extent to which the family members have achieved their goals within realistic time frames.

The following topics should be reviewed at each meeting:

1. Whether the child's foster care placement is appropriate and necessary.
2. The extent to which the agency, parents, and child are carrying out the tasks in the service plan and whether the service plan should be changed.
3. The parents' progress (with the agency's help) in correcting the conditions that led to the child's placement.
4. The visitation plan.
5. The child's safety and assessment on progress in eliminating risk.
6. Actions taken to meet the family's needs.
7. The likely date for discharging the child from foster care.

Because of your parenting skills and 24-hour-a-day contact with the child in your care, you have an opportunity and responsibility to contribute information at Service Plan Reviews. It is important that you distinguish between facts and opinions.

6 Participating in Court Hearings

Every child in foster care becomes involved in court hearings, also known as "proceedings." Occasionally, you may be asked to appear in court to testify on behalf of the child. The caseworker should inform you ahead of time that a hearing will be taking place and what kind of hearing it will be. Having this information will help you prepare yourself and the child for the possible outcome. If you are asked to participate – or you choose to participate – in the hearing, you should have time to think about what you will say and to discuss this with the caseworker. As members of a team, the caseworker, law guardian, and foster parent need to keep one another informed.

See **Legal Rights of Foster Parents** on page 55 for information on the foster parent's right to participate in permanency hearings.

The Family Court and Different Types of Hearings

The Family Court deals with certain issues involving children and their families. It has jurisdiction over cases involving:

- Abuse and neglect of children
- Adoption
- Custody and rights to visit children
- Paternity
- Family offenses/domestic violence
- Persons in Need of Supervision (PINS)
- Juvenile Delinquents (JDs)
- Termination of parental rights

In relation to foster care, the Family Court conducts hearings for several purposes. After a child is placed in foster care, there may be hearings to approve or disapprove petitions to determine whether placement in foster care should continue or whether the permanency plan is appropriate. The court then makes

rulings based on evidence presented at the hearings.

Permanency Hearings

When a child is placed in foster care, a permanency hearing must be held on the date certain (*see Glossary*) established by the court. That date certain for the initial permanency hearing for a child placed involuntarily (abuse/neglect) or voluntarily must be must within eight months of removal.* The hearing, which must be completed within 30 days, is held to determine whether the placement should continue and whether the child's permanency plan is still appropriate. The next permanency hearing must be held within six months if the child remains in foster care. The court may designate an earlier date certain for the permanency hearing.

For children placed in foster care as PINS or JDs, the permanency hearing must be held within the first year of placement.

When a child is freed for adoption at a court hearing, the date certain for the freed child permanency hearing must be within 30 days of the freeing, unless it is held immediately after the hearing at which the child was freed, provided notice was given to all parties.

Current foster parents, as well as former foster parents who cared for a child for a continuous 12-month period, will be given notice about the permanency hearing so that they may have an opportunity to be heard. Current foster parents will be given a copy of the permanency hearing report that will be filed with the court; former foster parents will not. If the foster parents do not appear at the hearing, they waive their right to be heard.

Foster care is considered a temporary solution. If the child is still in placement after 12 months

without the parent or guardian “substantially, repeatedly, and continuously” maintaining contact with and planning for the future of the child, the court can order the agency to begin a proceeding to terminate parental rights and free the child for adoption. The agency can also begin this action without being ordered by the court.

Therefore, at the end of a permanency hearing, the judge may rule that:

- The child should be returned home (or placed with a relative or in another permanent living arrangement).
- The child should remain in foster care until the permanency goal is achieved.
- The agency should file a petition for termination of parental rights, or accept a surrender, so that the child may be freed for adoption.
- The child is freed for adoption.

Finding of “No Reasonable Efforts”

Sometimes, when a child is placed in foster care, the agency can ask the court to make a finding that “reasonable efforts” are no longer required to return the child home. Reasonable efforts are made by the agency to work with the family and provide services so that the child can return home safely.

Reasons for not making reasonable efforts to return the child home include factors such as aggravated circumstances (severe or repeated abuse), certain felony criminal convictions involving a parent, or a prior termination of parental rights. Known as a finding of “no reasonable efforts,” this means that the agency can seek to terminate parental rights. However,

* Date of the child's removal from the home plus 60 days plus six months.

the child generally must remain in placement for at least a year before the court can rule on the termination. Exceptions include cases involving a finding of severe or repeated abuse or permanent neglect when the child has been in foster care for 15 of the most recent 22 months.

Legal Rights of Foster Parents

The law recognizes the importance of foster parents and their special knowledge of the child and his or her needs. Although the average foster parent may not be eligible for free legal services, eligible foster parents are appointed an attorney who will represent them throughout the child's placement. The agency is represented by a county or agency attorney, and the child is assigned a law guardian.

Foster parents have the right to:

- Receive notice of, and participate in, any permanency hearing on a child placed in their home.

Foster parents who have had a child in their care continuously for 12 months or longer have the additional right to:

- Have their application to adopt that child be given preference and first consideration over all other applicants, *if the child is freed for adoption.*
- Participate, as an interested party, in any court proceeding involving the custody of that child.
- File a petition to terminate parental rights. It is highly recommended that you discuss this with the caseworker before proceeding.

See **Chapter 7, Concerns for Foster Parents**, for information on foster parents' legal rights when a child is removed from a foster home and when a foster home is closed by an agency.

Services to Parents, Children, and Foster Parents

Services to Parents

The parents of a child in care are entitled to receive services that support them in having the child returned home (if the permanency goal is to reunify the child with the parents). The agency may provide the services directly or it may refer the family to other specialized agencies or facilities. After assessing the family's needs, the caseworker identifies the services in consultation with the appropriate family members. Also, sometimes specific services are ordered by the court.

In some cases, the services are considered "preventive": Although preventive services are generally provided to prevent the child from entering foster care, they can also be provided to enable a child in foster care to return home earlier or to reduce the risk of a child discharged from foster care from returning to foster care.

Services that may be offered include:

- Casework counseling.
- Medical services.
- Family planning, sex education, and pregnancy services.
- Alcohol and other drug treatment programs.
- Mental health services.
- Educational services.
- Parenting skill groups.
- Homemaker services.
- Housing assistance.

- Employment services.
- Day care.
- Juvenile justice services.
- Domestic violence services.
- Immigration services.
- Discharge services.

As the foster parent, it is helpful for you to know what services the parents are receiving. As a team member, you can help support the parents in their efforts to strengthen their family and their environment so that their children can return home safely and permanently.

Services to Children

Children in foster care may also receive certain services such as tutoring, counseling, or medical treatment. Part of the foster parent role is to schedule appointments and transport the child to them. Also, providing steady, emotional support for the child in whatever “work” he or she must do is key to the service’s effectiveness.

In the three to six months before a child’s discharge, additional services may be provided to the child and/or the family to provide support during the transition home and to prevent the need for replacing the child in foster care.

Services to Foster Parents

Services available to foster parents include training and support from the agency through the caseworker and other staff. Depending on their circumstances and needs, foster parents may also receive day care and other services such as respite care and counseling. Ask your caseworker for information on available services.

8 Preparing Youth for Self-Sufficiency

Teenagers may be placed in foster care because they have run away from home, refused to go to school, or are considered beyond the control of their parents. Or they may be removed from their homes because they have been abused or neglected. Still others have become involved with the juvenile justice system as a result of delinquent behavior. Whatever the reason, often youth in foster care may have low self-esteem as well as feelings of anxiety about the future.

As a foster parent of teenagers, you are part of the team of people that will assist youth in learning basic life skills. To thrive and transition into healthy, productive, and self-sufficient adulthood, adolescents need a set of competencies and basic life skills in the following areas: daily living skills; housing and community resources; money management; self care; social development; and work and study skills. As a team member, you can support the youth’s participation in life skills services. Knowing that the agency offers these services should also help you feel less alone in helping the youth learn skills for daily life.

Life Skills Services

Because of their experiences, youth in foster care may lag behind their peers in many of the skills needed to obtain education and employment and to set up their own households. The agency must offer instruction in life skills to youth who are 14 to 20 years old no matter what permanency goal they have. These are skills in areas such as decision-making and planning, education and employment, budgeting, health and personal hygiene, and housing. Youth receive a small monthly cash stipend when they actively participate in life skills services.

Youth must be at least 14 years old to have the goal of Another Planned Living Arrangement with a Permanency Resource (formerly Independent Living). The agency will conduct an individual assessment of the teen's needs for skills training; the foster parents may be asked to assist with the assessment even if the youth's permanency goal is return home or adoption.

After the initial assessment is completed, an independent living plan will be written and documented in the youth's case plan. The caseworker works with the youth to develop the plan, which includes goals related to education or vocational training and employment. To help accomplish the plan, foster parents can model and teach many personal and homemaking skill areas. The plan is reviewed and updated at each Service Plan Review.

See **Chapter 4, Getting Started, The Basics, Section 5, School**, for information on educational services.

Family Planning Services and/or Sexual Counseling

Family planning services are available to any adolescent in foster care. These services include sex counseling provided by a doctor or qualified person at a family planning center or clinic. This enables young people to ask questions and discuss their sexuality in a confidential, professional setting. If you feel that the child placed with you could benefit from these services, contact the caseworker.

