

POLICY V-C: FAMILY SUPPORT FUND

~~0061/2022~~12

The ~~Division of Children and Family Services (DCFS)~~ ~~Division shall will~~ ensure that staff has prompt access to the Family Support Fund to support birth, ~~post~~-adoptive, and ~~resource~~~~foster~~ families. The purpose of the fund ~~shall be is~~:

- A. To prevent children from entering or remaining in Out-of-Home Placement due to the parents' financial inability to meet the children's basic needs; ~~and~~.
- B. To pay for Out-of-Home Placement incidental items that exceed twenty-five dollars (\$25.00) and that are both outside of the contracting process and ~~are~~ not covered by board payments. Examples include school field trips, camping dues, dance supplies, musical instruments, registration fees, and specialized school supplies such as (e.g., graphing calculators required by the school; ~~however~~However, the following standard school supplies ~~shall will~~ be covered by personal needs monies within the board payment); sport fees or equipment, social club fees, summer programs, specialized art supplies, and school pictures;.
- 1) Providers will be required to provide documentation of the need for the expense. For example, a school letter requiring material purchase, or a camp registration form.

PROCEDURE V-C1: Cash Assistance

~~01/2020~~10

The Family Service Worker will:

- A. ~~Complete the CFS-496: Assessment for Income Assistance to make a determination of the basic unmet needs and appropriateness of using the fund to address the need(s).~~
- B. ~~Route the CFS-496: Assessment for Income Assistance to the DCFS County Supervisor for review and approval.~~

The DCFS County Supervisor will:

- A. ~~Monitor the county's allocation to ensure the county's funds are sufficient to meet client needs.~~
- B. ~~Review and approve/deny requests.~~
- C. ~~Maintain a log of approved requests, CFS-332: Income Assistance Request Log;.~~
- D. ~~Determine the payment mechanism through the DHS-1914: DHS Requisition. Payment will only be made to service providers.~~
- E. ~~Ensure completion of process to develop the purchase order;.~~
- F. ~~Monitor activities to ensure payment to service providers and management of county funds.~~

PROCEDURE V-C2: Foster Care Incidentals

~~01/2010~~

~~The Family Service Worker will:~~

- ~~A. Assess and determine the needs of the child receiving Out-of-Home Placement Services and the appropriateness of using the fund to meet the assessed need.~~
 - ~~B. Request the use of the fund from the DCFS County Supervisor/Designee.~~
 - ~~C. Complete any additional paper work required by the method of payment chosen by the DCFS County Supervisor.~~
- ~~Provide a receipt to the DCFS County Supervisor/Designee within two business days, following the dating of the check.~~
- ~~— Attach the receipt to the CFS-333: Client Information Sheet.~~
- ~~1) If the amount of the check exceeds the amount of the receipt, the balance must be returned to the DCFS County Supervisor/Designee immediately.~~

~~The DCFS County Supervisor/Designee will:~~

- ~~A. Monitor the county's allocation to ensure the county's funds are sufficient to meet client needs.~~
- ~~B. Approve or deny the request.~~
- ~~C. For approved requests, the Supervisor will access the Family Support Fund in one of the following ways:~~
 - ~~— Trust Accounts, if available and ample for purchase.~~
 - ~~a) Fill out the CFS-334: Foster Care Authorization for Billing for amount of purchase and submit to finance.~~
 - ~~— Process Purchase Order using the DHS-1914: DHS Requisition.~~
 - ~~a) Follow guidelines in the Purchase Order manual.~~

PROCEDURE VI-A5: Out-of-Home Placement Support

09/2011062/2022

The Family Service Worker (FSW) will:

- ~~A.~~ When a child is first placed in foster care, If an initial clothing order ~~may be issued if needed is needed, .~~ The FSW ~~will assess discuss~~ with the ~~foster resource~~ parent to determine which clothing items are needed and issue the authorized amount of clothing allowance using the DHS-1914 or P-card process. ~~The FSW will a~~
 - 1) Accompany the resourcefoster parent to the store to approve the purchase. ~~;~~
- ~~B.~~ Complete all actions identified in Policy III-A: General Services Case Opening and Re-Evaluation. ~~;~~
- ~~A.C.~~ Complete the IV-E and Medicaid application as prescribed in Procedure III-A2. ~~;~~
- ~~B.D.~~ Complete all ~~of the~~ medical exam requirements for the child, including the Comprehensive Health Assessment. ~~;~~ (See Procedure VI-D1: Comprehensive Health Assessment and Health Plan for Children Receiving Out-Of-Home Placement Services). ~~;~~
- ~~C.E.~~ Complete all case opening functions as outlined in Policy IV-A: Services Case Plan and IV-B: Case ~~Staffings~~ Staffing; and.
- ~~D.F.~~ Visit the child as required in Policy VII-I: Supervision of Children in Out-Of-Home Placement Division Contact with Children in Out-of-Home Placements.

POLICY VI-J: TRUST ACCOUNTS FOR CHILDREN IN FOSTER CARE

061208/202208

The Department of Human Services (DHS), Division of Children and Family Services (DCFS), maintains Trust Accounts for children in foster care who receive Supplemental Security Insurance (SSI), Social Security Administration (SSA) Title II Benefits, Child Support, Veterans Benefits (VA), Railroad Benefits (RR), or any type of income worker's compensation. These benefits will automatically be used to pay for the child's foster care expenses, which include the monthly board payments and contract payments. DHS will apply to become the payee for ~~all~~ benefits collected, as appropriate.

DHS must monitor accounting for all children in foster care to protect against duplicated funding or other errors. Monetary payment to resource parents through DCFS board payment may be adjusted based on the amount of benefits a resource parent receives directly for a foster child. For details, review Policy VII-M: Financial Support to Resource Parents.

DCFS must ensure that potential changes in payee are ~~assessed~~made when a child receiving benefits initially enters foster care. The IV-E/Medicaid Eligibility Unit will screen all DCFS clients for potential SSI and SSA eligibility, based on information reported on the SSI Screening Questionnaire completed by DCFS field staff, and make applications for those who may meet SSA criteria. Ultimately, the authorizing agency of the benefits is the decision-making entity regarding payees for SSA and SSI benefits.

