



FAMILY SERVICE
& CHILDREN'S AID

Family Service & Children's Aid

330. W. Michigan Ave. Jackson, MI 49201

517-787-7920

www.strong-families.org

Foster Parent Handbook

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FAMILY SERVICE & CHILDREN'S AID FOSTER PARENT HANDBOOK

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FAMILY SERVICE & CHILDREN'S AID (FSCA)
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The purpose of this handbook is to acquaint foster parents with Family Service & Children's Aid's (FSCA) rules, policies, and procedures in accordance with our Foster Care Program. These rules, policies and procedures are based on the requirements of the Department of Health and Human Services (DHHS), and our own standards. The handbook contains the foster parent/agency agreement, and the child management policy. Each foster parent is required to receive a copy of this document before the foster parent is licensed. Each foster parent must read this book, agree to comply with its content, and sign and date the attached form (see the last page) verifying that this has been done. If you have questions, comments, or suggestions pertaining to specific information in this book, please contact FSCA.

EMERGENCY CONTACT

IF YOU HAVE TO CONTACT THE AGENCY AT NIGHT OR ON THE WEEKEND, CALL 517-787-7920 AND SELECT THE PROMPT FOR CHILD WELFARE AND YOU WILL BE CONNECTED TO OUR ANSWERING SERVICE. THEY WILL CONTACT THE ON CALL WORKER, WHO WILL RETURN YOUR CALL AS SOON AS POSSIBLE.

THE ROLE OF THE FOSTER PARENT/RELATIVE CAREGIVER

Foster parents provide a valuable service to the community and to the children in their care. Foster parents provide a child with a home when it is not possible for that child to live with his or her own family. It is the foster parent's responsibility to provide twenty-four hour supervision and care to the child placed in their home. Your role as a foster parent is to provide: food, clothing, shelter, support, love, protection, medical care, dental care, guidance, and educational training. Foster parents have a responsibility to help the child develop a good self-image and to have positive feelings about his or her past, present and future. Foster parenting is not a lifetime commitment to a child, but a commitment to temporarily fulfill a parental role in the child's life. Foster parents should never try to replace a birth parent, but should still love and care for the child, build trust, and meet their emotional needs.

Parenting a foster child is often a challenge, as many of these children have experienced trauma. These children come from many different backgrounds, and they all have experienced loss and separation. Their experiences are very different from children who have grown up in your family. It is important to have realistic expectations of the children placed in your home. For healing to occur, foster children need a lot of love, patience, and assurance. It is important to remember healing occurs gradually.

YOUR ROLE WITH THE BIRTH FAMILY

Foster parents play a crucial part in helping children reunite with their families. One of the significant roles for foster parents is to maintain and encourage healthy ties between the child and his/her family. It is important to remember that it is your responsibility to remain positive towards the birth parents and child, even when you do not agree with how they have treated their child in the past or perhaps the current situation. This will enhance and validate the child's feelings by showing you are supportive of his/her birth family and display respect for the love he/she has for his/her birth parents.

BIRTH PARENT CONTACTS/PARENTING TIME

One of the significant steps in the reunification process is regular and frequent visitations. These visitation times are to promote contact and healthy bonding with the birth parents. Hence, it gives the birth parents the opportunity to demonstrate what they have learned through their various services. As a foster parent, you are a valuable team member, by sharing parenting skills and discipline techniques with the birth parent or caseworker that have been successful with their child. The basic guidelines for visitation are the following:

- Ages newborn-five years, visits occur at a minimum of twice a week
- Ages six and older, visits occur at a minimum of once a week
- Frequency, length, location, and supervision of visits may vary case to case by the court and the recommendations of the foster child's caseworker
- Extended family member visits will be addressed on a case-to-case basis and approved by the caseworker
- Phone calls and visits outside of the agency need to be approved by the caseworker

The visitation plan between a foster child and their birth parents shall be consistent with court orders and developed by the foster caseworker as agreed upon by the foster parents and the birth parents. Foster parents shall not withhold, censor or open mail sent to or by the foster child, unless ordered by the court, as they help to foster the bond between the child and his/her parents.

Birth parent involvement in medical appointments, parent-teacher conferences, and other events the child may have at school or in the community is for the reunification process. You can discuss these opportunities with your caseworker and get guidance on what would be appropriate for the birth parent to attend. Birth parents continue to make decisions regarding children in care. Therefore, prior approval is needed for changing a child's appearance (haircut, piercings, hair color, tattoos etc.). In addition, there are other required approvals needed such as children obtaining a drivers licensing, participating in hunting experiences, and entering the military. For further guidance reference Reasonable and Prudent Parenting Standard or contact your caseworker.

The primary goal of foster care is for children to return home, if the birth home can become a safe environment. As part of the child's professional team your active involvement, encouragement, and support for the child and birth parents are essential in assisting in reunification. As a foster parent, you play a significant role in helping a child adjust and cope with changes that occur during placement and legal status changes. It can help them to move forward with security and confidence.

Foster parents must cooperate with the foster child's visitation plan and shall provide the foster child with transportation to and from visits. Under normal conditions, birth parents will not have the address or phone number of the foster home, unless agreed to by the foster parents and the caseworker.

It is the responsibility of both the agency and the foster parents to follow the treatment plan and court orders in regards to contact with the birth family. Foster parents do not have the right or authority to alter any of these contacts without approval from the caseworker or the courts. Parental visits are NEVER to be restricted as a method of behavior management or punishment.

THE AGENCY'S ROLE WITH YOU

The agency's role is to assure that all children receive quality services that will enable them to return to their birth home or into a permanent living situation. Regular visits to the home by the child's caseworker are required to monitor the placement, discuss problems, develop a treatment plan, and a behavior management plan if needed. The following are the minimum guidelines for caseworker visits:

First month-within 30 calendar days after initial placement:

- Two face-to-face contacts with the child, at least one of which must occur in the placement; plus two phone contacts.
- The first visit with the child must take place within five business days from the date the case is assigned to the caseworker.

Second month:

- Two face-to-face contacts with the child, at least one of which must occur in the placement; plus two phone contacts.

Subsequent months:

- Face-to-face contact with the worker a minimum of once each calendar month whether the child is placed in a foster home, relative/unrelated caregiver's home, independent living, or in a residential/institutional setting. The visit must take place in the child's residence.
- Each visit must include a private meeting between the child and the foster care worker.

The child's worker will provide you with useful information regarding the child's birth family, and what precipitated the child coming into care. The caseworker will make you aware of all known behaviors. The caseworker will inform you of all court hearings and inform you of the outcomes. The caseworker will be available to attend school meetings with you and to schedule Individualized Educational Planning (IEP) conferences if needed. The child's caseworker will function as a child advocate and liaison with mental health treatment providers.

The agency's licensing worker is responsible for making sure your home meets the State of Michigan licensing requirements, and is available to provide training and support to foster parents. Concerns about licensing or questions about foster parent education should be directed to your licensing worker.

FOSTER PARENT TRAINING AND EDUCATION

All foster parents licensed through FSCA will be required to comply with the Licensing Rules for Foster Family Homes, State of Michigan and the Department of Health and Human Services (DHHS) requirements for foster parent orientation and training. Foster parents will be notified of all trainings offered by FSCA. Written notice of additional training

required by FSCA will be provided to all foster parents.