Tips for Foster Parents: Listening to Youth*

- If you treat teenagers with respect, and give them an opportunity to speak, you can get to know them.
- Respond to youth where they are (e.g., music, other interests).
- Look directly at the young person. Focus on what he or she is saying, and listen.
- Pay attention to the *individual*, not just the case record or history.
- Let youth have an active role in their service plan.

These tips came from teens in foster care who wanted to share their experiences and what they've learned from being placed in foster care.

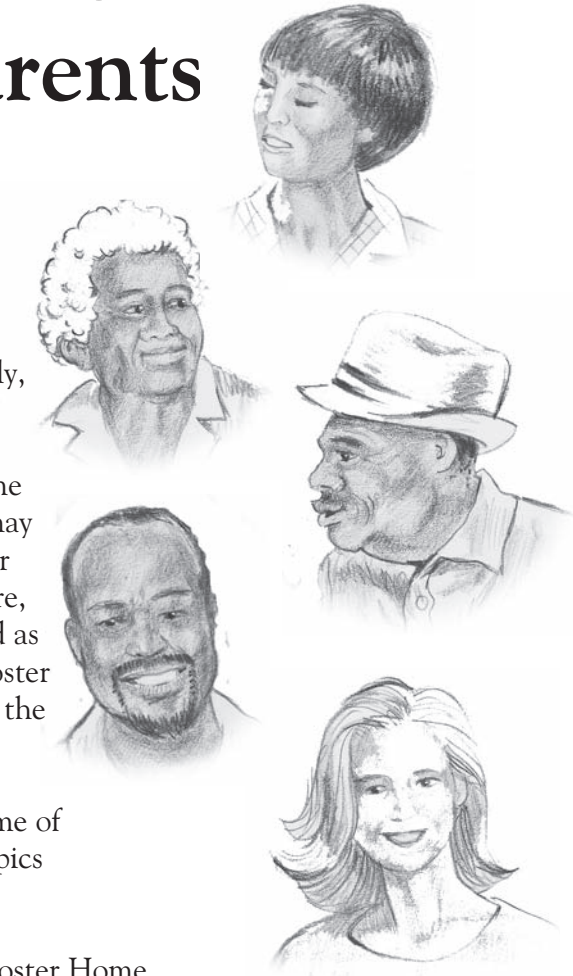
* The Listening to Youth Project, sponsored by the National Resource Center for Foster Care and Permanency Planning, Hunter College School of Social Work, City University of New York.

Chapter 7

Concerns for Foster Parents

This chapter covers those times when a foster home experiences change for one reason or another. Eventually, foster children leave the foster home. Sometimes a child is moved from one home to another. A foster home may be reported for child abuse or neglect of the children in care, and/or a home may be closed as a foster home. Sometimes foster parents decide not to stay in the foster care program. This chapter provides important information even though some of these situations are rare. Topics covered include:

1. When a Child Leaves a Foster Home
2. When a Child is Removed from a Foster Home
3. Closing a Foster Home
4. Reopening a Foster Home
5. Deciding Whether to Stay in the Program
6. Abuse and Neglect of a Child in Foster Care



1 When a Child Leaves a Foster Home*

This section will give you some ideas about how to handle the situation when a foster child leaves your home. Even if you've been through this before, you may learn some tips about making the process as smooth as possible. If you have your own tips, you could share them with other foster parents going through a separation with their foster child. Finally, everyone is different: you may want another foster child right away, or you may want to wait a while.

You are told the child is leaving. The caseworker has just told you your foster child is going to leave. It is important to get your feelings in order before approaching the foster child. Whether you feel joy or grief, you need to talk to the child calmly. If you are feeling very emotional...and many foster parents feel this way...and you need to gnash your teeth, *do it in private*. Separation is difficult enough for a child without also burdening him with your emotions.

Who tells the child he is leaving? You and the caseworker need to decide who will tell the child. In some cases the caseworker and child have a close friendship, which will enable the caseworker to do it best. In others the foster mother or father will be the best candidate. If you are doing it, share how you are dealing with it to the caseworker. He or she will want to be supportive and may have hints to help you help the child. Teamwork makes any job a bit easier!

How do I tell the child? Honesty and kindness are the best rules of thumb. Every situation is different. There is no cut and dried rule. Try a calm and simple statement such as "Today the Judge said..." and put it in easy to understand language for the child. If it is news the child has been anxious to hear, rejoice with the child.

If it is news that the child will be moved to a new foster home or adoptive family, he may be afraid of the unknown. He may fear returning to his parents. Make positive statements. Do not promise happiness forever. Find positive, truthful things to say, such as "your family has waited a long time for you to come back" or "the caseworker says you will like this new home because... ."

What if I don't like the home the child is moving to? You are not going to help the child by pointing out all the "terrible" things she will face in her move. If she tells you the things she fears about the move, help her to talk about it. Share her fears with the caseworker. Don't promise that "Dad won't drink anymore" or "your new mother will never spank"... you can't be sure what will happen. You can be positive in saying "your father is trying very hard not to drink" or "your mother is very excited about your coming to live with her" if you know this to be true. Don't promise pie in the sky.

Won't the child think I don't love him? Many foster parents have this worry and of course should tell the child that you have loved and cared for him. Admit you will miss him (if that is the truth). But keep it calm and leave the sobbing scenes out.

How soon before he leaves should I tell the child he's going? Some moves must be made within a few hours, if the court so decrees. Other times you have several weeks or months. Time helps you to air fears and worries, if you have time. You must determine how the child might react. Talk it over with the caseworker.

I'm worried about how our family will take the child's move. Ask your caseworker about this. The caseworker can share how other foster homes have handled this issue. Talking

* This section was adapted from "When a Child Leaves the Foster Home," Tennessee Parent Association. Printed with permission.

helps everybody concerned, and your family has certainly been involved and concerned...after all they lived with the foster child too! The other children in the family may have a grieving period, which will help them accept the fact the foster child is leaving your home.

How do I pack for the child? Children are accumulators. Whether she has been with you 2 weeks or 2 years, there are items that have become “hers.” To send a child off with a paper bag of ill-fitting clothes is stripping her of dignity and worth. Take a tour of the house with the child. Tell her you need her help in finding what is hers. When she points to the television or someone else’s toy you can calmly say “no, that belongs to the family” or “that is Sarah’s. It stays here.” Her own items should go with her. A child 3 or older can make the tour. *It helps make the move definite for the child and you.*

If the child has been with you any length of time, you should have begun compiling a Life Book. Send the Life Book with the child and any other photos or mementos that you have. Do send bits of her past, e.g., cute things she has said or done, a record of her health and shots, a schedule that may help the family. An older child may resent being packed off with a cardboard box, paper bag, or plastic bag. If so, ask the caseworker if something can be arranged for a suitcase.

What about sending a baby? A very small infant has become used to the *smells* of your linens. Send a blanket or two, a crib sheet, a comfortable pair of pajamas or outfits he’s used to wearing. An older baby has begun to favor certain toys. Send his favorites. It is most important to send the baby’s schedule. List any “firsts” for the parents receiving the child, such as first tooth, when sat up or rolled over, etc. Explain how the baby likes to be held or fed. Anything you know that will help the child adjust more quickly to a new home should be shared with the new family.

I can handle it all but the moment the child goes out the door. Try to send the child off with pleasant memories. When the front door closes, feel free to cry or celebrate...whichever applies to your feelings! Then tell yourself you did the best you could. You cared for the child when she needed a parent. She has a brighter future because of you. And now that you’ve had a child leave...you’re a full-fledged foster parent!

When a Child is Removed from a Foster Home

A foster child may be removed from a foster home for one of several reasons:

- Health and safety issues.
- Family Court decision.
- Foster parent request.
- Child’s need for a higher level of care.
- Reuniting siblings in the same home.
- Foster home closing.
- Agency decision based on casework factors, e.g., a conflict between the child and foster family, conflict between the birth parents and foster parents, inability of the foster parent to follow the case plan on such matters as counseling or visitation.

If a foster parent requests the removal of a child, the caseworker and foster parent should meet first to try to resolve the issues prompting the removal request. For example, could the situation be improved if the foster parent had respite care? Would tutoring help if the child is falling behind in school? Perhaps the child needs to be more involved in extracurricular or other social activities.

If the issues cannot be resolved, the foster parent and agency should work together on an appropriate plan for the child. Working together will help ease the transition to another foster home and reduce the child's anxiety about moving again.

Tip

If you feel that the child needs to be removed, give both the agency and child enough time to make an adequate plan. The situation is best handled if done thoughtfully and not as a crisis.

Policy on Removal from Foster Care

The agency can remove a foster child from a foster home without notice if the child's health and safety are at risk. Otherwise, the agency must give the foster parents a 10-day notice that the child will be removed.*

If the agency is planning to remove a foster child from a foster home, the agency is required to do the following:

- Notify the foster parents of the proposed removal in writing at least 10 days before the proposed date. The only exception is a case where the health or safety of the child requires immediate removal from the foster home.
- Allow the foster parents to request a conference with the agency. At this conference, the foster parent will be told the reasons for the proposed removal and given the opportunity to discuss the reasons why the child should not be removed.
- Hold the conference within 10 days of the date the agency receives the request from the foster parents.

- Send a written notice of the conference to the foster parents and the foster parents' legal representatives, if any, at least five days before the conference date.
- Make a decision no later than five days after the conference and send a written notice of the decision to the foster parents and their legal representative. The decision should also advise the foster parents of their right to a fair hearing.