The child's trust fund account must not exceed resource limits, to maintain eligibility for Medicaid and title IV-E. DCFS will coordinate the monitoring of Trust Fund accounts with the Office of Finance and Administration – General Operations Section, IV-E/Medicaid Eligibility Unit, and other pertinent agencies to ensure the timely and efficient management of these accounts. For details regarding special resource limits, see Procedure VI J6: Monitoring Trust Accounts for Accuracy and Compliance with State and Federal Regulations. Resource limits are:

- A. Two-thousand dollars (\$2,000) for Non-IV-E Foster Care Medicaid (category ninety-one (91)).
- B. Two-thousand dollars (\$2,000) for Foster Care EC Medicaid (category ninety-six (96)), DDS Waiver Medicaid, Foster Care Spend Down Medicaid (category ninety-seven (97)), and Supplemental Security Income (SSI category forty-five (45)), Long Term Care Medicaid.
- C. Ten thousand (\$10,000) for title IV-E.

Authorized uses of different funds vary according to their sources. However, any expenditure from a child's ~~(in foster care)'s~~ trust account (in foster care) must be for the direct care ~~and/or~~ needs of the child in receipt of the income. Funds cannot be used for siblings, parents, or other individuals in the initial removal home. Authorized uses are as follows:

- A. Income in a Regular Account has no restrictions, but spending must be appropriately prioritized according to the child's needs and disability.
- B. SSI Income in a Dedicated Account may be used for the following with approval from the Social Security Administration:
 - 1) ~~M~~Medical treatment;
 - 2) ~~E~~education;
 - 1)3) ~~J~~or job skills training; or
 - 2)4) ~~I~~f they pertain to an impairment;—
 - a) ~~P~~personal needs assistance;
 - b) ~~H~~ousing modifications;
 - c) ~~S~~special equipment;
 - d) ~~T~~herapy or rehabilitation; or
 - e) ~~O~~ther items ~~/or~~ services if approved by the SSA.

When the DCFS Eligibility Unit places a hold for funds on a trust account for a purchase for the youth, those funds will not be held for more than sixty (60) days. After sixty (60) days, the held funds will be released for other account uses unless an extension is requested and approved.

PROCEDURE VI J1: Opening a Trust Account

0112/20220

When the child enters foster care, and is already receiving income, the Family Service Worker (FSW) will:

List the income source, amount, and frequency on the child's CHRIS Income screen in the Division's information system.

A. Update the child's Relationship screen in the Division's information system, if the income source is Child Support, so that an electronic referral is made to the Office of Child Support Enforcement.

B. Have the birth/legal parent(s) or guardian execute a CFS 491: Consent for Use of Funds and Resources and explain that without consent authorization, the child may accumulate excess funds which would make him ineligible for Medicaid. If permission is not given, obtain permission from the court to use conserved funds.

C. Forward a CFS 376: Authorization for Billing and Trust Account Action and a memo containing the following information to the IV-E Eligibility Unit if monies are being sent by the Family Service Worker to be deposited into a Trust Account:

- 1) ~~C~~hild's name, Social Security number, date of birth, race, and gender
- 2) ~~T~~ype of benefit
- 3) ~~C~~ounty

- ~~4) Date of request and begin date of income~~
- ~~5) Award amount~~
- ~~6) Back pay (optional)~~
- ~~7) CHRIS Case & Identification Number~~
- ~~8) Signature and telephone number of person submitting request~~

The IV-E Eligibility Unit will:

- ~~A. After thirty (30) days of the date a child enters foster care, submit a change of payee request to the appropriate agency(s) for once a child receiving cash benefits who has been is court ordered into foster care.~~
- ~~B. Prepare appropriate forms and deliver monies received directly by the IV-E Eligibility Unit, to the DHS Accounts Receivable section for establishment of or deposit into a foster care trust account.~~

~~PROCEDURE VI-J2: Closing a Trust Account~~

~~012/2022~~

~~To close a Trust Account when a child returns home, is emancipated, or adopted, the Family Service Worker (FSW) will:~~

~~Exit the child from foster care in the Division's information system. CHRIS and complete the Trust Form A including the following information:~~

- ~~A. —~~
- ~~B. Child's Name, SSN, CHRIS case and identification number.~~
- ~~C. Name, telephone and signature of person submitting the request.~~
- ~~D. Ensure the Name and address of the child's custodian/legal guardian, and the relationship to the child are correct in the Division's information system.~~
- ~~E. Notation to return funds to the following once all outstanding bills are paid:~~
 - ~~1) Child if emancipated.~~
 - ~~2) Parent/Legal Guardian if a child is not emancipated or is under 18.~~
- ~~— Immediately request all outstanding bills, from providers that will be paid from a foster care trust account from providers, and forward with appropriate documentation as soon as possible:~~
 - ~~— To the IV-E Eligibility Unit with appropriate documentation as soon as possible for non-P card purchases; or,~~
 - ~~1) To the Central Office Financial Support Unit for P card purchases.~~

The IV-E Eligibility Unit will:

- ~~A. Complete forms to close out the account and send the closeout packet to the Office of Finance and Administration.~~

- ~~B. Notify the Social Security Administration that the child has exited foster care so that SSA may determine the appropriate payee for the child's ongoing benefits.~~

~~PROCEDURE VI J3: Change of Payee Requests~~

~~012/20202~~

~~The FSW will:~~

- ~~— When a Family Service Worker becomes aware that a child entering care is already receiving benefits from SSA, SSI, VA, RR Benefits, Child Support or other income, the Worker will notify the DCFS Eligibility Unit when the FSW becomes aware that a child entering care is already receiving benefits from SSA, SSI, VA, RR Benefits, Child Support, or other income.~~
- ~~— For child support, refer the child's parent(s) to the Office of Child Support Enforcement using the Relationship screen in the agency information system.~~
- ~~A. Maintain a record of expenses for the child.~~