DHHS and FSCA requires that you attend an orientation and receive twelve (12) hours of pre-service training (PRIDE), Reasonable and Prudent Parent Standard, and First Aid before a foster care license is issued by the State of Michigan. Trauma Training must be completed during the licensing process or within the first six months of licensure. Every foster parent must complete a minimum of (6) hours of annual training and at least one of the caregivers in the home must be certified in First Aid. Foster parents who accept placement of children with more severe behaviors will need additional training beyond the minimum training requirements.

Training opportunities are available through FSCA throughout the year and through the Jackson Area Foster Parent Training Coalition. Foster parents may also attend trainings through the State of Michigan, community colleges, universities, conferences, or foster parent associations. Training credit can be earned by reading books and articles and completing online trainings that are relevant to foster parenting. Please check with your licensing worker or the agency website for more information about how to access relevant training opportunities.

Family Service and Children's Aid requires that the first twelve (12) hours of pre-service training must be the State of Michigan's PRIDE training, sessions 1, 2, 3, 4, & 6. PRIDE sessions 5, 7, 8 and 9 can be completed within the first 2 1/2 years of licensure. The following topics are covered during PRIDE Training:

- Connecting with PRIDE and Teamwork toward Permanence
- Meeting Developmental Needs: Attachment
- Meeting Developmental Needs: Loss
- Meeting Developmental Needs: Discipline
- Strengthening Family Relationships
- Continuing Family Relationships
- Planning for Change
- Taking PRIDE- Making an Informed Decision (panel)

Other training can include the following:

- Behavioral, emotional, and physical needs of the types of children the agency serves, and methods to aid in the development of these children
- Strategies to effectively parent traumatized children
- The rights and responsibilities of foster parents and the agency
- Child management techniques, including methods of discipline and approved methods of physical restraint
- Separation and the importance of the child's own family
- Supportive services available to the children and foster families
- Effective parenting of the types of children serviced by the agency
- Emergency procedures
- Preparation for independence according to the child's age, development and needs.
- Fire safety

Other requested and recommended trainings may be required during the initial home study and all updates (annual, renewals, special evaluations, and corrective action plans) which will include specific areas of training required for the foster family.

CHILD PLACEMENT

When a child comes into FSCA foster care, usually through either DHHS or other agencies, the licensing worker or supervisor will review all the foster homes that are available and whose home study recommendation is consistent with the children's needs, and locate the best possible match for the child.

The licensing worker will then call the prospective foster parents and provide as much information as available. The

agency shall provide a foster parent with all of the following information before the placement of a child:

- Child's name
- Child's date of birth
- Available known information about the child's health
- Any known history of abuse or neglect of the child
- All known emotional and psychological problems of the child
- Circumstances necessitating placement of the child
- Any other known information to enable the foster parent to provide a stable, safe, and healthy environment for the foster child and the foster family
- Name of assigned caseworker for the child

For an emergency placement, if any of the information is not available at the time of placement, then the information shall be provided to the foster parent within 7 calendar days of the placement.

When a foster child moves from one foster home to another a pre-placement visit will occur, whenever possible, time and circumstances permitting.

Once the child is placed in the home, the child's caseworker will give the family specific information about various issues, such as, appointments the child may have, school enrollment, visitation, etc.

When the child is placed in your home you will be given the following information:

- Case Open Checklist
- Medical Consent Card
- File Action Request
- Guidelines for Foster Parents and Relative Caregivers for Health Care and Behavioral/Mental Health Services
- Emergency Procedures
- Foster Care Provider DOC Report
- Clothing Inventory Checklist
- DHS 5307- Rights and Responsibilities for Children and Youth in Foster Care
- Placement Checklist
- Medical/Dental/Travel/Educational Authorization
- Medication Agreement
- Foster Parent Confidentiality Statement
- Foster Care Provider Report
- Notice to Current School
- Neglect Ward Access Information for L-GAL
- Youth Yearly Dental Record
- Incident Report
- Filing for Child Care Assistance
- Youth Placement and Educational Record
- Clothing Allowance Letter

This information is confidential and should be kept in a **locked file cabinet**. All child-specific information except for payment records must be returned to Family Service & Children's Aid after a child leaves the foster home for another placement.

MOVING A CHILD TO ANOTHER FOSTER HOME

Research has shown us that moving a child multiple times is detrimental to a child's ability to attach and intensifies behavioral and mental health problems. The agency's goal is always to try to maintain a placement if the home is a safe and secure place for the child. When problems arise with your foster child, immediately notify your caseworker, so that

services can be put into place to help resolve the problem. Within the agency the child welfare staff and counseling staff collaborate to help give foster parents the tools they need to continue to meet the challenges of the children in their care. However, there are times when problems are too severe for the placement to be maintained or the safety and security of the child is in jeopardy.

A Family Team Meeting (FTM) must be held when a child is moved. (See index for more information on the FTM).

When an agency must move a child from a foster home the following must occur:

- The agency and the foster parents must prepare the child appropriate to the child's capacity to understand, which includes an explanation as to why the change is necessary.
- The current foster parent must be notified in writing of the change not less than 14 calendar days in advance of the change, except when prior notification would jeopardize the child's care or safety. If prior notice is not provided, then the agency shall notify the foster parent, at the time of the change, why prior notice was not given.

If a child is moved by the agency for the following reasons:

- Agency has reasonable cause to believe sexual abuse, non-accidental injury, or emotional harm has occurred to child while in that placement.
- Agency has determined that it is in the child's best interest to be moved.

The foster care agency must notify the Foster Care Review Board and the family has three days to appeal the decision.

When a foster parent wants a child removed from their home, the following must occur:

- The agency and the foster parents must prepare the child appropriate to the child's capacity to understand, which includes an explanation as to why the change is necessary.
- The foster parent must provide written notification to the agency of the need for a foster child to be moved from the foster home not less than 14 calendar days before the move, except when a delay would jeopardize the foster child's care or safety or the safety of members of the foster family.

THE FOSTER HOME

HOME MAINTENANCE

The property, structure, premises, and furnishings of a foster home shall be constructed and maintained in a clean and safe condition and shall be adequate to meet the needs of each member of the household.

HEAT, LIGHT, AND VENTILATION

Heat, light, and ventilation shall be adequate to meet the needs of all household members. All windows and doors must be screened when used for ventilation.

FLAME AND HEAT PRODUCING EQUIPMENT

All furnaces, water heaters, fireplaces, hot water pipes, steam radiator, wood burning stoves, and all other flame or heat producing equipment shall be maintained in a safe condition. Portable heating devices or space heaters **shall not** be used in bedrooms. It may be required of foster parents to put a safety measures in place so access to flame and heat producing equipment is not accessible to young children.

SMOKE DETECTORS, CARBON MONOXIDE DETECTORS

At least one smoke detector that is approved by a nationally recognized testing laboratory shall be installed and maintained in working order in the following locations:

1. On each floor of the home, including the basement.
2. Between each sleeping area and the rest of the home.
3. In each area of the home that contains flame or heat producing equipment other than domestic stoves and clothes dryers.

At least one carbon monoxide detector that is approved by a nationally recognized testing laboratory shall be installed and maintained in an area of the home as recommended by the manufacturer.

BATHROOMS

A foster home shall have a minimum of one flush toilet, one sink, and one shower or bathtub, all of which must be in working order at all times. The sink and shower/tub shall have hot and cold running water. A foster home that provides care to a foster child, who regularly uses a wheelchair, must have a barrier-free bathroom. The temperature of the hot water in the sinks and bathtub shall not exceed 120 degrees Fahrenheit. The home's water supply shall be from a public source or private well that has been approved by the local health authority. All sewage shall be disposed of through a public system, or in a manner that meets public health requirements for a private septic system.