If there is a conference request, the child will not be removed from the foster home until at least three days after the notice of the decision is sent, or before the proposed effective date of removal, whichever occurs later. (For example, if the original proposed date of removal was January 10 and the decision was sent on January 6, the removal date would still be January 10. However, if the original proposed date is January 10 but the decision is sent on January 11, the removal cannot take place until January 14.)

Foster parents who do not object to the removal of the child from their home may waive in writing their right to the 10-day notice once the decision has been made to remove the child and the foster parents have received the notice.

Fair Hearing

If after the conference, the foster parents still do not agree with the decision, they can request a fair hearing from the Bureau of Special Hearings, 52 Washington Street, Rensselaer, NY 12144. This is an administrative review by a hearing officer assigned by the New York State Office of Children and Family Services to hear the foster parent and the agency's views regarding the removal of the child. Foster parents may have legal representation at a fair hearing. They can appeal fair hearing decisions to the State Supreme Court. Even if the foster parents request a fair hearing, the agency has a right to remove the child. The time frame is the same as

* OCFS regulation 18 NYCRR 443.5(a)(1)

above (at least three days after the notice of the decision is sent, or before the proposed effective date of removal, whichever occurs later).

3 Closing a Foster Home

A foster home may be closed for one of several reasons:

- At the request of the foster parents.
- When the foster parents who have no children currently placed in their home move out of state.
- When the foster parent/caretaker dies.
- By the agency, for health and safety reasons.
- When the home no longer meets agency standards.

If foster parents do not agree with the decision, they should check their agency's policies on appealing the decision and on reapplying for certification.

4 Reopening a Foster Home

To reopen a foster home that has been closed, the agency must do the following:

- Obtain a new application from the foster parents, including clearance through the State Central Register.
- Complete a criminal history record check.
- Update the home study.
- Obtain a physician's written statement about the foster family's health or a physician's

report of a medical exam that was completed within the past year.

- Review the evaluation with the foster parent.

If all the standards are met, the foster parents will receive a new certificate or approval.

5 Deciding Whether to Stay in the Program

It is a good idea to assess on a regular basis whether you want to continue being a foster parent. If you feel you need a break, tell your caseworker. It is better to have your foster home on hold rather than close it and have to reapply later.

You may want to leave the program because of a change in circumstances (e.g., retirement, new job, travel, divorce, health problems); difficult relationship with a particular caseworker; agency misrepresented the child; or clash of personalities with the child.

Before you decide to stop being a foster parent, please consider if any of these factors apply to your situation, and talk to your caseworker (or the supervisor if you are having problems with your caseworker). It is likely that the situation can be resolved without your leaving the program. Respite care or some other service may make all the difference. You may want to talk about your situation with another foster parent. Contact your local foster parent association, or, if you don't have one, start one.

On the other hand, you may decide to stay in the program because being a foster parent:

- Has a positive impact on children in need.
- Has a positive impact on your own family.
- Fulfills a need in the community.

6 Abuse and Neglect of a Child in Foster Care

If you suspect that a child in your care is being neglected or abused by anyone, let the caseworker know immediately. Abuse can be physical, mental, emotional, or sexual, or a child may be failing to thrive. Share those facts that made you suspicious so that a decision can be made about whether a report should be made to the appropriate authorities.

Certain people and officials are required to make a report (or cause a report to be made) whenever they have reasonable cause to suspect that a child has been abused or maltreated. Known as “mandated reporters,” they include caseworkers, child care workers, mental health professionals, physicians, nurses, and others.

Once a report is made (called in) to the Statewide Central Register of Child Abuse and Maltreatment (SCR), the local agency will assess the allegations and begin an investigation. The person suspected of abusing or neglecting the child is known as the alleged “subject” of the report.

Definitions of Child Abuse and Neglect

Child abuse, neglect, and maltreatment are defined in Section 412 of the Social Services Law and Section 1012 of the Family Court Act as follows:

Abused child. A child under 18 years old upon whom the person legally responsible for his or her care:

- inflicts or allows to be inflicted serious physical injury or death.
- creates or allows to be created a risk of serious physical injury or death.

- commits or allows to be committed a sex offense.

Maltreated child. A child under 18 years old who has had serious physical injury inflicted upon him or her, or is defined as a neglected child.

Neglected child. A child under 18 years old:

- whose physical, mental, or emotional condition has been impaired or is in imminent danger of being impaired as a result of:
 - a legally responsible person’s failure to exercise a minimum degree of care in supplying adequate food, clothing, shelter, education, medical, dental, optometrist, or surgical care, and in providing supervision and guardianship.
 - a legally responsible person inflicting unreasonable punishment; or abusing drugs and/or alcohol.
- who has been abandoned by the person legally responsible for his or her care.

When a Foster Parent is the Subject of a Report

Foster parents are sometimes reported to the SCR for abuse or maltreatment of the children in their home. If you or a member of your family is suspected of neglect or abuse, you will be expected to discuss the allegations with child protective services (CPS) staff.

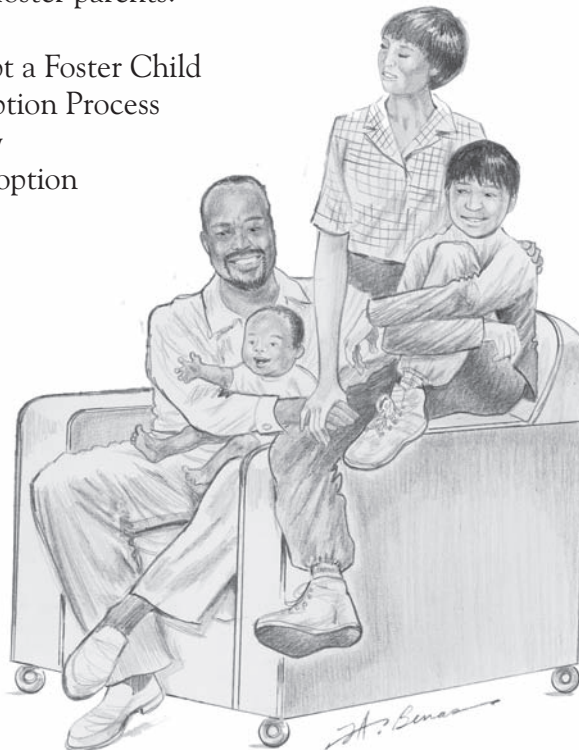
As the subject of an abuse/neglect report, the foster parent, and any other persons named in the report, must receive a notification letter within seven days of the oral report to the SCR. Upon determining that the foster child is at risk of harm, the agency will take steps to protect the child and make sure the child is safe. This may include removing the child from the foster home.

Chapter 8 Adopting a Foster Child

Sometimes foster parents want to adopt their foster child. The child's permanency goal may already be adoption or it may change to adoption because the parents surrendered their parental rights, or because the agency took the case to court to terminate their parental rights. It may also be adoption when both parents have died, or one has died and it is not necessary for the other parent to consent to adoption. The child must be legally freed for adoption before an adoption can be finalized. This chapter covers topics related to adoption of a foster child by the foster parents:

1. Deciding to Adopt a Foster Child
2. Starting the Adoption Process
3. Adoption Subsidy
4. Finalizing the Adoption

For statewide information on adopting a foster child, see the *New York State Foster Parent's Guide to Adoption*. For information on adopting a foster child in New York City, see the *New York City Foster Parent's Guide to Adoption*. These guides are available in English and Spanish. Your agency may have copies, or you may print them from the Office of Children and Family Services (OCFS) website, www.ocfs.state.ny.us. Also, on the OCFS website click on Adoption for information on adopting a child.



1 Deciding to Adopt a Foster Child

Some foster parents are certain that they want to adopt the child in their care. Others are not so sure. Such an important decision should be made on a rational basis, not on emotions alone. Even if you feel clear about your decision, answering the following questions may help you find out whether you are ready or not:

- Can I accept the child unconditionally? Can I accept the child's past?
- Can we make a lifetime commitment?
- Have I realistically evaluated the child's needs and problems?
- Do we have the abilities, resources, and energy to meet those needs and face those problems?
- Are other members of the household positive about the idea of adopting?
- What effect will adoption have on our family?
- Should the age and health (of both foster parents and child) be taken into account? If so, who will care for the child if we die or become disabled?
- Does the child have siblings who are also freed for adoption?
- What (if any) will be the child's connection to the birth family?



Before a child becomes legally freed for adoption, talk to the caseworker if you are interested in adopting. As the foster parent, you are entitled to participate in Service Plan Reviews where the child's permanency goals are addressed. It may also be helpful to talk to other foster parents who have adopted children in their care.

If you choose *not* to adopt, the agency will begin looking for an appropriate adoptive family for the child. During this time, you can help prepare the child for the change; such preparation generally improves the chances that the adoption will be successful.

2 Starting the Adoption Process

You may begin the adoption process while the child is being legally freed for adoption. Talk to your caseworker to make sure that this is a good idea in your case. This includes applying for adoption subsidy (see next section) before the child is legally freed.



Your agency will play a vital role in the adoption process. The authorized agency that has legal custody of the child must give consent before a child can be adopted.

Foster Parent Preference in Adopting

If a legally free child has lived with a foster parent for 12 continuous months or more, the agency must give that foster parent's request to adopt the child preference and first consideration. This means that after the child is legally free for adoption, you can ask the agency

for permission to adopt the child. The agency must take your request to adopt into account before it considers allowing any other family to adopt the child. This foster parent preference, however, is not a guarantee that you will be able to adopt the child. The agency is still required to make sure that adoption by the foster parent is in the child's best interests.