~~The DCFS Eligibility Unit will:~~

- ~~A. Notify the appropriate office that the child is in the custody of DHS/DCFS is the new payee:
** (see below)~~
 - ~~1) For Social Security benefits: — Submit an SSA 11-BK: Request request to be Payee payee form to the Little Rock Social Security Office, unless the child is placed in a provisional relative or fictive kin resource home.~~
 - ~~2) For VA benefits: — Telephone or fax the VA office with the primary recipient's benefit number and advise them that DHS/DCFS requests to become is the new payee.~~
 - ~~3) For RR benefits: — Contact the Benefits Department of the specific, individual railroad company to advise them that DHS/DCFS requests to become is the new payee.~~
 - ~~— For Child Support: — The Office of Chief Counsel will submit a copy of the court order placing the child in foster care to the Office of Child Support Enforcement (OCSE).~~
 - ~~i. — The Family Service Worker will refer the child's parent(s) to the Office of Child Support Enforcement using the Relationship screen in CHRIS.
Submit a change of payee request to the appropriate agency(s), designating DHS/DCFS as the new payee.~~
 - ~~ii. — Designate the payee as follows:
DHS Fiscal Administration for Foster Care
PO Box 8181, Slot W405
Little Rock, AR 72203-8181~~
- ~~File a copy of the completed "Change of Payee" request to the IV-E/Medicaid Eligibility Unit in the child's eligibility record.~~
- ~~iii. —~~

~~B. If a contract facility (rather than DHS) is designated the payee for a child's income, that facility must submit a monthly report CFS-377: Facility Trust Account Reporting to the DCFS Foster Care Unit to include the following information:~~

~~C. Child's name and Social Security number~~

~~D. Beginning of the month balance~~

~~E. Deposits and expenses~~

~~F. End of the month balance~~

~~— Under current procedure, the only facilities authorized to become representative payee for Arkansas children in foster care are Arkansas Human Development Centers, Easter Seals, Arkansas Pediatric Facility, and Millcreek. Ultimately, the Social Security Administration is the decision making entity regarding payees for SSA and SSI benefits.~~

PROCEDURE VI-J4: Requests for Trust Account Funds

012/2022

~~A. To request trust account funds tThe Family Service Worker Division staff making the purchase for the child will for all purchases:~~

~~— Verify funds availability in the client assets screen in the Division information system.~~

~~— Complete the appropriate sections of CFS-334: Foster Care Services – Authorization for Billing, indicating the amount and purpose for the funds being requested.~~

~~— Request approval from County Supervisor or designee and Area Director or designee.~~

~~— When the approved CFS-334: Foster Care Services – Authorization for Billing is received from the Financial Coordinator (see below for County Supervisor, Area Director, Financial Coordinator, and Eligibility Analyst roles), complete purchase:~~

~~— Within forty eight (48) hours of receiving approval if purchase will be made with a P-Card;~~

~~1) Within five (5) days of receiving approval if purchase will not be made with a P-card.~~

~~— Upon completion of purchase:~~

~~— For P Card purchase:~~

~~— Within three (3) business days of purchase:~~

~~— Complete and sign separate P Card Transaction Log for each transaction;~~

~~— Sign receipt and write in case number, Trust ID, and client date of birth on the receipt;~~

~~— Submit P Card Transaction Log, original receipts, CFS-334: Foster Care Services – Authorization for Billing, and two (2) legible copies to the Financial Coordinator.~~

~~— If the original receipt is lost, or a provider issues a carbon copy as the client's original receipt, an agency generated CFS-380: Trust Account Invoice may be utilized on a case-by-case basis.~~

- Place copies of receipts and CFS-334 in the child's hard file.
- Complete CFS-335: Confirmation of Receipt of Goods for Child in Foster Care and submit to the Central Office Financial Support Unit.
- For Non P Card purchase:
 - Within five (5) business days of purchase:
 - Sign receipt and enter case number, Trust ID, and client date of birth on the receipt;
 - Submit original receipts, CFS-334: Foster Care Services — Authorization for Billing, and two (2) legible copies to Financial Coordinator; and,
 - Place copies of receipts and CFS-334 in the child's hard file.
 - Complete CFS-335: Confirmation of Receipt of Goods for Child in Foster Care and submit to the Central Office Eligibility Unit.

The County Supervisor or designee will:

- Review completed CFS: 334: Foster Care Services — Authorization for Billing;
- If approved, send to Area Director or designee.
- If denied, return to Division staff who would have completed the purchase with reason for denial or requested changes.

The Area Director or designee will:

- Review completed CFS: 334: Foster Care Services — Authorization for Billing;
- If approved, send to CFS-334 and send justification to the Financial Coordinator;
- If denied, return to County Supervisor or designee with reason for denial or requested changes and include Area Financial Coordinator on the email.

The Area Financial Coordinator will:

- Forward the CFS-334: Foster Care Services — Authorization for Billing and justification to the Eligibility Analyst;
- Upon completion of purchase with P-Card:
 - Review P Card Transaction Log, receipts, CFS-334: Foster Care Services — Authorization for Billing, and copies of documents from Division staff who made the purchase.
 - Verify information on the receipt;
 - Verify purchases were made as approved on the CFS-334; and,
 - FedEx all material referenced above to the applicable Central Office Financial Support Unit Budget Specialist.
- Upon completion of purchase for non-P-Card Purchases:
 - Review receipts, CFS-334: Foster Care Services — Authorization for Billing, and copies of documents from Division staff who made the purchase.
 - Verify information on the receipt;
 - Verify purchases were made as approved on the CFS-334; and,
 - Send all materials referenced above to the Eligibility Analyst.

The Eligibility Analyst will:

- Assess the hold request.
 - If the hold request is denied, notify the Financial Coordinator of the denial; or,
 - If the hold request is approved, assign Trust Account hold number (as appropriate) based on CFS-334: Foster Care Services — Authorization for Billing approvals; and
 - Email the approved CFS-334: Foster Care Services — Authorization for Billing to the Division staff who will complete the purchase.
- Upon completion of purchase for non P-Card purchase:
 - Review receipts, CFS-334: Foster Care Services — Authorization for Billing, and copies of documents from Division staff who made the purchase;
 - Verify information on the receipt;
 - Verify purchases were made as approved on the CFS-334;
 - Verify if the vendor is already entered into the applicable system and, if not, request W-9 from the Financial Coordinator; and,
 - Send all materials referenced above to the Eligibility Unit Supervisor or designee for review.