BEDROOMS

Sleeping rooms shall comply with all of the following provisions:

- Provide adequate opportunity for both rest and privacy, and access to adult supervision, as appropriate for the age and functioning of each child.
- Have not less than 40 square feet of floor space per person, excluding closets.
- Have sufficient space for the storage of clothing and personal belongings.
- Have a finished ceiling, floor to ceiling permanently affixed walls, a standard door, and finished flooring.
- Have a door that can be securely closed and leads directly to a means of exit and at least one window that leads to the outside that is easy to open and sufficient to exit from given the age, size, and functioning of the person(s) who occupies that bedroom.
- Be free of the following equipment:
 - Household heating equipment
 - Water heater
 - Clothes washer or dryer
 - Combustible materials
- A hall, closet, stairway, garage, shed, detached building, or a space that can only be accessed by ladder or trapdoor may not be used as a bedroom.
- Rooms above the second floor in a standard multi-story residence shall not be used as bedrooms unless there are two stairways to the ground level. At least one of the required stairways and all other vertical openings shall be enclosed by at least one-hour-fire resistive construction.
- A person who is non-ambulatory and cannot be carried readily by one member of the household shall sleep in a bedroom on the ground floor in a standard multi-story residence.
- A child shall not share a bedroom with an adult unless the child and adult are siblings and are of the same sex, the child is less than one year of age, or the child has a special medical need that requires the attention of an adult during sleeping hours.
- Children who are three years old or older shall not routinely share a bedroom with a parent.
- Children of the opposite sex who are more than five years of age shall not share the same bedroom.
- Each child shall sleep alone in his or her own bed. No child shall sleep in the same bed with any other child, sibling, or adult member of the household.
- All beds must be comfortable, have clean linens, blankets and one clean pillow. Bedding should be appropriate for the weather, be cleaned and sanitized before being used by another person and sheets and blankets should be washed at least weekly and anytime they are soiled.

EXITS

Every floor of the home must have two exits, remote from one another, and one of the exits must provide a direct, safe, and unobstructed means to the outside. A window may be used as a second exit providing that it is accessible to children and caregivers, can be opened from the inside, and is of a size and design to allow evacuation.

TELEPHONE

A foster home shall have an operating telephone **in the home** at all times and keep FSCA informed of the current phone number. If the family does not have a landline phone, a designated cell phone must be kept in the home. An Emergency Procedures Form must be posted in view of where the telephone is regularly kept. If a phone number changes the foster parent must notify the agency within 24 hours of the change.

WEAPONS

Per Rule R400.9415(3): Unless carried in the home as permitted by law, firearms and ammunition must be stored as follows:

- (a) Firearms must be all of the following:
 - (i) Locked in compliance with 1 of the following:
 - (A) By a cable-lock.
 - (B) By a trigger-lock.
 - (C) In a gun safe.
 - (D) A solid metal gun case.
 - (E) A solid wood gun case.
 - (ii) Unloaded.
 - (iii) Separate from ammunition.
 - (iv) Inaccessible to children.

- (b) Ammunition must be stored in a locked location and inaccessible to children.

If a foster parent has a Conceal Carry Permit, they must provide the agency with a copy of the permit. The foster parent must work with their licensing worker to develop a safety plan for securing the weapon in their vehicle when entering a weapons free building and when entering and leaving the foster home. A signed copy of this safety plan must be in the file and updated annually. Knives, bows and arrows, or decorative swords must be in a locked area and inaccessible to children. **FAMILY SERVICE & CHILDREN'S AID HAS IS A WEAPONS FREE PREMISES.**

HAZARDOUS MATERIALS

Foster parents must store all hazardous materials to ensure the safety and well-being of all family members and all foster children placed in their home. This includes, but is not limited to, the following: medications (prescriptions) and over the counter), alcohol, cosmetics, razor blades, household cleaning supplies and chemicals, kitchen utensils and knives, sewing materials, scissors, office supplies and hand and power tools. Medications (prescriptions and over the counter) must be securely locked and the foster family must show the licensing worker the location of where the medication is stored.

HOUSEHOLD MEMBERSHIP

FSCA needs to have information about every member of the household. Qualification for membership in a household licensed by FSCA shall broadly be defined by regular and significant presence in the home of the foster family and similar contact with established members of the household, including foster children. To assure the safety and welfare of a foster child, a member of the household shall meet all of the following qualifications:

- Be of good moral character and suitable to assure the welfare of children.
- Be in a state of physical, mental, and emotional health that will not impair the care of a foster child.
- Be willing to accept a foster child into the foster home as a member of the household.
- Be residing in the United States legally.

Any adult member of the household who provides care for foster children shall also meet the qualifications specified in licensing rule R400.9201

FOSTER CHILD SERVICES

INFANT/TODDLER CARE

Children birth to 12 months shall rest or sleep alone in a crib. Children 12 months to 24 months shall rest or sleep alone in a crib or toddler bed.

An infant shall be placed on his or her back for resting and sleeping. If an infant cannot rest or sleep on their back, a written authorization from a physician is required. The physician should clearly explain the best appropriate alternative, and these written instructions shall be obtained by the foster parent.

A foster parent shall maintain supervision and frequent monitoring of an infant for signs of distress not exclusively via a baby monitor.

Infants, birth to twelve months, shall rest or sleep alone in a crib that meets the criteria included in U.S. consumer Product Safety commission, Safety Standards for full Size Baby cribs and nonfull Size Baby cribs; final Rule 16 CFR Parts 1219, 1220 and 1500 (<http://www.cpsc.gov>) with the following:

- A firm, tight-fitting mattress with a waterproof, washable covering
- No loose, missing, or broken hardware or slats
- Not more than 2 3/8 inches between the slats
- No corner posts over 1/16 inches high
- No cutout designs in the headboard or footboard
- A tightly fitted bottom sheet with no additional padding between the mattress and the sheet.

An infant's head should remain uncovered during sleep. Soft objects, bumper pads, stuffed toys, quilts, comforters, or any object that could smother a child shall not be placed with or under a sleeping infant or child.

Infant car seats, infant seats, infant swings, highchairs, playpens, waterbeds, adult beds, soft mattresses, sofas, beanbags or other soft surfaces are **not approved** sleeping equipment/spaces for children who are 24 months or younger. If a child falls asleep in an unapproved space, they shall be moved to an approved sleeping area appropriate for their size and age. Substitute care providers must follow the same safe sleep requirements as foster parents.

RELIGION

Foster parents shall provide a foster child with the opportunity to participate in religious instruction and religious services of the child's preference, or the child's birth family's preference. If a foster child is placed with foster parents of a different religious faith, the foster parents must assure that the foster child may continue to participate in his or her own religion, or the foster parent must not accept the child into the home. The foster child shall be made aware of this policy, so far as the child is able to comprehend.

If a foster child or his or her birth family has no particular religious affiliation, a foster child may participate in the foster family's religious activities provided the foster child or the child's birth parents have no objections. However, a foster child shall not officially join a particular place of worship or be baptized or confirmed in a particular religion without the prior consent of the child's birth parents.

A case which requires that all contact between a foster child and his or her birth family be supervised, or is prohibited, and the child wants to attend the birth family's place of worship, may be a basis for denying the foster child the right to attend the religious services of his or her choice. This would need caseworker approval.

MAIL

A foster child shall be permitted to receive and send mail. Mail should be addressed to the child in care of the agency. In order to ensure the mail is in the best interests of the child's mental and physical health, a method of sending and receiving mail shall be arrived at by the child's caseworker and shall be monitored by the caseworker and the foster parents.