Declaration of Interest in Adopting

If you are interested in adopting a child in your care who is legally free, you should sign the Declaration of Interest in Adopting. This declaration is written confirmation that the foster parent is interested in adopting the child. Once this is signed, the agency cannot have the child photolisted in The Adoption Album. The New York State Office of Children and Family Services (OCFS) publishes The Adoption Album, which has photographs and brief descriptions of children who are freed for adoption. Some of the children listed in the album are also listed on the OCFS website, www.ocfs.state.ny.us.

Adoption Home Study

You and your home will need to be approved by the agency as an adoptive home. The requirements for approving an adoptive parent are similar to those for certifying or approving a foster parent. Therefore, for foster parents who are adopting, the adoption home study focuses on areas that need updating. During the adoption home study, you will be asked questions about yourself, your family, and your home, as well as questions about care of the child. The agency uses this information to decide whether adoption by the foster parents will be in the child's best interests.

Fingerprinting

Anyone over the age of 18 living in your home who has not been fingerprinted will have to be fingerprinted and go through the criminal history record review process. As a certified or approved foster parent, you have already been fingerprinted through the state's process.

Information You Should Receive

In most cases, an adoption caseworker will be assigned to handle the adoption process. Make sure that you have the available medical history of your foster child and your foster child's birth parents before you adopt (you should have received this when the child was placed in your home). The history must include psychological information and medical information about conditions or diseases believed to be hereditary; drugs or medication taken during pregnancy by the child's birth mother; immunizations; medications; allergies; diagnostic tests and their results; and any follow-up treatment given or still needed by the child.

Adoptive Placement Agreement

The Adoptive Placement Agreement (APA) is a form that the foster parent and the agency sign after the foster parent is approved to adopt a child. By signing the APA, you agree to take care of the child and meet the child's needs with the intention of adopting, and the agency agrees to carry out its duties concerning the welfare of the child.

The caseworker should discuss the importance of the APA with you before you sign it.



Before signing any form, you should review it carefully and discuss it with your caseworker.

3 Adoption Subsidy

What is an Adoption Subsidy?

After adoption, foster parents stop receiving foster care board payments. Some children are eligible for adoption subsidy. An adoption subsidy is a monthly payment made to assist with the care and support of a child who is considered handicapped or hard to place.*

For purposes of adoption subsidy, a handicapped child is a child who has a physical, mental, or emotional condition or disability that is so severe it would make it difficult for the child to be adopted. A hard-to-place child is a child who is not handicapped and who either has been waiting to be adopted for a specific amount of time or is considered difficult to adopt because of certain factors. For example, a child is considered hard to place if he or she has been in care with the same foster parents for 18 months or more before they sign the Adoptive Placement Agreement and has developed a strong attachment to the foster parents while in care, and separation from the foster parents would adversely affect the child's development.

A foster parent's income is not considered in determining whether the foster parent will be able to receive an adoption subsidy. That is, the amount of money you earn does not affect whether you can receive an adoption subsidy.

Adoption Subsidy Agreement

To be able to receive an adoption subsidy, a foster parent must enter into an adoption subsidy agreement with the agency or social services district *before the child is adopted*. Be sure to ask the adoption caseworker about this sometime after the decision to adopt and before finalization.

One exception to the requirement that the adoption subsidy agreement be signed before finalization is when the child had a condition or disability that the adoptive parent was not aware of before the adoption, and a physician certifies that the condition or disability existed before completion of the adoption.

Rates of Payment

A subsidy is paid at one of three rates: basic, special, or exceptional. The rates are based on the child's situation at the time of applying for adoption subsidy.

Refusing an Adoption Subsidy

Prospective adoptive parents may choose to refuse the adoption subsidy even though the child may be eligible for one. This may occur for different reasons, such as:

- There is no perceived need for the subsidy.
- The child appears healthy physically and emotionally.

Reimbursement of Nonrecurring Adoption Expenses

If you are adopting a child who has special needs, you are also eligible for reimbursement of nonrecurring adoption expenses up to \$2,000. A nonrecurring adoption expense is a onetime payment of money that is directly related to and necessary for the adoption of a foster child with special needs. These payments include attorney fees, medical examinations, marriage certificates, and travel. These expenses are reimbursed only *after* the child is adopted. If the adoption is not finalized, the expenses will not be reimbursed. Be sure that you:

*OCFS regulations 18 NYCRR 421.24(a)(2) and (3) outline which children are eligible for handicapped and hard-to-place adoption subsidies.

1. Sign and date the nonrecurring adoption expenses agreement before completion of the adoption.
2. Save all receipts for adoption-related expenses.
3. Submit the receipts to the agency within two years of the date of the final adoption decree.

4 Finalizing the Adoption

To finalize the adoption, you will need to petition the court and ask the judge to issue an order of adoption. The agency and your attorney (lawyer) will help you. The steps for foster parents are as follows:

1. Hire a lawyer.
2. Help put together the adoption packet to send to court.
3. Keep track of the adoption case.
4. Go to court on finalization day.

Hiring a Lawyer

You may contact a lawyer to proceed with adoption after the Adoptive Placement Agreement is signed. If your foster child is legally free for adoption, you should contact a lawyer as soon as possible; it is a good idea to hire a lawyer who is familiar with the adoption process. You may begin the adoption finalization process, but be sure to find out if there is an appeal to the termination of parental rights pending in the court. All such appeals must be resolved before an adoption can be finalized.

If your foster child is not yet legally free for adoption or is in the process of being freed, you can contact a lawyer and get advice about the adoption process. However, if your lawyer works on your case and your child does not become free for adoption, the lawyer might still charge a fee for the work that he or she has done. This fee will not be reimbursable as a nonrecurring adoption expense.

The lawyer will complete the petition to adopt and file it with Family Court or a Surrogate Court, along with the necessary documents.

The Adoption Packet

Your lawyer will have to submit an adoption petition and other documents to court that the judge needs to finalize the adoption. The adoption petition and other documents are often called the “adoption packet.” The adoption packet contains information about the type of family that wants to adopt the foster child. The judge will require information about your home, how you live, who lives with you, and who spends time with the child.

The packet may have the following type of information:

- General information – name and address, age, religion, occupation, income.
- Marital status.
- Medical reports.
- Criminal history records check.
- Information about the birth parents.

When you have made the decision to adopt your foster child, ask your caseworker or lawyer what type of documents you will need and how to find them if you don’t already have them. Examples are your marriage certificate or divorce decree. If you are having problems getting them, tell

your caseworker and lawyer immediately. They should help you get the documents you need so that your adoption will not be delayed. In addition, the local district must also submit its own documents to the court.

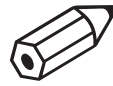
Keeping Track of the Adoption Case

Remember, *you* are the petitioner in the case. You begin the court finalization process by having your lawyer file the adoption packet in court. You have the right to follow up with your lawyer and the agency to make sure everyone is doing his or her part. You can check on the progress of the adoption by contacting your caseworker or your lawyer.

Going to Court on Finalization Day

After the judge has decided that you can adopt your foster child, a day will be scheduled for you and your foster child to go to court. To help your finalization go smoothly, you should arrive at court early. It is also helpful to know ahead of time what room you should go to and the name of the judge you will be seeing. Your lawyer should be able to give you this information.

Congratulations! You have accomplished your goal and are providing a permanent home for a child.



Some agencies offer post-adoption services to help adoptive parents make the transition to adoption. The need for support is normal and is not limited to the initial time period. Services can include counseling and/or support groups where adoptive parents can come together and share their feelings, experiences, and ideas. Ask your caseworker whether your agency has post-adoption services.

Glossary

Note: Certain terms are defined in this Glossary by statutory or regulatory language. Citations for the statute or regulation appear in parentheses. Abbreviations are as follows:

FCA – Family Court Act
SSL – Social Services Law
NYCRR – New York State Code of Rules and Regulations

Abandonment — A child is “abandoned” by his or her parent if such parent evinces (shows) intent to forego his or her parental rights and obligations. Such intent is manifested by his or her failure to visit the child and communicate with the child or agency, although able to do so and not prevented or discouraged from doing so by the agency. [FCA § 1012; SSL § 384-b(5)]

Abused Child — A child less than 18 years of age whose parent or other person legally responsible for his or her care:

- (i) inflicts or allows to be inflicted upon such child physical injury by other than accidental means which causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; or
- (ii) creates or allows to be created a substantial risk of physical injury to such child by other than accidental means which would be likely to cause death or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; or
- (iii) commits, or allows to be committed, an act of sexual abuse against such child as defined in the penal law. [FCA § 1012(e)]

Adoption — A legal procedure that transfers responsibilities for a child from the birth parents to the adoptive parents. The adoptive parent has full parental legal rights and responsibilities for the child.

Adoption Planning — A procedure begun by an agency for a child once the guardianship and custody of the child has been transferred from the birth parents to the agency. This process includes identifying the needs of the child, selecting a potential adoptive family, completing a home study of that family, beginning the placement process,

supervising the placement, and finalizing the adoption.