The Central Office Financial Support Unit will (for P-Card purchases):

- Receive email with approval and hold number from the Eligibility Specialist;
- Place documentation in pending file for Division P-Card shopper;
- Notify Department of Finance and Administration to request an increase in single purchase limit, if needed;
- Notify appropriate staff, if a transaction amount exceeds allowed amount;
- Serve as liaison among Financial Coordinator, DFS, and Accounts Payable; and,
- Prepare documents for Office of Systems and Technology (OST) to deduct purchases from Trust Account.

The Eligibility Unit Supervisor or designee will (for non P-Card purchases):

- Review all material sent by Eligibility Analyst as outlined above;
- Sign the CFS-334: Foster Care Services — Authorization for Billing for Central Office; and,
- Deliver material to Accounts Payable.

Accounts Payable will (for non P-Card purchases):

- Review all material sent by the Eligibility Unit; and,
- Send check to vendor for goods or services.
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~~PROCEDURE VI-J5: Reporting Information Changes to the DCFS Eligibility Unit~~

~~012/2022~~

~~Status changes that affect a child in foster care's trust account will be coordinated between the DCFS Eligibility Unit and the DHS Office of Finance and Administration General Operations Section.~~

~~Status changes that affect a child in foster care's trust account must be submitted electronically or in writing and signed by the appropriate DCFS staff on CFS 376: Authorization for Billing and Trust Account Action.~~

~~The Family Service Worker FSW will report appropriate information to the DCFS Eligibility Unit within 5 days of any of the following occurrences, which may affect the child's monthly benefit amount and/or SSI income payments update and keep current all placement information in the Division's information system to ensure accuracy of auto-generated reporting to the Social Security Administration:~~

- ~~A. Placement changes to or from a detention, medical, or psychiatric treatment facility, or or long-term care facility, Human Development Center, Mill Creek or run-away status.~~
- ~~B. When the child is placed in a contract or long-term care facility the FSW must ensure that the child receives his/her personal need funds.~~
- ~~C. To reinstate benefits, the FSW must make notification of return to DHS custody from the above placements.~~
- ~~The child exits in foster care is adopted, reaches the age of maturity or is deceased.~~
- ~~D. Errors are found on the Trust Account Report or on the assets screen in the Division's information system.~~
- ~~E. Errors are found on the Trust Report or on the Assets screen in CHRIS.~~

~~PROCEDURE VI-J6: Monitoring Trust Accounts for Accuracy and Compliance with State and Federal Regulations~~

~~012/2022~~

~~The County Supervisors or designee will:~~

- ~~A. Supervise the trust account-related work carried out by the Family Service Workers.~~
- ~~B. Review and sign each approved CFS-334: Foster Care Services – Authorization for Billing.~~
- ~~C. Monitor trust account balances to ensure they do not exceed resource limits. Resource limits are:~~

- ~~A. Two thousand dollars (\$21,000) for Non-IV-E Foster Care Medicaid (category ninety-one (91));~~
- ~~B. Two thousand dollars (\$2,000) for Foster Care EC Medicaid (category ninety-six (96)), DDS Waiver Medicaid, Foster Care Spend-Down Medicaid (category ninety-seven (97)), and Supplemental Security Income (SSI category forty-five (45)), Long Term Care Medicaid.~~
- ~~C. Ten thousand (\$10,000) for title IV-E;~~
- ~~D. Carry out any trust account-related responsibilities delegated by their the Area Directors.~~

The Area Director or designees will:

- ~~A. Monitor Trust Reports for their DCFS service area, ensuring:
 - ~~1) Compliance with state and federal resource limits;~~
 - ~~2) Accuracy of basic information (county placement, duplicate accounts, etc.);~~
 - ~~3) Necessary actions by Family Service Workers FSWs; and~~
 - ~~4) Reimbursement of board payments.~~~~
- ~~B. Monitor CFS-334: Foster Care Services — Authorization for Billings for duplicate, repeat, or unusual purchases prior to submission to the Office of Finance and Administration—General Operations Section.~~
- ~~C. Monitor reports of trust funds being held or conserved for action by county staff.
— Ensure Trust Reports (available electronically through the Division’s information system) on CHRIS_net are used to the full extent necessary.~~

~~PROCEDURE VI-J7: DHS Office of Finance and Administration—General Operations Section Trust Account Responsibilities~~

~~01/2010~~

~~The DHS Office of Finance and Administration—Managerial Accounting, Accounts Receivable will:
Complete trust account deposits within three working days of the deposit posting to the Bank Account.
Interest will be allocated no later than the fifth working day of each month for the previous month’s interest receipts.~~

~~The DHS Office of Finance and Administration—General Operations Section will:
Complete trust account withdrawals, holds, and closures within 10 business days of request by DCFS staff.
Forward each CFS-334: Foster Care Services — Authorization for Billing needing correction or additional information to the DCFS Eligibility Unit for corrective action. — Any CFS-334: Foster Care Services — Authorization for Billing that is rejected due to incomplete documentation, lack of funds, or any other reason will be handled in the following manner:
If the form is returned due to insufficient funds in the trust account, the DCFS Eligibility Unit will notify the appropriate Area Financial Coordinator and/or DCFS staff and forward the returned invoice to individual for further processing/instruction.~~

If the form is returned due to missing signatures, original/agency-generated CFS-380: Trust Account Invoice, insufficient documentation or the invoice was previously paid, the DCFS Eligibility Unit will forward the form(s) to the appropriate Area Financial Coordinator and/or DCFS staff for correction.