Mail shall not be censored in any way unless:

- The mail is suspected to contain unauthorized, injurious, or illegal materials,
- If it is court ordered.

In this case, the agency Foster Care Supervisor shall consult with the agency Chief Executive Officer. If the Chief Executive Officer believes the suspected mail should be censored, legal consultation shall be provided to ensure proper procedure is followed.

EDUCATION

Within five school days of placement, the caseworker and the foster parents will work together in making educational provisions for each child. Each foster child of school age must be enrolled into a school program as defined by law. For a foster child under school age, the caseworker may suggest enrollment in Head Start or other pre-school setting. If a foster child is placed in your home during summer months, consult with the caseworker about educational plans. The State of Michigan does not allow foster children to be home schooled.

The caseworker shall assure that the school administration is notified in writing of the name of the individual who represents the child. The caseworker shall also maintain in the child's record the current grade placement, school, and type of school program in which the child is enrolled.

Every county in Michigan now has an Education Planner who is an advocate for children in care.

CHILD'S PERSONAL POSSESSIONS/ MONEY & ALLOWANCE/ CLOTHING

Foster parents shall provide a safe place for each foster child's personal possessions and money. Each child should have a place in which he can keep some of his personal things and which is "off limits" to others; a box or drawer or chest. If possible, his "private treasure box" should have a lock, but be sure you keep a spare key or copy of the combination.

The amount of the daily board and care rate designated for the foster child's personal incidentals and allowance shall be given directly to the child. Under current guidelines, the rate for allowances is for children 0-12 is \$2.36 per day, and for children 13 and above is \$3.04 per day. If the child is young, then a procedure shall be agreed upon between the foster parent and the caseworker for the use of the personal incidentals and allowance monies on behalf of the child. The foster parents shall keep an accounting of all money disbursed to the child or put into a bank account for the child.

The foster parents should keep a record of money and other valuables a child entrusts in their care. Whatever the amount or value of his possessions, it is essential that they be returned to him or given to a FSCA worker when the child leaves the foster home.

Helping to safeguard the foster child's possessions is the responsibility of the foster parent. Even more important, is the message such safeguarding gives to the child; he is important and both he and his possessions deserve to be respected and protected.

Foster parents shall provide and maintain sufficient, adequate, and appropriate clothing for a foster child. Once a child is placed in the home, you will be asked to complete a Clothing Inventory Checklist. Once this is given to the caseworker, they will determine how much money, if any, should be requested. Clothing allowances for each foster child referred by DHS is provided in three forms: 1) an initial clothing allowance (if the child enters your home with little or no appropriate clothing), 2) semi-annual clothing payments, which are distributed in October and April and 3) an ongoing clothing allowance which is part of the daily board and rate paid to foster parents. Receipts must be submitted to the caseworker. All clothing acquired for the foster child belongs to the foster child, and that clothing or any unused clothing money, must go with the child when they are removed. You will be asked to complete the Clothing Inventory Checklist prior to the child leaving your home.

HOUSEHOLD RESPONSIBILITIES

Foster parents shall require a foster child to perform only those household tasks and responsibilities that are within the child's ability, are reasonable for a child of that age, and are similar to those expected of other members of the

household of similar age and ability.

RECREATION

Foster parents shall provide for a variety of indoor and outdoor recreational activities and shall encourage a child to participate in neighborhood, community, school, and recreational activities that are appropriate for the child's age and ability.

FOOD AND NUTRITION

Foster parents shall provide for the nutritional needs of each child in the foster home. A child shall be provided with meals which are served at regular intervals and which conform to any dietary restrictions. Food that is provided shall be nutritious, well balanced, and available in sufficient quantity. Only a licensed physician shall prescribe special diets.

A foster child shall be permitted to eat with the other members of the foster family and shall be served the same meals as other members of the foster family unless a special diet has been prescribed or the food conflicts with a child's stage of development, medical condition, or the birth family's religious beliefs.

Refrigeration shall be used for perishable foods. Food shall be prepared and stored in a safe manner. Only pasteurized milk products shall be served to foster children.

TRANSPORTATION

It is the responsibility of the foster parent to transport foster children for the following:

- Routine medical and dental examinations and treatments
- Any required follow-up medical care
- Visits at the agency with the birth family
- Counseling and/or therapy sessions
- School or pre-school attendance, if not provide by the school
- Recreational, religious and social activities

Cost for regular and routine transportation of foster children is included in the daily board and care rate; foster parents do not receive any additional reimbursement for these costs. The exception is transportation to and from visits with birth parents.

CAR SEAT LAWS (http://www.michigan.gov/msp/0,4643,7-123-72297_64773_22774-346441--,00.html)

It is the responsibility of the foster parent to ensure that children are in the proper car seats according to the State of Michigan Car Seat Laws. Below are the laws broken down:

- All children must be in a car seat until they are 8 years old or 4'9" tall, whichever one comes first.
- Children must ride in the back seat until age 4
- Newborns- 1 year old : Rear-Facing Only car seats
- Two years old or when they reach the upper weight or height limit (which is usually around 40 pounds): Rear-Facing Convertible car seats
- Usually age 5 (or when children reach top height and weight): Forward-Facing Five-Point Harness
- Booster Seats: when a child is big enough to sit with the seat belt crossing their hips and collar bone and mature enough to remain in position

MILEAGE REIMBURSEMENT

Mileage Reimbursement is available upon request for transporting children to parent/child visitations.

- Mileage will be reimbursed for round-trip travel from the foster parent's home to the location of the parent/child visitation at the agency or other community location, within 60 miles.
- Any mileage reimbursement request over 60 miles must be **pre-approved** by the Federal Compliance Division, within the Department of Health and Human Services.

- Mileage will be reimbursed at the current state standard rate, as published in The Department of Technology, Management & Budget Vehicle and Travel Services Schedule of Travel Rates.
- The rate schedule can be accessed at: www.michigan.gov/documents/dmb/Travel_Rates_Jan2013_405569.pdf
- Mileage reimbursement is paid per mile and may only be claimed once per trip, regardless of the number of children transported.
- The route or routes taken to and from the destination must be the shortest and most cost effective.

Mileage reimbursement requests should be submitted monthly by the foster parent. The foster parent must include the following information and supporting documentation:

- A memo including the child(ren)'s name(s), date(s) of birth, dates of travel, number of miles traveled and amount to be reimbursed.
- A MapQuest print-out showing distance to the approved destination.
- A copy of the authorized pre-approved travel over 60 miles, if applicable.

Mileage reimbursement should be submitted no later than the 2nd business day of each month. For example, if you wish to turn in October mileage reimbursement, turn in the documents no later than November 2nd. Please submit mileage reimbursement request and documentation directly to your caseworker.

FSCA will distribute mileage payments to foster parents after the agency receives them from DHHS.

The transportation of all children must be conducted as required by law. Current Michigan law states that:

- Children under eight years of age or less than 4'9" must be secured in an approved child safety seat at all times.
- It is recommended that all children that weigh less than 20 pounds be secured in a child safety seat that faces the rear of the car in the back seat.
- Children between four and sixteen are required to wear a safety belt at all times, regardless of whether the child is in the front or back seat. (It is recommended that children younger than twelve always ride in the backseat).
- Children over 16 and adults are required to wear a safety belt while in the front seat, but it is recommended that they wear a safety belt in the back seat.