Adoption Subsidy — A monthly payment made to adoptive parents who have adopted a child who meets New York State eligibility standards as either a handicapped or hard-to-place child. Based on such factors as special medical, developmental, or social needs of the child or sibling group, this financial assistance generally begins after the finalization of the adoption and lasts until the child reaches the age of 21, as long as the adoptive parent continues to provide any support for the child and remains legally responsible to support the child. The amount can vary from case to case and is calculated based on a formula approved by New York State and the specific county. (SSL § 453)

Adult Permanency Resource — A caring, committed adult who has been determined by a social services district to be an appropriate and acceptable resource for a youth and is committed to providing emotional support, advice, and guidance to the youth and to assist the youth as the youth makes the transition from foster care to responsible adulthood.

Allegations — Statements in a child abuse/maltreatment report that have not yet been proven.

Another Planned Living Arrangement (formerly known as Independent Living) — A permanency planning goal to assist foster care youth in their transition to self-sufficiency by connecting the youth to an adult permanency resource, equipping the youth with life skills, and, upon discharge, connecting the youth with any needed community and/or specialized services.

Approved Foster Home — A home that has received approval from New York State to provide foster care for a *specific* child by a relative within the second or third degree to the parent(s) or

stepparent(s) of the child after an agency home study finds that the home has met approval requirements. [18 NYCRR 443.1(f)]

Assessment — The process through which the agency gathers the information it needs to form a case plan to help preserve the family. See *Case Plan*.

Best Interests of the Child — The best possible decision from the available options regarding the child – taking into account his or her physical, psychological, cognitive, and emotional needs. This term, undefined in statute, is used by Family Court.

Birth Family — The family to whom the child was born. The birth family is the child’s biological family.

Case Plan — A description of the specific steps that will be carried out to address the reasons for the child’s placement, based on the information the agency has gathered about a family. The case plan describes: 1) what the birth parents will do to develop strengths and meet needs; 2) what the caseworker will do to help the birth parents and child; 3) what others, including foster parents, will do to help the birth parents and child; and 4) when the case plan’s goals will be met.

Case Consultation — A discussion held to prepare for a permanency hearing unless a Service Plan Review will occur within 60 days of the date certain for a permanency hearing. The purpose is to assist with development of the permanency hearing report and to address case issues such as progress, status, safety, appropriateness of placement and permanency goal, service plan, and visiting plan. Participants must include the case planner/caseworker, birth parent, child age 10 and up if in the child’s best interests, and foster parent, pre-adoptive parent, or relative/other person with whom the child is placed by the court. [18 NYCRR 428.9(b)]

Case Review — A regular review of how each case of a child in foster care is progressing. The purpose of the case review is to address whether the family and others are taking the steps they agreed to in the case plan and whether the child will be able to live in a safe, permanent home by returning home, living with relatives, being freed for adoption, or being in another planned living arrangement with a permanency resource. The review must occur every six months. Each review must include at least one representative who is not involved with the case (third party reviewer).

Certified Foster Home — A home that has received a New York State certificate to provide foster care after an agency home study finds that the family meets the certification requirements. The certificate limits the number of children to be placed in the home and states any restrictions on child characteristics. [18 NYCRR 443.1(f)]

Child Protective Services (CPS) Worker — A local social services district worker who conducts investigations to determine if a child has been abused or maltreated and if there is risk of future abuse or maltreatment in the household where the child is living or may go to live. If the CPS worker determines that the child’s safety is at risk, he or she will remove the child from the home.

Concurrent Planning — Planning that works toward returning the child home while *simultaneously* developing an alternative plan for the child. Concurrent planning recognizes that the parent(s) may be unable or unwilling to establish a safe environment for the child and pursues another permanent goal for the child. It focuses on achieving a permanent goal for a child within one year of placement by highlighting certain aspects of casework practice.

Confidentiality — A basic principle and agency legal requirement for foster parents to not discuss a child’s family background, personal history, problems, or special needs with anyone other than those clearly assigned professional responsibility for some aspect of a foster child’s care and supervision. These matters cannot be discussed with the family’s friends, neighbors, or other relatives who are not part of the foster parent’s household unless for health and safety reasons. Confidential information includes information furnished by foster parents, the agency, the caseworker, the child, or the child’s birth family. It may concern the family background of the child, the child and family’s medical history and condition, and/or the services being provided to the child.

Court Hearing — Formal legal proceeding at which the court hears evidence and oral argument by the parties.

- **Initial appearance hearing** – First hearing in Family Court after the filing of a petition that allows the respondent to admit or deny the allegations contained in the petition.
- **Fact-finding hearing** – A formal legal proceeding at which the court hears evidence and oral

argument by the parties regarding allegations in a petition.

- **Dispositional hearing** – The hearing to determine what should be done for the child. This follows a fact-finding that the child is abused, neglected, committed an act of juvenile delinquency or is a PINS.

Court Order — Written or oral directive of the court requiring a party to take a particular action or refrain from taking an action. An oral order of the court is only effective if given to the party, to do or not do an act, in open court and on the record.

Custody — Physical and legal responsibility for a child and authority to act in place of the parent, granted by the court. Examples of physical responsibility are food, shelter, and necessary transportation. A foster child is in the care and custody or the custody and guardianship of the social services district.

Date Certain — A specific day set by the court when a permanency hearing will be held, not just a general time frame such as within six months. The court must set a date certain for each initial and every subsequent permanency hearing. See also *Permanency Hearing*.

Diligent Efforts — Attempts by an agency to assist, develop, and encourage a meaningful relationship between the child and his or her parents. Examples are assessing what services the family needs, providing or arranging for those services, and making arrangements for child/parent visits.

Diligent Search — The attempt to locate a missing mother, legal or alleged father, legal guardian, or responsible relative of a child placed in foster care. The purpose is to locate and involve missing parents in the planning process and to satisfy the court that adequate efforts were made to locate the parents and help the court decide how to handle notifying the parents about an upcoming court proceeding.

Disruption — When foster parents decide they are unable to continue caring for a particular child (for a variety of reasons) and that child must leave their home. The term “disruption” is also used when a child’s behavior or circumstances lead to the child being moved from his or her placement. With regard to an adoption, a disruption is when the child has been placed for adoption, and the child leaves the pre-adoptive home before finalization.

Emergency Placement — Placement of a child who has been removed from his or her home on an emergency basis. An emergency placement may be made with no prior notice and is temporary until a regular foster home can be identified or the child is returned to his or her home. In some counties, foster parents who are willing to take emergency placements are designated as emergency foster homes.

Extension of Placement — Continuation of the original placement order after review by the court in PINS and JD cases

Family Court — A court designated to hear matters related to family members. This court handles abuse and neglect proceedings and reviews voluntary placements, PINS (person in need of supervision) and JD (juvenile delinquent) cases, termination of parental rights, child support, paternity, adoption, guardianship, custody, and family offenses.

Finalization — The final step of the adoption process. The attorney, on behalf of the adoptive parents, files the appropriate legal documents, including the adoption petition, to finalize the adoption. A court hearing is set and a pre-finalization home study is completed. After the court hearing, the custody and guardianship of the child are legally transferred to the adoptive parents. The family receives a new birth certificate for the child with his or her last name changed to that of the adoptive family.

Finding — What the court determines the facts of the case to be, based on the evidence presented.

Foster Care — Foster care of children means all activities and functions provided concerning the care of a child away from his or her home 24 hours per day in a foster family free home or a duly certified or approved foster family boarding home or a duly certified group home, agency boarding home, child care institution, health care facility, or any combination thereof. [18 NYCRR 427.2(a)]

Freed for Adoption — When a foster child’s custody and guardianship are committed to an authorized agency through a surrender or a termination of parental rights proceeding based on grounds of abandonment, permanent neglect, mental illness or mental retardation, severe or repeated abuse, and death. This also includes a child whose parent or parents have died during the period in

which the child was in foster care and for whom there is no surviving parent who would be entitled to notice or consent. [SSL § 383-c, 384, 384-b and FCA § 1087(b)]

Guardianship — Physical and legal responsibility of a child granted to a person or authorized agency to act as parents by court order. Guardianship may be granted by the court when parental rights have been suspended or terminated. Generally, a person can be designated a guardian of the person, of the property, or both. A guardian of the person has the right to make decisions concerning the individual. The care, custody, and control of the individual is also usually (although not necessarily) granted to the person as well. A guardian of the property is a person who can make decisions concerning the property of the individual.

Handicapped Child — A child who possesses a specific physical, mental, or emotional condition or disability of such severity or kind which, in the opinion of the department, would constitute a significant obstacle to the child's adoption. Such conditions include, but are not limited to:

- (i) any medical or dental condition which will require repeated or frequent hospitalization, treatment or follow-up care;
- (ii) any physical handicap, by reason of physical defect or deformity, whether congenital or acquired by accident, injury, or disease, which makes or may be expected to make a child totally or partially incapacitated for education or for remunerative occupation, as described in sections 1002 and 4001 of the Education Law; or makes or may be expected to make a child handicapped, as described in section 2581 of the Public Health Law;
- (iii) any substantial disfigurement, such as the loss or deformation of facial features, torso, or extremities; or
- (iv) a diagnosed personality or behavioral problem, psychiatric disorder, serious intellectual incapacity or brain damage which seriously affects the child's ability to relate to his peers and/or authority figures, including mental retardation or developmental disability. (18 NYCRR 421.24) See also *Special Needs*.