~~Forward requests to close trust accounts, appropriate documentation and a net refund check (minus outstanding obligations) to the Social Security Administration, Office of Child Support Enforcement, or appropriate party within 10 business days of receipt of request.~~

~~Submit Trust Account Closeout Requests to Office of Finance and Administration on the CFS-379: Closeout/Overpayment Notification. The DCFS Fiscal Officer or designees within that Division will initial each form.~~

PROCEDURE VI-J78: Information SystemCHRIS Team Trust Account Responsibilities

012/2022

~~The Information SystemCHRIS Team will:~~

- ~~A. Update CHRIS aAsset screen information with monthly daily Trust Report data.~~
- ~~B. Provide OFM with an electronic mechanism to review and approve prior to reimbursement for board payment from the trust account.~~
- ~~— Make corrections to CHRIS asset screens upon notification.~~
- ~~C. Provide support to resolve issues with processing of transactional data using the Trust Fund. Net application, as applicable.~~
- ~~D. Reimburse contract payments from trust accounts in the same manner currently used to reimburse board payments.~~

PROCEDURE VI-J89: DCFS Eligibility Unit Responsibilities

012/2022

~~The DCFS Eligibility Unit will:~~

- ~~A. Assist DCFS staff with trust account-related problems as needed.~~
- ~~B. Assist DCFS with training its staff on new or /revised trust account policies and procedures.~~
- ~~C. Monitor Trust Report balances for compliance with state and federal resource limits.~~
- ~~D. Monitor Trust Reports for accuracy (e.g., is the child still in care, duplicate accounts, incorrect Social Security Numbers, etc.).~~
- ~~E. Monitor trust account for funds being held or conserved pending action by the Family Service Worker.~~
- ~~F. Forward requests for corrections on aCHRIS Asset screens to information system CHRIS personnel for correction.~~
- ~~G. Notify the Social Security Administration (SSA) of changes in their recipient's status (excluding a request to close accounts). *In accordance with Section 2126.1 of the Social Security Handbook, status changes must be reported within ten (10) days after the month in which they occur.*~~
~~Changes may be reported by—~~
 - ~~1) Calling the Social Security AdministrationSSA, toll free, at 1-800-772-1213; or,~~
 - ~~2) Calling, writing, or visiting the Little Rock Social Security Office.~~

- ~~H. Review and forward each completed non-p card CFS-334: Foster Care Services Authorization for Billing to the Office of Finance and Administration General Operations Section within five (5) business days of receipt.~~
- ~~Review each non-p card CFS-334: Foster Care Services Authorization for Billing returned by OFM for needed additional information, /errors, /etc., and coordinate with DCFS staff for corrected re-submission of the form(s) to OFM for processing.~~
- ~~Review electronic request for trust account hold and if approved then assign a hold number.~~
- ~~Email the hold number to the Area Financial Coordinator and the Central Office Financial Support Unit.~~
- ~~I.~~
- ~~J. Review and forward requests to open, close, hold, /release, or update trust accounts or /funds to the Office of Finance and Administration General Operations Section electronically, if appropriate, within five (5) business days of receipt. Requests may also be submitted in writing with appropriate DCFS staff signature(s).~~
- ~~K. Process Overpayment Requests received from Social Security. Overpayment requests and requests to close trust accounts will be submitted to OFM on the CFS-379: Closeout/Overpayment Notification 334: Foster Care Services Authorization for Billing with appropriate documentation.~~
- ~~L.A.~~

VII. DEVELOPMENT OF RESOURCE HOMES & SUPPORT TO RESOURCE PARENTS

POLICY VII-A: ~~RESOURCE-FOSTER HOME~~ DEFINITIONS ~~PURPOSE AND ROLES~~

~~0618/202213~~

The development of quality resource homes is a process essential for ensuring the safety and well-being of children in care while concurrently supporting children's permanency goals. The Department of Human Services (DHS), Division of Children and Family Services (DCFS or the "Division") is licensed by the Child Welfare Agency Review Board as a child placement agency to approve foster and adoptive homes for DCFS. The Division utilizes the term "resource home" to refer to both types of these homes and "resource parent" or "resource family" to refer to an individual or family in those homes that provide a family-like setting on a twenty-four (24) hour basis for children in the custody of and placed there by DHS. For the time in which a child in DHS custody is placed in a resource home, that resource home must adhere to the reasonable and prudent parent standard (see Policy VII-G: Alternate Care) in the care of any child placed in the home by DHS, and be the primary residence of the individual or family that is owned, rented, sublet, or leased by the individual or family.

To receive full approval as a resource home, a resource home must meet all applicable Minimum Licensing Standards for Child Welfare Agencies (Placement) established by the Child Welfare Agency Review Board and DCFS policy regarding resource home approval and maintenance provided herein (i.e., Section VII of the DCFS Policy and Procedure Manual). Anything less than full approval as a resource home is insufficient for meeting title IV-E eligibility requirements. A resource home must meet all applicable Minimum Licensing Standards for Child Welfare Agencies (Placement) and DCFS policy pertaining to resource home approval and maintenance for the duration of the child's placement while the child is in DHS custody. With respect to resource homes on or near Indian reservations, approval rests with the tribal licensing or approval authority.

Regardless of the specific service type provided, the terms resource home and resource family are-is used because all resource families are designed to serve as a resource to children in the custody of DHS. In cases where reunification with the biological family is still the goal, resource families also serve as a resource to the child's biological family. The development of quality foster resource homes is a process essential for ensuring the safety and well-being of children in care while concurrently supporting children's permanency goals. The foster-resource family is part of a team-also comprised of DCFS, the child in foster care, the custodial/non-custodial parents and other appropriate community members. When-these team members cooperate and understand

their own and each other's roles, the quality of the experience for everyone is increased and the well-being of the child and his or her family is positively affected.

~~For the purpose of title IV-E eligibility, a foster home means the home of an individual or family licensed or approved as meeting the standards established by the Child Welfare Agency Review Board that provides 24-hour out-of-home care for children (with respect to foster homes on or near Indian reservations, approval would rest with the tribal licensing or approval authority). Anything less than full licensure or approval is insufficient for meeting title IV-E eligibility requirements.~~

~~In addition, the Child Welfare Agency Licensing Act defines a foster home as a private residence of one or more family members that receives from a child placement agency any minor child who is unattended by a parent or guardian in order to provide care, training, education, custody or supervision on a 24-hour basis, not to include adoptive homes. The home must meet foster home standards and the individual child's needs for the duration of the placement.~~

There are two (2) types of DCFS resourcefoster homes that provide foster care services: provisionalProvisional Foster relative or fictive kin resource Hhomes, (which may be opened on a provisional basis or as a fully approved resource home), and traditionalRegular Foster-resource hHomes.