OUT OF STATE TRAVEL

If the foster parent is planning to travel out of state and intends to include the foster child, the written consent of the birth parents must be obtained by the caseworker. If the parent of the temporary ward cannot be reached, the permission to travel can be obtained by the court. Permanent wards may obtain permission to travel out of state from the agency director. All requests for out of state travel require at least two week notice.

SUBSTITUTE CARE POLICY/RESPITE

A foster child may only be left with a caregiver who is at least 18 years of age, and capable of handling children with special needs and behaviors. They must be willing to follow all of FSCA's policies and procedures. The caregiver must be provided with phone numbers for the foster parents and FSCA agency staff. The foster parent is required to provide FSCA the name, date of birth, address, phone number and a copy of driver's license of any substitute caregiver annually. Prior to leaving a foster child in their care, an ICHAT background check and a DHHS Central Registry Check must be run by the agency on all substitute caregivers unless they are licensed by the State of Michigan to provide childcare. The foster parent is required to get agency approval for substitute care if it is for more than 24 hours. If the foster child is going to spend more than five nights per month out of the foster home, the county DHHS must be notified by FSCA.

On a case-by-case basis, FSCA is willing to consider a teenage child living in the foster home as a substitute caregiver for short periods of time. The foster parent must get agency approval in writing prior to allowing a youth under 18 to provide substitute care. Upon request by the foster parent, FSCA's licensing department will assess the youth's ability to provide care to a specific foster child.

Prior to your foster child going to spend the night at a friend's house, we need the full name and birth date of the adult

caregivers in that home.

If you feel that your foster child is mature enough to stay home alone for short periods of time, you may allow them to do so as long as you discuss a safety plan and emergency procedures with them beforehand.

We encourage our foster families to make arrangements for short-term respite care with other foster families. FSCA is willing to help you make arrangements with other foster families, but financial arrangements must be made between the foster parents.

SERVICE PLANS/TREATMENT PLANS

The agency shall complete written treatment plans for each child as follows:

- Within 30 calendar days after initial placement
- Within 90 calendar days after the initial service plan and updated treatment plans at least once every 90 calendar days after that.
- The agency will review the plans with the foster parents. Information contained in the plan shall be kept confidential by the foster parents.
- The agency will develop service plans with the child, the child's parents, the agency, and other service providers.
- The agency shall involve the foster parents in the development of the child's treatment plans to enable the foster parents to understand the plan for the child and the foster parent's role in assisting the agency in carrying out the plan. Copies of treatment plans for the children in their care can be provided to foster parents.

INTERNET & MEDIA & CELL PHONES

FSCA does not allow pictures of foster children to be put on websites, blogs, or social networking sites. The agency needs to know if a foster parent has a family website or blog where they share information about a foster child in their home. When referencing a foster child on a blog or website we ask that you use only their first initial, and be very careful not to use any information that might identify the child. Please seek guidance from your child's caseworker or your licensing worker before posting pictures or information about a foster child on the Internet.

FSCA recommends that you follow social networking website policy and not allow youth under the age of fourteen to have accounts on social networking sites. Youth who do have email, social networking accounts, or instant messaging accounts should be closely monitored. (See index for information on Internet safety).

FSCA recommend that foster youth under the age of sixteen not have their own cell phones. We recommend that for youth who do have cell phones, that foster parents closely monitor whom they are calling and receiving calls from.

MEDICAL AND MENTAL HEALTH CARE

MEDICAL AND DENTAL CARE

A physical examination by a licensed physician must be completed on every foster child within 30 days of placement. This must be documented on the "Well Child Exam" form. If documentation of immunizations for a foster child is unavailable, immunizations must begin within 30 days of placement and then as recommended by their physician. Well Child Exams must be done at the following intervals:

For children under 3 years old, the periodicity schedule for EPSDT/well child exams is as follows:

- Newborn -1 week of age
- 4 weeks of age
- 2 months of age
- 4 months of age
- 6 months of age
- 9 months of age
- 12 months of age
- 15 months of age
- 18 months of age

- 24 months of age
- 30 months of age

Children age 3 and older require the EPSDT/Well Child Exam annually.

Your caseworker will give you a form to keep track of medical and dental visits, so please have the doctor or dentist fill these out and return them to your caseworker on the agreed upon date. These forms can be accessed on the web at: http://www.michigan.gov/dhs/0,4562,7-124-5455_7199_54039---,00.html

Dental examinations are required for each foster child who is one years of age or older within the first 90 days of placement and within 30 days of their third birthday as well as every six months after they turn one year old. Each foster child shall have a dental examination annually, or as often as medically necessary. Please keep a copy for your foster child(ren)'s record folder that you maintain in the home.

When a foster child enters care, foster parents shall be presented with the necessary documents required to provide routine and emergency medical/dental care for the child. This includes a Medicaid card and an emergency medical authorization card signed by a representative of the agency. Medicaid covers most medical needs. If a specific need is not covered, the foster parents shall consult with the caseworker regarding possible reimbursement. In a rare instance, a foster child may not be eligible for Medicaid, and an alternative plan for payment of a foster child's medical needs will be made with the caseworker. A birth parent, or the court must approve elective and non-emergency surgical treatment; the child's caseworker will assist in securing this approval. If the foster child is a permanent ward of the state, consent for surgical treatment must be obtained by the MCI superintendent. All non-emergency medical or dental care should be discussed with the caseworker prior to treatment.

A foster child may receive medical/dental care by his or her own physician/dentist, the foster family's physician/dentist, or a different physician/dentist. It should be noted, however, that not all physicians and dentists accept Medicaid. The foster parent may work with the caseworker in securing a physician and dentist who accepts Medicaid.

Within ten working days after each examination, reports of initial and subsequent medical and dental examinations shall be given to FSCA on forms furnished by the agency.

EMERGENCY MEDICAL AND DENTAL CARE

Foster parents may authorize emergency medical, surgical or dental treatment for their foster children. **IF YOUR FOSTER CHILD IS ILL OR INJURED AND YOU ARE UNSURE IF THEY NEED MEDICAL TREATMENT, CONTACT YOUR CASEWORKER OR THE AGENCY ON CALL PERSON IF IT IS AFTER HOURS.**

Elective surgery, including body piercing or tattooing and other cosmetic surgery, CANNOT be performed without the consent of the birth parent or the legal guardian.

MEDICATIONS

Some children enter foster care with medications prescribed by a previous physician. Some children are prescribed medications after they enter foster care. Either way, it is essential that medications are managed by a physician and given exactly as prescribed.

Concerns you may have as a foster parent need to be addressed with the prescribing physician and caseworker. All medication should be secured in a locked cupboard or box. You may not begin, stop or alter the dosage of any prescribed medication without written documentation from the prescribing physician.

FOSTER PARENTS CANNOT AUTHORIZE THE USE OF PSYCHOTROPIC MEDICATIONS THIS MUST BE DONE THROUGH THE AGENCY.

MENTAL HEALTH CARE

Every child entering the foster care system must have a developmental/mental health assessment within 30 days of entering care. A primary care physician, during the initial well child exam, will complete a developmental screening on

children 0-3 years of age. An assessment with a mental health professional will be done with children over the age of 3. Your caseworker will schedule the appointment and notify you of the date and time. If counseling is recommended, the foster parent is required to provide transportation to the appointments and cooperate with the therapist.