Hard-to-place Child — A child, other than a handicapped child:

- (i) who has not been placed for adoption within six months from the date his or her guardianship and custody were committed

to the social services official or the voluntary authorized agency; or

- (ii) who has not been placed for adoption within six months from the date a previous adoption placement terminated and the child was returned to the care of the social services official or the voluntary authorized agency; or
- (iii) who meets any of the conditions listed in clauses (a) through (f) of this subparagraph, which the department has identified as constituting a significant obstacle to a child's adoption, notwithstanding that the child has been in the guardianship and custody of the social services official or the voluntary authorized agency for less than six months:
 - (a) the child is one of a group of two siblings (including half-siblings) who are free for adoption and it is considered necessary that the group be placed together pursuant to sections 421.2(e) and 421.18(d) of this Part; and
 - (1) at least one of the children is five years old or older; or
 - (2) at least one of the children is a member of a minority group which is substantially overrepresented in New York State foster care in relation to the percentage of that group to the State's total population; or
 - (3) at least one of the children is otherwise eligible for subsidy in accordance with the provisions of this subdivision
 - (b) the child is the sibling or half-sibling of a child already adopted and it is considered necessary that such children be placed together pursuant to sections 421.2(e) and 421.18 (d) of this Part; and
 - (1) the child to be adopted is five years old or older; or
 - (2) the child is a member of a minority group which is substantially overrepresented in New York State foster care in relation to the percentage of that group to the State's total population; or
 - (3) the sibling or half-sibling already adopted is eligible for subsidy or would have been eligible for subsidy if application had been made at the time of or prior to the adoption;
 - (c) the child is one of a group of three or more siblings (including half-siblings) who are free for adoption and it is considered

- necessary that the group be placed together pursuant to sections 421.2(e) and 421.18(d) of this Part; or
- (d) the child is eight years old or older and is a member of a minority group which is substantially overrepresented in New York State foster care in relation to the percentage of that group to the State's total population; or
 - (e) the child is 10 years old or older; or
 - (f) the child is hard to place with parent(s) other than his/her present foster parent(s) because he/she has been in care with the same foster parent(s) for 18 months or more prior to the signing of the adoption placement agreement by such foster parent(s) and has developed a strong attachment to his/her foster parent(s) while in such care and separation from the foster parent(s) would adversely affect the child's development. [18 NYCRR 421.24(a)(3)] See also *Special Needs*.

Home Study — The process of gathering information to determine if a prospective foster home can be certified or approved as a foster parent. Agency workers (usually called homefinders) visit the home and collect detailed information about the applicants as well as other household members and potential caregivers for the child. Background checks relating to criminal history and SCR reviews are required. The worker submits a report to agency, describing the home environment, background, social history, and current makeup of the family situation. A home study is also required for a person to be approved as an adoptive parent.

Independent Living — A term used to describe life after discharge from foster care for older youth. The agency must offer instruction in life skills to help prepare youth to live independently. Agency staff also must work with youth to identify adult permanency resources to be available and supportive after discharge from foster care and in the future. See also *Another Planned Living Arrangement*.

Indicated — A child abuse/maltreatment report that has “some credible evidence” to support the allegations. [SSL § 412(12) and 18 NYCRR 433.2(c)]

Investigation (of a CPS report) — Gathering of facts by a Child Protective Services (CPS) worker based on the State's requirements for home visits,

interviews, etc., to determine whether there is some credible evidence that the subject of the report abused or maltreated the child.

Juvenile Delinquent (JD) — A youth over 7 and less than 16 years old, who commits an act that would be a “crime” if he or she were an adult, and is then found by a court to be in need of supervision, treatment, or detention. (FCA § 301.2.)

Law Guardian — An independent attorney appointed by Family Court and paid by the county to solely represent the child's interests. Each child in care is appointed his or her own law guardian by the court.

Life Book — A combination of a story, diary, and scrapbook that has information about a child's life experiences, with such items as pictures of birth family and foster families, report cards, souvenirs of special events, and medical history. A Life Book should be started when children first come into care. Life Books are best developed in partnership by the foster parents, birth parents, caseworker, and child. Children take their Life Books with them when they return home, are adopted, or are discharged to independent living.

Life Skills Services — Services designated to assist foster care youth and former foster care youth to prepare for employment and post-secondary education, and to make the transition to responsible adulthood. Life skills services include, but are not limited to, structured programs of vocational training, life skills instruction, post-discharge services, and supervision until 21.

MAPP/GPS Training — A training program for prospective and new foster parents that teaches skills for successful foster/adoptive parenting through role playing and other group techniques. The approach encourages open communication and trust by working in partnership with birth families and caseworkers. MAPP/GPS stands for Model Approach to Partnerships in Parenting/Group Preparation and Selection.

Neglected (or Maltreated) Child — A child less than 18 years of age:

- (i) whose physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired as a result of the failure of his parent or other person legally responsible for his or her care to exercise a minimum degree of care:

- (a) in supplying the child with adequate food, clothing, shelter, education, medical or surgical care, though financially able to do so or offered financial or other reasonable means to do so; or
- (b) in providing the child with proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or a substantial risk thereof, including the infliction of excessive corporal punishment; by misusing a drug or drugs; by misusing alcoholic beverages to the extent that he loses self-control of his actions; or by any other acts of a similarly serious nature requiring the aid of the court; provided, however, that where the respondent is voluntarily and regularly participating in a rehabilitative program, evidence that the respondent has repeatedly misused a drug or drugs or alcoholic beverages to the extent that he or she loses self-control of his or her actions shall not establish that the child is a neglected child in the absence of evidence establishing that the child's physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired as set forth in paragraph (i) of this subdivision; or
- (ii) who has been abandoned by his parents or other person legally responsible for his care. [SSL § 412(9) and FCA § 1012(f)]

No Reasonable Efforts — A finding by the court that reasonable efforts are no longer required to return the child home after being placed in foster care due to certain circumstances, which are spelled out in the law. [FCA § 1039(b)] See also *Reasonable Efforts*.

Notification Letter — A letter required by state law that informs the parents or caregivers that they have been named as a subject or other person in a report of suspected child abuse or maltreatment made to the Statewide Central Register of Child Abuse and Maltreatment (Child Abuse Hotline). The letter must contain the Register number, report I.D. number, and date of the report. A different notification letter informs the subject or other person named in a report of the determination.

Parental Rights — The right to make major decisions for a child, such as determining a child's

religion, giving permission to marry or serve in the military, or deciding whether a child may be adopted. Also includes the legal right to be in contact with the child.

Permanency Hearing — A hearing held for the purpose of reviewing the foster care status of the child and the appropriateness of the permanency plan developed by the social services district. The standards for permanency hearings for abused or neglected children, children voluntarily placed in foster care, and completely freed foster children are set forth in Article 10-A of the Family Court Act. The initial hearing must be held no later than eight months after removal, and the subsequent permanency hearing must be held six months later. When a child is freed for adoption at a court hearing, the initial freed child permanency hearing must be held within 30 days unless the court determines that it should be held immediately upon completion of the hearing at which the child was freed, provided adequate notice has been given. (FCA § 1089) Standards differ for children placed as PINS or JDs unless they are completely freed for adoption.

Permanency Hearing Report — A report submitted by the social services district to the court and the parties prior to each permanency hearing regarding the health and well-being of the child, the reasonable efforts that have been made since the last hearing to promote permanency for the child, and the recommended permanency plan for the child. [FCA § 1087(e)]

Permanency Planning — Planning by agencies to protect a child's right to grow up within a permanent family. Agencies develop plans to place children in living situations that are safe, will meet their needs, and give them stability for the longest period of time.

Person In Need of Supervision (PINS) — A youth less than 18 years old who is habitually truant or who is incorrigible, ungovernable, or habitually disobedient, and beyond the lawful control of a parent or other person legally responsible for the youth's care, or other lawful authority. [FCA § 712(a)]

Person Legally Responsible — Child's custodian, guardian, or any other person responsible for a child's care. [FCA § 1012(g)]

Petition — Formal written application to the court requesting action by the court.

Placement Order — An order made by a court granting the custody of a child to an agency. A placement order may or may not be for a specific amount of time.

Preventive Services — Those supportive and rehabilitative services provided to children and their families for the purpose of: averting a disruption of a family which will or could result in placement of a child in foster care; enabling a child who has been placed in foster care to return to his or her family at an earlier time than would otherwise be possible; or reducing the likelihood that a child who has been discharged from foster care would return to such care. [18 NYCRR 423.2(b)]

Reasonable Efforts — A finding by the court that reasonable efforts were made to prevent removal. Reasonable efforts for a child in foster care include efforts made to enable the child to safely return home or to finalize the child's permanency plan if the permanency plan is not reunification. In both cases, the health and safety of the child are the paramount concern in determining reasonable efforts. [FCA § 1039(b)] See also *No Reasonable Efforts*.

Relatives Within the Third Degree — Relatives within the third degree are those who are related to the parent(s) or legal step-parent(s) through blood or marriage in the first, second, or third degree in the kinship line. *In relation to the child*, they are: grandparents and great-grandparents; aunts and uncles and their spouse; siblings and their spouse; first cousins and their spouse; great-aunts and great uncles and their spouse; and great-great grandparents. In addition, a person who is unrelated to a child may be approved to be a relative foster parent to that child if the person is related to the child's half-sibling(s) and such approval will allow the half-siblings to remain together. [18 NYCRR 443.1(i)]

Report (Child Abuse/Maltreatment) — Information submitted to the Statewide Central Register (SCR) of Child Abuse and Maltreatment concerning a child who is allegedly been abused or maltreated.