Relative or fictive kin resource homes that are opened on a Pprovisional basis are identified, and recruited, and opened in an expedited manner by atthe Family Service Worker. The Division seeks out provisional relative and fictive kin resource homes ,who, in an effort to preserve family connections and reduce the amount of trauma a child experiences when entering foster care, by placing them with a safe and appropriate relative or fictive kin and expedite placement, may seek to place a child in foster care with a relative or fictive kin. -"Relative" means a person within the fifth degree of kinship to the child or to at least one of the children in a sibling group, including step-siblings and half-siblings, by virtue of blood or adoption (see POLICY VI-A) if one has been identified and is appropriate. "Fictive kin" means a person not related by blood or marriage, but who has a strong, positive, emotional tie to a child and has a positive role in the child's life, (or the life of a parent of the child, if the child is an infant), -if one has been identified and is appropriate.

The purpose of opening a provisional foster home is to enable DCFS to make an expedited placement for a child with a relative or fictive kin with whom a bond already exists. To open and place a child in DHS custody in a provisional relative or fictive kin resource home, Arkansas Child

Maltreatment Central Registry Check, Arkansas State Police Criminal Record Check, and a Traffic Violations Record Check results must be received for all applicable household members, and a visual inspection of the home must be completed (See Policy VII-C). Therefore, a provisional relative or fictive kin resource home may be opened and a child in DHS custody placed in that home, before the results of the FBI Background Check are received, before out-of-state child maltreatment checks are received, before the provisional resourcefoster parents have completed the pre-service training, and before a full home study is completfinished. ~~These are the only differences in initial approval requirements, including Minimum Licensing Standards, between provisional foster homes and regular foster homes in Arkansas.~~

Once opened as a provisional resource home, DCFS staff works with thosee relative or fictive kin resourcefoster parents ~~in that home~~ to bring them into full compliance with all Minimum Licensing Standards and DCFS policies in order to transition from provisional resource home status to a fully approved relative or fictive kin resource home within a six (6) month period. However, through the approved alternative compliance or policy waiver processes (see Appendix 8: Alternative Compliance and Policy Waiver Protocol), non-safety standards and policies may be waived for relative and fictive kin resource homes (and the home will still be considered to be in full compliance with any alternative compliance or policy waiver that is in place for that specific home).

Provisional resourcefoster homes that are not in full compliance at the end of six (6) months must be closed and the child(ren) removed, unless the relative has acquired custody.- However, DCFS staff will assure that every effort is made to help the provisional resource parents come into compliance with all requirements within six (6) months as long as the health and safety of the children placed there are ensured. DCFS staff will also, if applicable, en-sure that any necessary transition plans are developed in advance of this six (6) month mark in an effort to lessen trauma to the children.

During the period~~of time~~ that athe relative or fictive kin home is on provisional resource status,status,; a foster care board payment is not provided. However, provisional foster-resource parents may apply for and receive benefits for which the relative ~~and/~~ or fictive kin is entitled due to the placement of the child in the home (e.g., SNAP). A pProvisional resourcefoster homes may also receive child support or any federal benefits (e.g., SSA) paid on behalf of the child, as applicable.

If ~~at the~~ home ~~initially is~~ opened as a provisional resource home becomes a fully approved relative or fictive kin regular resource foster home, a foster care board payment will then be provided to help support the needs of the child placed in the home. However, if the home received any child support ~~and/or~~ any federal benefits paid ~~on~~ on behalf of the child while the home was on provisional status, those child support payments ~~and/or~~ federal benefits ~~may~~ must then be transferred to the Division to reimburse the state for foster care board payments and other expenses as appropriate.

Once opened as a fully approved resource foster home, the resource foster parents may then request to care for children in foster care who are not related to or are not fictive kin of the resource children in foster care with parent with the understanding that additional evaluation of the ~~if~~ home would be required to ensure that it would be an appropriate placement for children who are not related or not fictive kin to the resource foster parent ~~(s)~~. Additional training may also be requested before a resource home originally designated as a relative or fictive kin resource home begins taking children who are not related or not fictive kin.

~~DCFS is licensed to approve foster homes. Traditional resource homes are recruited to provide twenty-four (24) hour care for a child in foster care to whom they are neither related nor have other prior connections. Regular Foster Homes are approved foster homes that. However, once fully approved, traditional resource homes~~ may provide care for both related and non-related children in DHS custody who are placed there. In addition, a traditional Regular Foster resource hHome may also serve, if desired, as an informal respite home. An informal respite home is an approved DCFS resource foster home that can provide temporary care (no more than seven (7) continuous days at one (1) time) for children in out-of-home placements when the children's full-time resource foster family is unable to do so and a member of the resource foster family's support system cannot assist. ~~(See Policy~~ POLICY VII-G: Alternate ~~TERNATE Care~~ ARE).

~~A DCFS staff employee is are~~ only permitted to serve as an ~~be~~ agency-approved resource foster ~~home~~ parents for informal respite care purposes but may not ~~serve as an~~ provide informal respite ~~care home~~ for children/youth on his or her ~~their~~ own caseload. The DCFS Director or designee must give prior approval to any employee seeking to become an agency-approved informal respite home provider. Each DCFS employee's request to serve as an informal respite care home will be assessed on a case-by-case basis. DCFS staff requesting to become informal respite providers must meet the same licensing and space requirements as traditional resource homes. Staff from a different county or a contract provider must assess and approve the home. Employees ~~shall~~ will not use their employment status ~~as a means~~ to obtain information about the child's case, gain services, or receive preferential treatment.

However, in situations where Division staff are relatives of children placed in DHS custody, and it is in the best interest of the child to be placed with the relative, the DCFS Director may grant approval for the relative/employee to serve as a full-time resourcefoster home on a case-by-case basis.

For additional information, see ~~PUB-11: What Happens When Your Child and Family Are Involved with DCFS?~~, ~~PUB-2230: Standards of Approval for Foster Resource Parent and Adoptive Homes~~ and ~~PUB-30: Foster Parent Handbook~~.

~~POLICY VII-B: FOSTER-RESOURCE~~ HOME RECRUITMENT ~~&AND~~ RETENTION

~~061/202211~~

The Division ~~shall~~will recruit ~~a sufficient number of enough resourcefoster~~ families to ensure that all children are placed in the least-restrictive, most family-like setting that meets each child's individual needs. ~~Recruitment should result in an increased number of qualified, trained resourcefoster families in Arkansas. The Division shall~~will diligently recruit potential resourcefoster families that reflect the ethnic and racial diversity of children in care.