BIRTH CONTROL

Recent statutes have legalized the purchase and use of birth control and contraceptive devices by minors with no parent or guardian approval required. This means that neither FSCA nor foster parents can legally approve or disapprove of the purchase and use of such materials by a foster youth. FSCA and the foster parents must make every effort to work with a foster youth, in conjunction with the child's birth parents, if appropriate, to pursue all available information regarding this issue to guide the foster youth in making the appropriate decision. A foster youth's decision whether or not to use birth control or contraceptives will be influenced by many factors, including the involvement of the foster parents, however the final decision rests with the individual youth.

Foster parents who disagree with the use of birth control or contraceptives by a foster youth must either agree to abide by this policy or not accept the foster youth into the home.

FOSTER PARENT RESPONSIBILITIES AND REPORTING REQUIREMENTS

ACCIDENT OR INJURY

In the event of an accident or injury requiring medical attention, the foster parent shall **FIRST** secure medical assistance by calling 911. If the child can be moved, the child needs to be transported to either the emergency room or to their physician's office. If a foster child needs to be hospitalized, the foster parent shall **FIRST** admit the child to the hospital; **SECOND**, the caseworker or the supervisor must be notified within 24 hours. (At the time of placement, the foster parent is given written authorization to secure and consent to emergency medical and dental care for the child.)

REPORTING SUSPECTED CHILD ABUSE AND NEGLECT

Report Abuse Now! 855-444-3911

Foster/adoptive parents who suspect abuse or neglect of any child must make a report immediately to Child Protective Services as mandated by State Law. If the suspected abuse or neglect occurred in the foster/adoptive home, or to the foster/adoptive child placed in the home, the foster/adoptive parents shall report the incident to the licensing worker immediately. If your worker isn't available, you must speak to their supervisor or the Chief Executive Officer. The worker is required to report any suspected abuse or neglect to the Department of Human Services. The Child Protection Law provides for protection of your identity if you wish.

RUNAWAY OR AWOL (absent without leave)

If a foster/adoptive child runs away from your home, or is absent from your home and their whereabouts are unknown, within one hour, the foster/adoptive parent shall **FIRST**: call the police and file a missing persons report, **SECOND**, contact caseworker or supervisor.

DEATH OF A CHILD

If a child dies while in your care, the foster/adoptive parent shall **FIRST** call EMS, **SECOND**, immediately contact the caseworker, or supervisor. The caseworker or supervisor will immediately contact the Chief Executive Officer who will ensure appropriate notifications.

FIRE, TORNADO, NATURAL DISASTER

Follow your families' safety plan and contact the caseworker or supervisor after the immediate danger has passed, but no later than 24 hours after the event.

EVACUATION

Family Service & Children's Aid shall approve the written plan for a foster/adoptive home that provides care for a person who requires assistance to evaluate the home during an emergency.

A foster/adoptive home shall have two exits from each floor level. A foster/adoptive parent shall ensure that the exits are remote from each other and that one of the exits provides a direct, safe means of unobstructed travel to the outside at street or ground level.

The foster/adoptive parents shall make all emergency and evaluation procedures known to all members of the household caring for the foster/adoptive child and to the foster/adoptive child, if age-appropriate. Five drills should be practiced at least every 3 months, and shall be practiced immediately after placement of each foster/adoptive child and logged on your evacuation drill forms.

Your first responsibility in an emergency is to take whatever steps are necessary to care for and protect the foster/adoptive child. At the time of placement you will be given the authorization card and also the child's Medicaid number or card that you should keep on you at all times.

After attending to the child's health and safety, it is important that you contact your caseworker or their supervisor as soon as possible. Each of the emergencies listed above requires specific actions and time frames that the agency must take. We want you, the child, and the agency to be protected from any possible consequences, which may result if the agency is not notified in a timely manner. The agency needs to report certain events to the licensing authority as required by the licensing rules. In addition, the agency wants to assist in protecting you, in the event, of allegations of liability if something happens to the child and you did not report the emergency.

REPORTING CHANGES WITHIN THE FOSTER HOME

Foster parents shall report any significant changes in the foster home, including any of the following, to the licensing worker by the next working day after the time the foster parents became aware of the change:

- A change of employment status of the foster parent
- Serious injury, illness or death of a foster parent or member of the household.
- Changes in household composition (household members moving in or out).
- Visitors (adult, child, or former foster children) who will be staying overnight in the home for longer than two weeks.
- Separation or divorce of the foster parents.
- Marriage of a foster parent.
- Arrests or criminal convictions of a foster parent or other members of the household.
- Parole or probation of a foster parent or other member of the household.
- Admission to or release from a correctional treatment, or therapy of a foster parent or other member of the household for substance abuse, relationship problems or mental health problems.
- Substantiated child abuse or neglect by a foster parent or other member of the household.
- Any revocation or modifications of a driver's license.
- Any major changes or renovations to the structure of the foster home.

LICENSE APPLICATION FILING

A foster parent must notify the agency within five working days if they apply for an adult foster care license, a family child care home certificate or registration, or a group child care home license. The agency will evaluate whether an addendum to foster home license is necessary.

CHANGE OF RESIDENCE

A foster parent must notify the agency and submit a new foster care license application four weeks in advance of a change of residence. An inspection of the new residence by the licensing worker must take place before the license is approved.

RECORDS TO BE KEPT BY THE FOSTER PARENTS

Foster parents shall maintain a record for each foster child in their home. The record shall be stored and maintained in a manner to prevent unauthorized access. In almost all cases, this should be in a locked file cabinet.

The record shall contain the following:

- A copy of the most recent foster home license.
- A signed copy of the Foster Parent/Agency Agreement
- Foster home record and any other licensing records/documents

For each foster child currently in the home:

- The child's name and date of birth and reason for placement
- For a child placed by a parent or guardian: the name, address, and phone number of the parent or guardian and reason for placement.
- The Medicaid or other health insurance card
- The Medical/Dental/Educational Authorization card
- Written consent authorizing the foster parent to obtain routine, non-surgical medical care and to authorize emergency medical and surgical treatment.
- The name and phone number of the caseworker and supervisor, and after hours' number
- Medical and dental records that include the child's medical and dental history prior to placement, including copies of annual examination reports.
- The name, addresses, and phone number of the child's physician and dentist.
- Immunization record
- Any known history of abuse or neglect of the child, known physical, emotional, psychological, and behavioral problems of the child.
- The child's behavior management and discipline plan.
- Placement checklist given to foster parents at the time of child's placement.
- Copies of correspondence and other reports involving the child.
- A copy of the child's Clothing Inventory Checklist made when the child was placed.
- Copies of clothing receipts.
- Copies of school reports.
- Notebook or log that documents the child's progress, behaviors, concerns, etc.
- The date of termination of placement and the reason for termination of placement.

Upon closure of the foster home license, all records provided by FSCA should be returned to the agency.

CONFIDENTIALITY AND THE RIGHT TO PRIVACY

Information obtained and records maintained by a foster parent regarding a foster child or a foster child's birth family shall be kept confidential and shall be released only with the approval of the agency and only to persons specifically authorized by the agency and the Department of Health and Human Services. Special precautions should be taken when discussing a foster child's case with authorized persons in public areas such as waiting rooms, public offices, hallways, etc. This policy seeks to ensure the safety, privacy, and dignity of a foster child and his or her birth family. This applies to the use of a foster child's picture in publicity campaigns. A child's photo or likeness may not be used for the sake of publicity unless such publicity will result in some positive benefit to the child. Consent of a foster child's birth parents shall be obtained prior to using the child in any form of publicity. It is permissible to seek the advice and consent of Juvenile Court in matters of confidentiality in cases of the Court's jurisdiction. It should be noted that the Court may subpoena agency records, which may include confidential information, and the agency must release the records to the Court.