Respite Care — The provision of brief, temporary care and supervision of children for the purpose of relieving parents or foster parents of the care of such children or foster children when the family or foster family needs immediate relief in order to be able to maintain or restore family functioning or to provide

relief for foster parents from the stress of providing care for a severely handicapped or emotionally disturbed foster child or for a foster child with a chronic or recurring illness. [18 NYCRR 435.2(d)]

Recertification and Reapproval — The annual process of reviewing the certified or approved status of a foster home when the family wishes to remain eligible to care for foster children.

Reunification — When a child returns from foster care to live with his or her birth family.

Self-Concept — How an individual feels about who he or she is. Children who have been sexually or physically abused or neglected often blame themselves for their families' problems. Sometimes it is hard for children who have been treated badly to feel good about who they are. Their self-concept is poor. Foster parents should help children and youth understand and feel good about who they are, including their cultural, racial, and religious identities.

Service Plan Review (SPR) — A formal meeting scheduled at set periods to assess and reassess the service plan for the family and child and to review the child's permanency planning. Participants discuss progress toward the service plan and revise the plan if necessary. At a minimum, participants should include the caseworker, supervisor, birth parent, foster parent, child (age 10 and up, or younger if able to participate), and third party reviewer (an agency staff member who is not involved with the case). [18 NYCRR 428.9 and 430.12(c)]

Source — Person who has reasonable cause to suspect child abuse or maltreatment and calls the Hotline to make a report.

Special Needs — A category for determining whether a child is eligible for adoption subsidy. A child with special needs is defined as a child who:

- (i) the State has determined cannot or shall not be returned to the home of his or her parents;
- (ii) is handicapped or is hard to place; and
- (iii) a reasonable but unsuccessful effort has been made to place the child with appropriate adoptive parents without adoption assistance, except where such an effort would not be in the best interests of the child. See also *Handicapped Child* and *Hard-to-place Child*.

Statewide Central Register of Child Abuse and Maltreatment (SCR) (Hotline) — The register administered by the New York State Office of Children and Family Services that operates 24 hours a day, seven days a week for the purpose of receiving reports of suspected child abuse or maltreatment in various settings, including families, foster care, or day care. Upon receiving the report, the SCR transmits it to the appropriate CPS unit for investigation.

Strengths — The skills, resources, qualities, and experiences that are part of each person. Foster parents should look for and recognize strengths in themselves, children, and birth parents. Identifying strengths helps in understanding and appreciating others and in gaining insight into a person's life and behaviors. Part of seeing a person's strengths lies in seeing that person in a positive light.

Subject of a Report — Any of the following persons who are allegedly responsible for causing injury, abuse, or maltreatment to, or allowing injury, abuse, or maltreatment to be inflicted on, a child named in a report to the Statewide Central Register of Child Abuse and Maltreatment:

- (i) a child's parent or guardian;
- (ii) a director, operator, employee, or volunteer of a home or facility operated or supervised by an authorized agency, the Division for Youth, or an office of the Department of Mental Hygiene or a family day-care home, a day-care center, a group family day-care home or a day services program;
- (iii) a consultant or any person who is an employee or volunteer of a corporation, partnership, organization or any governmental entity which provides goods and services pursuant to contract or other arrangement which provides for such consultant or person to have regular and substantial contact with children; or
- (iv) any other person 18 years of age or older legally responsible for a child, including the child's custodian, guardian, and any person responsible for the child's care at the relevant time. Custodian may include any person continually or at regular intervals found in the same household as the child when the conduct of such person causes or contributes to the abuse or maltreatment of the child. [SSL § 412(4); 18 NYCRR 432.1(d)]

Substantiated (Indicated) — Found to have some credible evidence.

Summons — A document issued by the court, usually handed in person, notifying the person to appear in court at a day specified to answer a petition.

Surrender — A signed and notarized document transferring custody and guardianship of the child to an authorized agency official. In the case of a child in foster care, usually the child is surrendered to the local commissioner of social services, who is empowered to consent to adoption. The parent who executes the surrender no longer has consent to, or veto over, the child's adoption, nor the right to visit or plan for the child. A surrender can be judicial (executed before a judge) or extra-judicial (executed by the parent with two witnesses in the presence of a notary public).

Termination of Parental Rights (TPR) — Involuntary commitment of the guardianship and custody of a child to an authorized agency by a court proceeding. Grounds for termination of parental rights include abandonment, permanent neglect, mental illness or mental retardation of the parent, severe or repeated abuse of the child, or death. Each ground has specific statutory standards when the court may terminate parental rights. For example, in a TPR based on permanent neglect, a court determines when a child has been in foster care for one year, or the child has been in foster care for 15 of the most recent 22 months, that the parents have failed to substantially and continuously or repeatedly maintain contact with or plan for the future of the child, although physically and financially able to do so, even though the agency has made diligent efforts to encourage and strengthen the parental relationship. When a court determines that a child was severely or repeatedly abused and reasonable efforts are no longer required, a TPR may begin immediately. [SSL § 384(b)]

Unfounded (Unsubstantiated) — A report that has been determined by CPS where CPS has not found that some credible evidence of the alleged abuse or maltreatment exists. [18 NYCRR 432.1(f)]

Uniform Case Record (UCR) — A means of documenting case assessment and service planning through its various forms (e.g., progress notes, service plans, and plan amendments). The UCR provides a structure to help guide agency efforts at permanency planning and to record such efforts, thereby giving caseworkers a useful tool in working with families and children. (18 NYCRR 428)

Appendix A Certification and Approval of Foster Homes

1 Requirements for Certifying and Approving Foster Homes

Children who are placed in foster boarding homes are subject to standards set by state laws and regulations governing those homes. According to the regulations, a home study must evaluate the prospective foster parent's ability to address the child's health and safety. Foster boarding homes must be in compliance with criteria concerning physical condition, safety, resources, character, motivation, and willingness to cooperate with the agency or district in providing services needed and carrying out the permanency plan.

All applicants must complete the forms necessary to determine whether the applicant and any person 18 years of age or older who lives in the house of the applicant is the subject of an indicated child abuse or maltreatment report on file with the Statewide Central Register of Child Abuse and Maltreatment (SCR).

The prospective foster home must be evaluated and determined to meet basic physical, health, and safety requirements. Homefinders visit prospective foster parents at home and collect detailed information about the applicants as

well as other household members and potential caregivers for the child. In general, prospective foster parents are asked about their:

- Experience with raising children.
- Experience with issues of child abuse or neglect.
- Approach to discipline.
- Awareness of the importance of measures that provide a safe environment for children.
- Awareness of the potential impact of foster parenting on family members and the family's current life style.
- Ability and interest in being a partner in carrying out the permanency plan.

Regulations

Foster homes are "certified" (the term used for non-relative homes) or "approved" (the term used for relatives – see below Section 2) according to the same standards.

A home study and evaluation of the members of the foster family household or the relative's family household must determine compliance

with all of the following criteria for certification or approval:

- a. **Age.** Each foster parent must be over the age of 21.
- b. **Health.** Each member of the household of the foster family must be in good physical and mental health and free from communicable diseases. However, physical handicaps or illness of foster parents or members of their household must be a consideration only as they affect the ability to provide adequate care to foster children or may affect an individual child's adjustment to the foster family. Cases must be evaluated on an individual basis with assistance of a medical consultant when indicated. A written report from a physician on the health of a family, including a complete physical examination of the applicant, must be filed with the agency initially and biennially thereafter. Additional medical reports must be furnished upon the request of either the agency worker or the foster parent.
- c. **Employment.** Employment of a foster parent outside the home must be permitted when there are suitable plans for the care and supervision of the child at all times, including after school and during the summer. Such plans must be made part of the foster family record and must receive prior agency approval, unless only one of the two foster parents is working outside the home.
- d. **Marital status.** The marital status of an applicant may be a factor in determining whether or not a certification or approval will be granted only as it affects the ability to provide adequate care to foster children. Changes in marital status must be reported to the authorized agency; existing certificates or letters of approval may be revoked, and new certificates or letters of approval issued consistent with the best interests of the child.
- e. **Character.** Each applicant for certification or approval must be required to provide the agency with the names of three persons who may be contacted for references. The agency must seek signed statements from these individuals attesting to the applicant's moral character, mature judgment, ability to manage financial resources, and capacity for developing a meaningful relationship with children, or interview the individuals in person.
- f. **Ability and motivation.** The agency must explore each applicant's ability to be a foster parent and must discuss the following topics:
 - the reasons a person seeks to become a foster parent.
 - the understanding of the foster parent role including the responsibilities of foster parents in relation to the child, the agency, and the family.
 - the person's concerns and questions about foster care services.
 - the person's psychological readiness to assume responsibility for a child and his/her ability to provide for a child's physical and emotional needs.
 - the agency's role and authority to supervise the placement.
 - the attitudes that each person who would be sharing living accommodations with the child in foster care has about foster care and his/her concept of a foster child's role in the family.
 - the awareness of the impact that foster care responsibilities have upon family life, relationships, and current life style.
 - the principles related to the development and discipline of children and the need of each child for guidance, a supportive

relationship, appropriate stimulation, and the opportunity to identify with a parent or surrogate whose history reflects a value system that is socially constructive.

- a person’s self-assessment of his/her capacity to provide a child with a stable and meaningful relationship.

2 Kinship (Relative) Foster Care

Kinship (relative) foster homes are approved (according to the above criteria) to provide foster care for a *specific* child by a relative within the second or third degree to the parent(s) or stepparent(s) of the child.