Targeted recruitment ~~wishall also~~ take place for resourcefoster parents who are willing and able to meet special needs of children needing placement. Targeted recruitment will begin with a diligent search and assessment of each youth's relatives and fictive kin as placement potentials, both at the initial removal from the family home and continuing throughout the dependency-neglect case.

Recruitment of new resourcefoster families is an ongoing activity for which all staff are responsible. However, ~~the Resource UnitWorkers~~ in each Area will ~~take~~ the lead role in the recruitment process. Recruitment efforts include, but are not limited to, participation from current resourcefoster parents, development of local and statewide media campaigns, and collaboration with community organizations.

~~Each Area Director will develop an annual recruitment plan for his or her area, to be initiated at the beginning of each fiscal year. The CFS 445: Foster Home Needs Assessment will be utilized in the development of the recruitment plan. The plan will outline ongoing recruitment efforts for the Area. The Foster Home Needs Assessment will also be utilized in the development of tThe Area Foster Resource Home Recruitment Plan and will be considered in the development of the Statewide Foster Resource Home Recruitment Plan.~~

As part of ~~foster-resource~~ home recruitment, each county ~~may~~will host information meetings to explain the steps to becoming a ~~resourcefoster or adoptive parent (if appropriate)~~ home as well as the responsibilities that ~~resourcefoster~~ parents have to children and their families who are involved with DCFS. The information meeting will also help attendees better determine if they want to apply to become ~~resourcefoster~~ parents. Prospective, ~~traditional resource foster~~ parents are strongly encouraged to attend an information meeting prior to beginning the application process ~~(i.e. the In-Home Consultation Visit)~~. Neighboring counties may hold joint information meetings to better accommodate schedules and maximize staff time.

Recruitment does not end when a ~~resourcefoster~~ home is opened. It must be sustained with retention efforts. DCFS will retain quality ~~resourcefoster~~ homes by ensuring good communication with and support to ~~resourcefoster~~ families.

PROCEDURE VII-B1: ~~Foster-Resource~~ Parent Recruitment

~~12/20061/20221~~

All staff should participate in recruitment efforts. While the following is not a comprehensive list, staff ~~will~~should:

~~A.~~ Actively seek out relatives and fictive kin as emergency placement options for every child entering foster care.

~~A-B.~~ Actively coordinate with professional organizations and minority groups to create public interest.

~~B-C.~~ Contact community organizations and media to inform them about DCFS needs and successes.

~~C-D.~~ Encourage ~~resourcefoster~~ parents to:

- 1) Make one-to-one contacts with other individuals who may be interested or have expressed interest in ~~fostering~~becoming a resource home.
- 2) Schedule speaking engagements with community groups in order to share information about fostering.

~~D-E.~~ Conduct Information Meetings.

The Area Director or designee will:

A. Conduct an annual assessment of current ~~resourcefoster~~ homes and identify the need for additional ~~resourcefoster~~ homes ~~by utilizing the CFS-445: Foster Home Needs Assessment.~~

~~B. Discuss the CFS-445: Foster Resource Home Needs Assessment, referrals, and inquiries with Resource Workers.~~

~~Submit the CFS-445: Foster Resource Home Needs Assessment to the Foster Care Unit by June 30th of each year.~~

The Foster Care Unit will:

~~Use the CFS 445: Foster Resource Home Needs Assessment from each area to inform the statewide foster resource home recruitment plan.~~

~~A. Share the statewide foster resource home recruitment plan with the field.~~

~~B.~~

PROCEDURE VII-B2: Retention of **Foster-Resource** Homes

2061/20221

All DCFS staff will:

- A. Ensure good communication among all team members, as well as mutual respect, understanding, and honesty.
- ~~B.~~ Keep **resourcefoster** parents informed of DCFS programs, services, and policies that relate to foster care.
- ~~B.~~
- C. Support **resourcefoster** homes as needed in order to best serve children and families.

Resource Workers will:

- A. Discuss and assist **resourcefoster** parents in understanding their rights and responsibilities as **resourcefoster** parents as well as the rights and responsibilities of the Division.
- B. Provide **resourcefoster** parents with the county on-call contact information sheet.
- C. Visit homes quarterly for monitoring to ensure compliance with licensing standards and **resourcefoster** home requirements, address any issues, and offer support to the **resourcefoster** family.
- D. Engage external stakeholders and share relevant information, thus supporting the practice model.
- E. Inform **resourcefoster** parents of the internal review of adverse action ~~ir right to a grievance~~ procedure, when differences arise with DCFS which have not been resolved to the **resource_foster** parents' satisfaction, as outlined in PUB-30: **Foster-Resource Parent Handbook Handbook**.
- F. Collaborate with adoption staff as appropriate when a child's permanency goal is changed to adoption and when a child is transitioning from a **resourcefoster** home to an adoptive home.

- Provide resource parents with information about the Division’s opt-in text application used for placement purposes and the resource family provider portal. Encourage use of both programs during quarterly visits to resource homes.

F.G.

PROCEDURE VII-B3: Inquiries

12/2001/20221

The procedure outlined herein (VII-B3) is in reference to traditional resource parent applicants only. Initial recruitment, inquiries, and background check processing for provisional relative or fictive kin resource parents are handled at the local county level.

The County Supervisor, Resource Worker, or other designee or designee will:

- A. Assign foster care only inquiries to the designated Resource Worker within 3 working days. (Notification of internet inquiries made by prospective foster parents will go directly to the designated supervisor, who will assign the inquiry to the designated Resource Worker). Refer anyone inquiring about becoming a resource parent to www.fosterarkansas.org.
- Assign inquiries regarding both Adoption and Foster Care to the designated Area Resource Worker within three working days, and ensure that the appropriate Adoption Supervisor will assign an Adoption Specialist as secondary. Provide a brief overview of the inquiry process to prospective resource parents and provide prospective resource parents with contact numbers to use for follow up with the application process if necessary.
 - Complete inquiry by going to www.fosterarkansas.org.
 - Select the Foster/Adopt Tab.
 - Select “Complete Inquiry Form.”