GRIEVANCE PROCEDURE

If you have a problem or concern, please talk to your foster care worker or licensing worker first. If you are unable to come to a resolution, please contact the Chief Program Officer. If you would like to file an official grievance because you believe the agency has violated your rights under MCL 722.958a, you must put your grievance in writing and send it to the Chief Executive Officer. Please mail to Family Service & Children's Aid, Attn: Chief Executive Officer, 330 W. Michigan Ave. Jackson, MI 49201. The agency has 30 days to respond with a written statement of how foster parent's

grievance will be addressed. If the supervising agency does not provide a written response within 30 days after a grievance is filed, the foster parent may file a complaint with the Michigan Division of Child Welfare Licensing. This entity's contact information can be found at www.michigan.gov/dhs

SPECIAL EVALUATION

Policy

Family Service & Children's Aid and all foster parents shall comply with all State laws, rules and regulations that relate to allegations of rule non-compliance by licensed foster parents.

Comment

Family Service & Children's Aid is required by Division of Child Welfare Licensing (DCWL) to conduct a special evaluation anytime there is the allegation that a licensing rule has been violated. Family Service & Children's Aid is required to report to DCWL, within five working days, that a report of alleged non-compliance involving one of our licensed foster homes has been received. The foster parents will be notified that a special evaluation has been opened in writing.

If FSCA or the Department of Human Services receives a complaint about a foster parent or a foster home regarding the care of a foster child, or a rule violation, an agency licensing worker **must follow up with a special investigation regardless of the nature or the source of the complaint.** FSCA is licensed by the State of Michigan to provide foster care services and under that contract we have agreed to follow all of DCWL rules. If FSCA does not investigate every incident that could be a licensing violation, we could lose our contract and license with the State of Michigan.

In most cases, the licensing worker will contact the foster parents and inform them of the complaint and set up an appointment for a home visit to investigate the complaint. If the complaint involves allegations of abuse or neglect, Child Protective Services (CPS) will also conduct an investigation. There is now in every DHHS office a special investigator that handles all complaints of potential neglect and abuse in licensed foster homes and in the homes of relative caregivers. A Protective Services referral source has the right to remain anonymous. We cannot take the risk that abuse or neglect of a child or potential threat to a child's well-being will go unreported or undiscovered because the person who knows about it is afraid to report it. We would rather investigate allegations that have no basis than to risk one child being harmed or endangered because the circumstances or concerns were not reported.

Allegations do not always mean that we will remove the foster child from your home. Sometimes to protect the child, the foster parent and the agency, we will remove the child from your home pending the outcome of the special evaluation. In many instances, we will leave the child with you. If it is necessary to remove the child, then we will tell you why and what will happen to the child.

There are three possible outcomes of a licensing investigation:

1. The complaint is unsubstantiated resulting in no change in the license.
2. The complaint is substantiated but there is no threat to the safety of the foster child, and a corrective action plan is put into place. It is possible that in serious or repeated violations, the licensing worker will recommend that the home be placed on a provisional license and there will be an increase in supervision.
3. The complaint is substantiated and there is a threat to the safety of a foster child, and the agency will recommend that DCWL revoke the foster care license.

The foster parents will receive a copy of the special investigation report within 10 calendar days of completion. If the foster parent disagrees with the outcome, he or she may file an appeal and challenge the decision. In such instances, the licensing worker will inform the foster parents of the proper procedure.

Family Service & Children's Aid may recommend to DCWL that the terms of a foster home or group home license be reduced or revoked based upon documented evidence of a serious licensing rule violation. Any time that the agency recommends an adverse action, the foster parents may request an administrative hearing. The Bureau of Regulatory Services shall notify the foster parents in writing of the agency's recommendations. To request a hearing you must

contact:

Michigan Division of Child Welfare Licensing
Bureau of Administrative Hearing
P O Box 30041
Lansing MI 48909

There is no way we can prevent allegations from being made or keep you from having the anxiety, distress, anger, frustration and other feelings that accompany a special evaluation. We do want to assure you that we care about your feelings and that you will have support and cooperation as we work together in these situations. We encourage you to discuss with your licensing worker any questions you have now or in the future.

FOSTER PARENT/AGENCY AGREEMENT

DHHS requires that Family Service & Children's Aid (FSCA) have a signed agreement with each borrowed foster family, which spells out the responsibility of both the foster parents and the FSCA Foster Care Program. Two copies need to be signed each time a placement is made in a borrowed home license through another agency. The agreement is as follows:

In accepting a foster care placement from FSCA, we acknowledge our responsibility to carry out its direction for the care of the child or children placed with us. We agree to maintain the standards for foster family home described in the Licensing Rules for Foster Family Homes and Foster Family Group Homes for Children, which we have read carefully. We further agree to the following provisions:

As foster parents, we agree:

To respect the confidentiality of information concerning each foster child or the child's birth family's physical, mental, and social background and to share this information only with appropriate persons specifically authorized by FSCA. In addition, foster parents will not respond to media inquiries without the prior authorization.

To recognize the special needs, fears and concerns of each foster child and to treat each child with sensitivity and respect.

We will comply with the licensing rules and regulations that are listed in the State of Michigan's Licensing Rules for Foster Family Homes and Foster Family Group Homes for Children.

To immediately notify FSCA of changes in our household composition such as: plan to move into a new residence, plan to divorce or marry, and anytime any person moves in or out of the home.

To immediately notify FSCA of any unusual incidents, unauthorized visits or contacts by a former foster child or child's birth parents.

To immediately notify FSCA of any plans for out of state travel, and obtain the necessary legal permission to transport a foster child out of state.

To immediately notify FSCA of any serious illness, hospitalization, or accident of a foster child or a member of the foster home family.

To keep specific financial records, school records, immunization records, and all necessary receipts as requested by the agency and to provide copies to the assigned caseworker.

To have a plan acceptable to and proved by FSCA for the provision of care and supervision of each child in placement by a competent adult, at least eighteen years of age whenever foster parents are absent from the home.

To admit representatives of FSCA and DHHS monitors into the home whenever deemed necessary to cooperate with FSCA monitoring program for the maintenance of foster home quality.

To accept and support FSCA's final responsibility to remove a foster child when, in the opinion of FSCA, such removal is indicated.

To notify FSCA at least two (2) weeks in advance of any conditions which require termination of care to a particular child, unless an emergency situation arises within the family or home so that physical care for the child can no longer be provided.

We will participate in Family Team Meetings (FTM) regarding the foster child in our home.

We will help prepare a foster child to leave our home in a constructive and supportive manner.

We will cooperate with FSCA in the plan of care for each child, and to share all information about the child that might assist with that planning.

We will participate in the required amount of foster parent training.

As long as we are licensed by FSCA we will not take a foster child in our home from any other agency or referral source without the permission of the agency.

To provide shelter, food, care, supervision, and necessary items such as furniture, laundry facilities, bedding, and toilet articles to each foster child.

To assure that each foster child attends school, that we will attend parent/teacher conferences, and that we will monitor each child's academic growth.

To provide transportation for the child to and from visits with his or her birth family, to see his or her caseworker, therapy appointments, medical and dental appointments, and to other activities or services that will help in the child's psycho/social development.

We understand a child in placement may damage or create more wear and tear on furniture and household items and that it is our responsibility to replace or repair such items. It is understood that claims will be made against our insurance company when necessary (i.e. stolen items, major damage).

We will maintain adequate insurance protection for our dwelling and family.

We will inform the licensing worker of any weapons in our home and agree to keep them secured and inaccessible to each child.