A relative within the second or third degree to the parent(s) or stepparent(s) of a child refers to those relatives who are related to the parent(s) or stepparent(s) through blood or marriage either in the first, second, or third degree in the kinship line. A relative within the second or third degree of a parent includes the following:

- grandparents of the child.
- great-grandparents of the child.
- aunts and uncles of the child, including the spouses of the aunts or uncles.
- siblings of the child.
- great-aunts and great-uncles of the child, including the spouses of the great-aunts or great-uncles.
- first cousins of the child, including the spouses of the first cousins.
- great-great grandparents of the child.

- an unrelated person where placement with such person allows half-siblings to remain together in an approved foster home, and the parents or stepparents of one of the half-siblings is related to such person in the second or third degree.

3 Criminal History Record Check

As part of the required criminal history record check with the NYS Division of Criminal Justice Services, an agency must obtain a set of fingerprints from any prospective foster parent and each person over the age of 18 who is currently living in the home before the foster parent is finally approved or certified for the placement of a foster child. At the time a foster parent applies for renewal of his or her approval or certification, the same process takes place for each person over the age of 18 who is currently living in the home who has not previously had a criminal history record check.

The agency must send the fingerprints to the NYS Office of Children and Family Services, which sends them to the Division of Criminal Justice Services (DCJS), which does a search of its database. Then, the fingerprints are kept on file at DCJS and the certifying/approving agency would be notified should there be an arrest or conviction reported in the future.

Depending on the types of crimes listed in the criminal history, several actions could be taken:

- The application is rejected.
- The foster home is decertified; or approval of the kinship foster home is revoked.
- The foster child is removed from the foster home.

When a criminal history record of the foster parent or any other person over the age of

18 who lives in the home reveals a charge or conviction of any crime, the agency must perform a safety assessment of the conditions in the home. This includes:

- Whether the subject of the charge or conviction lives in the household.
- Extent to which the individual may have contact with the foster child or other children living in the household.
- Status, date, and nature of the criminal charge or conviction.

The agency must take all appropriate steps to protect the health and safety of the child or children, including removal from the home or denial of the application. The agency must document the safety assessment and the steps and actions taken to protect the health and safety of the child. The agency must promptly send the fingerprint cards to the Office of Children and Family Services, which will send them to the Division of Criminal Justice Services for its full search and retain processing.

4 Foster Parent Orientation

Foster parent orientation takes place soon after the completed application is received. Orientation may take place as part of an individual session or in a group training program. Whenever possible, one-to-one orientation should take place in the applicant's home during the home study.

Foster parent orientation must orient applicants who have been accepted for a home study, or relatives who are in the process of a home study, to:

- the social, family, and personal problems that lead to family breakdown and the need for the placement of children.

- the problems and reactions of children upon separation, and the function and responsibility of the foster family in relation to the child, the parents, and the agency staff.
- the agency policy and practice to have defined goals to achieve permanency for each child entering the foster care system.
- the authority of the local social services districts, the Office of Children and Family Services, and the Family Court to supervise the agency's practice.
- the nature of the relationship of agency staff to foster parents and children, including definitions of the function and responsibility of the caseworkers assigned to the children and their families.
- the payments to foster parents for care and expenses; the definition of foster family care; and certification or approval of the home.
- the rights and responsibilities of a foster parent as defined by a letter of understanding that must be executed at the time of certification or approval.

5 Completion of Certification/Approval Process

Foster parents are certified/approved when the following are completed:

- the home study;
- the SCR clearance; and
- the criminal history record review process, including fingerprinting.

The home study process should be completed within 60 days from the date the completed application from the prospective foster parent is received.

Appendix B Positive Approaches to Discipline

The following guidelines for foster parents offer positive approaches to discipline.*

- 1. State your expectations.** Be direct and clear in letting a child know what is expected of him or her. Do not assume that children know what you expect. Often this is not the case.
- 2. Be encouraging.** Use encouraging phrases that show you have confidence that a child can live up to your expectations. Examples of positive ways to phrase expectations are: "It would be helpful if ... ; I am sure that... ; I expect you to ... ; I know that you can... ."
- 3. Appreciate improvements.** Let a child know that you have noticed and appreciate his/her efforts to correct a misbehavior and that you are aware that he or she is trying to cooperate.
- 4. Spend a good deal of time praising, acknowledging, and appreciating a child's desirable behavior.** This encourages it and reinforces it.
- 5. Help change unacceptable behavior by making environmental changes:**
 - If a child is bored or restless, help him or her set up constructive activities (craft projects, games, etc.).
 - If the environment has become too stimulating and active, re-direct the child to a quieter activity.
 - Arrange the living space for children for their age, height, and use. Adjust the environment to meet the child's level by providing closet space, coat hooks, etc., where children can reach them. Not being able to handle the demands of their environment often makes children feel frustrated and helpless.
- 6. Prepare children for changes and transitions.** They will cooperate and feel better about themselves if they have time to adjust. For example, "In 10 minutes we'll be leaving for the store. Let's put these toys away and get ready." "This weekend you will be going to visit your parents, so let's think about what you will need to take along."
- 7. Consider the effect that emotional stresses (being away from home, going to a new school, etc.) have on children's behavior.** Give a child plenty of opportunity to work through his or her feelings in appropriate ways.

* Modeled on: "Thirty-Six Positive Approaches to Discipline," Lerman, Saf. Parent Awareness Training; *Positive Parenting for the 1980's*, A.& W. Publishers, NY.

8. **Keep in mind the age and stage capabilities of children** and what they are emotionally ready to handle. Try not to ask too much or too little of a child. When there is a recurring conflict over the same situation, it could indicate that the child is not capable of what you are asking. Being familiar with child development stages can keep expectations realistic.
9. **Avoid asking younger children questions that encourage a “no” answer.** Instead of asking, “Do you want to get dressed for school?” be positive and say, “It’s time to get dressed for school.”
10. **Be clear and emphatic when you need to be.** Say, “You must wear your boots this morning. There is no choice in the matter.”
11. **Keep things simple.** Don’t make a long speech when a stern glance or brief “cut it out” is all that is needed.
12. **Offer alternatives.** Children need to know what they can do, not just what they cannot do. For example, “The living room is not the place to throw the ball. Go outside if you want to do that.”
13. **State the limit impersonally.** For example, “Walls are not for writing on” is better than “You may not write on the walls.” This puts the focus on the rules and not on the child.
14. **Remember that rules can be bent for special occasions.** If a special TV show is on, or there is a visitor, the bedtime hour can, at times, be extended.
15. **Give a reason for your rules and limits.**
16. **Be prepared to repeat limits,** perhaps several times, as most children can’t be expected to respond the first time.
17. **Give children a chance to express their feelings about a situation before expecting them to try to resolve it.**
18. **Allow a child in fantasy what he or she can’t be allowed in reality:** “You wish you were grown up and could make all your own rules, but now it’s really time that you go to bed.”
19. **Teach a child to use words when he or she is angry,** rather than kicks, hits, or bites. When a child needs a more forceful outlet than words, encourage him or her to hit a punching bag, a pillow, or a tennis ball against an appropriate outside wall, to vent feelings.
20. **Tell a child when you are angry.** Showing honest disapproval lets a child understand the consequences of behavior. He or she will tend to feel more secure when you show your feelings in an honest way.
21. **Don’t get involved in insignificant arguments.** When you are in the middle of an argument that you realize you don’t even care about, erase the scene and start again. Leave the room, come back, and suggest that everyone start over as if the conflict has never happened.
22. **Offer clear-cut choices.** “You have a choice. You can play ball outside or stay inside and do something else,” and be prepared to follow through. If the child remains indoors and continues to throw the ball, take the ball away, saying, “You decided to stay inside; find something else to do.” Choices help children become more responsible for their actions.
23. **Give a child some control.** As children get older, they need more flexibility. “You can do your homework whenever you want to, as long as it’s done before you watch TV.”

24. **Begin a request with “as soon as.”** “As soon as you clean up your room, you can go outside.”
25. **Use role reversal,** and pretend to be each other. Role playing can be used just for the fun of it, or for making a point in disciplinary situations. (A child should never be forced to reverse roles. This only works well if he or she is willing). When a child becomes the caretaker for a short time, he or she is not on the spot. It gives the child a few minutes to think the issue through. By playing the parent, the child gets to set the limits, and thus will often listen better. Switching roles lightens the atmosphere, and even younger children can appreciate the humor of a foster parent pretending to be a belligerent child.
26. **Be humorous.** Humor can be a great aid in resolving conflicts. Children of all ages appreciate humor at their level.
27. **Using a game-like approach** is often effective with younger children. “I’ll close my eyes and turn around three times, and then you’ll have your pajamas on” is often more effective than getting angry about the delay.
28. **Put some requests in writing.** When children are old enough to read, occasionally having a request in writing can make it easier to accept. “Dear Mary, you said you would have your room cleaned before you went to the movie. How about it?”
29. **Approach issues as problems to solve.** Foster parents can encourage children to think of ways to solve problems. Often children will come up with excellent original solutions. If not, you can offer several possible solutions and let the child join in the process of selecting from them. It’s good to discuss all the alternatives thoroughly and to try to agree on a solution that is acceptable to all. It’s easier for children to comply with a decision if they have helped make it and if their needs were genuinely respected in the process. This helps children develop skills of self-reliance and creative approaches to problem-solving.



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