To immediately report any known or suspected criminal activity, delinquent activity, or substance abuse by the foster child or any other family member residing in the foster home.

We will not use any form of physical punishment and to adhere to FSCA child management policy.

We will hold FSCA free of any liability occasioned by the acts or omissions of the foster parent(s) in connection with the care and supervision of the foster child.

To work with the foster child's birth family in a supportive and cooperative manner and to support and cooperate with planned visits or placements with the child's birth parents, adoptive parents or with other persons important in the child's life. We agree to respect the birth family's wishes by not altering the child's appearance in any way without appropriate permission to do so (i.e. hair cutting, ear piercing, etc.)

To constructively teach our foster child those skills that will enable him or her to live independently such as hygiene, handling money, work skills, etc.

To directly communicate our feedback, concerns and feelings about the foster child, birth family and/or the case plan to the assigned caseworker or supervisor and to work toward constructive resolution of disagreements or disputes about the case plan when they arise.

Family Service & Children's Aid agrees:

That with the foster parents, birth parents, foster child, and the referring source will determine the best future plans for the child and will guide the attainment of these goals with everyone involved.

To work with the foster child's birth family in a supportive and cooperative manner allowing them to visit and assisting them in the reunification of their family.

To provide consultation, support and assistance to foster families while the child is in foster care and provide the foster parents with the phone number through which they can contact the caseworker, supervisor, or designated representative on a twenty-four hour basis.

To provide counseling and treatment services to the foster child, birth family and foster family as needed.

To pay the foster parents at the current agency rate, stated in writing to the foster parents, and to assure that such payments are made promptly and regularly as long as the agency has legal authority to make such payments.

To provide the foster parents with a written verbal explanation of: foster home licensing rules and regulations, medical consent authorizing routine medical and dental care, including emergency procedures.

To advocate for medical and dental services required for the child and to meet the special clothing needs of each child upon initial placement in the foster home. The authority for making necessary appointments and purchases shall be with the foster parents in agreement with the agency.

Obtain necessary written permission for surgery from the child's parent, guardian, or from the referring agency or probate court.

To share information with the foster parents about the child including: background, placement planning, visitation rights of the birth family, that will help the foster family to meet the child's needs and enable the foster family to determine if the child's placement in their home would be an appropriate match. Foster parents will not be required or expected to accept a child if, in their opinion, it would not be in the best interests of the child or the foster family.

To provide an explanation for removing a child from the foster home and to provide an opportunity for the foster parents to help prepare the child for this separation; and to provide as much notice to the foster parents as possible regarding the decision to remove a foster child.

That after receiving two weeks' notice from the foster parents of the need to remove a child from their home, FSCA shall remove the child within 48 hours after expiration of the notice or within a mutually agreed upon time.

Maintain the quality of the foster home program through an active and regular routine training of foster parents and evaluation of foster homes to assure compliance with licensing standards.

To explain fully to foster parents any changes in their license or reasons whereby a license is revoked or not renewed.

Involve the foster parents in the treatment plan of the foster child.

To encourage a straightforward relationship and open lines of communication with the foster parents so that both can grow professionally and learn from each other.

To work toward constructive resolution of disagreements or disputes about the foster child's case plan when they arise.

Encourage foster parent involvement in program development and recruitment efforts.

To coordinate and approve respite arrangements with other licensed foster homes when given at least two weeks prior notice.

Mileage Reimbursement is available upon request for transporting children to parent/child visitations.

Mileage will be reimbursed for round-trip travel from the foster parent's home to the location of the parent/child visitation at the agency or other community location, within 60 miles.

Any mileage reimbursement request over 60 miles must be **pre-approved** by the Federal Compliance Division, within the Department of Health and Human Services.

Mileage will be reimbursed at the current state standard rate, as published in The Department of Technology, Management & Budget Vehicle and Travel Services Schedule of Travel Rates.

The rate schedule can be accessed at: www.michigan.gov/documents/dmb/Travel_Rates_Jan2013_405569.pdf

Mileage reimbursement is paid per mile and may only be claimed once per trip, regardless of the number of children transported.

The route or routes taken to and from the destination must be the shortest and most cost effective.

Mileage reimbursement requests should be submitted monthly by the foster parent. The foster parent must include the following information and supporting documentation:

A memo including the child(ren)'s name(s), date(s) of birth, dates of travel, number of miles traveled and amount to be reimbursed.

A MapQuest print-out showing distance to the approved destination.

A copy of the authorized pre-approved travel over 60 miles, if applicable.

Mileage reimbursement should be submitted no later than the 2nd business day of each month. For example, if you wish to turn in October mileage reimbursement, turn in the documents no later than November 2nd. Please submit mileage reimbursement request and documentation directly to your caseworker.

I (We) have read the Foster Parent/Agency Agreement above and agree to follow the agency's rules, policies and procedures as stated above.

Parent Signature

Date

Parent Signature

Date

Licensing Worker

Date

CHILD MANAGEMENT POLICY AGREEMENT

Family Service & Children’s Aid places children who are wards of the State of Michigan in foster and adoptive homes, as well as voluntarily released infants. It is the agency’s responsibility to help parents with positive discipline strategies. Examples of positive discipline are rewarding good behavior, modeling positive behaviors, using loss of privileges, and fulfilling the basic developmental needs of children. Service plans for each child should include specific strategies for behavior management. Discipline must be age appropriate. Infants do not require discipline. Most children react negatively to the use of physical force. **Foster, kinship, and adoptive families certified by Family Service & Children’s Aid are required to comply with a no spanking or hitting discipline policy for all children in the household.**

CHILD ABUSE IS AGAINST THE LAW AND IS SUBJECT TO PROSECUTION

Family Service & Children’s Aid will not tolerate the use of the following methods:

- Any form of severe corporal punishment or physical force (including the use of a switch, belt, paddle, extension cord, shoe, or other object to strike a child).
- Restricting a child’s movements by binding or tying him/her.
- Applying of substance or causing a child to ingest a substance that would cause physical pain/discomfort or cause a child to be burn.
- Confining a child in an area such as a closet, locked room, box or similar cubicle.
- Withholding necessary food, rest or toilet use.
- Mental or emotional cruelty, such as humiliating, shaming or frightening a child.
- Threatening loss of love or removal from the home.
- Making statements about the child’s family, which damage the child’s self-worth and self-esteem.
- Withholding visits with birth family or threatening to do so.

I have read and understand the Child Management Policy of Family Service & Children’s Aid. I have had an opportunity to discuss the policy with my worker and ask questions. I also understand that the area of child management will be discussed throughout the foster care/adoption process and should problems arise, I should discuss them with my worker. It is my intent to comply with the Child Management Policy of Family Service & Children’s Aid.

Parent Signature

Date

Parent Signature

Date

FOSTER PARENT HANDBOOK RECEIPT ACKNOWLEDGEMENT

I/We, _____ affirm that I/we received a copy of the Family Service & Children’s Aid Foster Parent Handbook, and that I/we have read and understand the document and agree to comply with the content.

Foster Parent Signature

Date

Foster Parent Signature

Date

RESOURCES

Michigan Department of Human Services
Child Welfare League of America
Foster Club
National Foster Parent Association
Michigan Association for Foster, Adoptive,
and Kinship Parents
Dave Thomas Foundation

<http://www.michigan.gov/dhs/>

<http://www.cwla.org/>

<http://www.fosterclub.com/>

<http://www.nfpainc.org/>

<http://www.mafak.msu.edu/>

www.davethomasfoundation.org