1) Schedule the In-Home Consultation and FBI Fingerprinting, as appropriate.
Relay adoption-only inquiries to the Adoption Supervisor within three working days.

The designated Centralized Resource Worker Inquiry Unit staff will:

- A. Enter information documenting all activities with the family beginning with a Applicant Status (inquiry) to the approval process in CHRIS the Division information system. This includes all appropriate Provider Screens — General Information Tabs, Household Members/Requirements Tabs, Contacts Screen, Preferences Tab, and Services Details Screen.
 - 1) Respond to all phone and internet inquiries within three (3) working business days of receiving the assignment from the County Supervisor (Inquiries made via the website

- ~~will automatically populate the appropriate CHRIS county inbox the next working day).~~inquiry site.
- ~~2) When an inquiry is made, give~~ Give ~~a brief explanation of the county foster care needs , correct any misinformation the caller may have, and explain the~~ resource ~~foster parent assessment process.~~
- ~~B. If moving forward with the process, p~~ Provide the family with an i ~~Resource~~ information ~~P~~ packet 1 ~~within three working days~~ one (1) business day ~~after initial contact is made. The information packet~~ Resource Packet 1 ~~will consist of:~~
- ~~1) A letter that:~~
- ~~a) Thanks~~ Thanks, ~~the family for their interest;~~
 - ~~b) Identifies a contact person; and,~~
 - ~~c) Indicates the date, time, and location of the next information meeting in their county or, if applicable, a neighboring county that is hosting prospective resource~~ foster parents from surrounding counties.
- ~~2) PUB-406: Care, Commit, Connect~~
- ~~3) PUB-409: What is DCFS?~~
- ~~4) PUB-20: Open Your Heart, Open Your Home to Foster Care (if applicable)~~
- ~~— Background check forms;~~ should not be mailed at this point in time.
 - ~~— CFS-401: Current Household Information Sheet;~~
 - ~~— CFS-415: Reference for Resource Family;~~
 - ~~— CFS-419: Resource Family Support System Information;~~
 - ~~— CFS-447: Worksheet for Social Security Benefits;~~
 - ~~— CFS-448: Family Financial Worksheet;~~
 - ~~— CFS-453: Employment Information Sheet;~~
 - ~~— CFS-455: Request/Consent for Department of Health Services;~~
 - ~~— Road to Fostering Infographic; and,~~
 - ~~— Inquiry to Adoption Flowchart.~~
- ~~— Upon receipt of completed forms, route all background check forms to applicable units. See Procedure VII C1: Background Check Processing for more information.~~
- ~~— If all checks clear, provide mail Resource Packet 2 to the family. Resource Packet 2 will include:~~
 - ~~— Cover letter;~~
 - ~~— CFS-363: Resource Parent Applicant Smoking Certification;~~
 - ~~— CFS-484: Landlord Notification of Potential Tenant Foster Care Services;~~
 - ~~— CFS-404: General Medical Report;~~
 - ~~— PUB-30: Resource Parent Handbook;~~
 - ~~— Instructions for Online Pre-Service Training;~~
 - ~~— Foster Care Court Process Infographic; and,~~

- ~~— Resource Home Visit Guide Infographic.~~
- ~~— If all checks are not clear, consult with Centralized Inquiry Unit Manager regarding next steps in terms of regarding whether:~~
 - ~~— Inquiry must be deleted, and provider number closed due to specific background check result information; or,~~
 - ~~— If Centralized Inquiry staff may gather additional information from the family to determine, in consultation with the applicable Resource Worker and Resource Worker Supervisor, if the family is interested in and eligible to pursue an alternative compliance or policy waiver request, as applicable. See Appendix 8: Alternative Compliance and Policy Waiver Protocol.~~
- ~~5) Copies of the brochures listed above can be obtained from the Foster Care and Adoption Units, ordered from the DHS print shop through the local financial coordinator, or printed directly from CHRIS Public.~~
- ~~C. Within 5 working days after sending the information packet, contact the family via phone (if the family has not already contacted the Resource Worker) to:~~
 - ~~1) Ensure that they received the information packet.~~
 - ~~2) Answer any additional questions they may have.~~
 - ~~3) Determine if they will be able to attend the next scheduled information meeting.~~
 - ~~a) If the family will be able to attend the next scheduled information meeting, no further action needs to be taken until that time.~~
 - ~~b) If the family will not be able to attend the next scheduled information meeting, mail PUB-22: Standards of Approval for Foster and Adoptive Homes and PUB-30: Foster Parent Handbook and the background check packet to them with instructions on how to complete and submit these completed forms. The background check packet includes:~~
 - ~~i. FBI fingerprint card~~
 - ~~ii. CFS 316: Request for Child Maltreatment Central Registry Check~~
 - ~~iii. APS 0001: Authorization for Adult Maltreatment Central Registry~~
 - ~~iv. CFS 341: Certification of Absence of Criminal Record~~
 - ~~v. CFS 342: State Police Criminal Record Check~~
 - ~~vi. CFS 419: Foster Family Support System Information~~
 - ~~vii. CFS 593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers~~
 - ~~viii. VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~
 - ~~ix. VSP-2: Authorization to Obtain Traffic Violation Record~~
 - ~~x. Arkansas State Vehicle Safety Program Manual~~
 - ~~c) See Procedure VII C1 for background check processing information.~~

- ~~— Attempt to contact the family to follow up if the completed forms have the Resource Worker not been received within ten (10) calendar business days of sending mailing them to the family.~~
- ~~— If the Centralized Inquiry Unit Worker is unable to contact the family after three (3) phone attempts (combination of phone and email):~~
 - ~~1) S, send an email another letter to the family informing them that the Centralized Resource Inquiry Unit Worker has attempted to contact them and will not be contacting them further, but also welcoming the family to call or email contact the Resource Worker Centralized Inquiry Unit if they are still interested in fostering becoming a resource home; and.~~
- ~~— Delete the inquiry in the Division's information system and close the provider number (Centralized Inquiry Staff may reopen the provider number if the family decides to resume the application process in the future).~~

PROCEDURE VII-B³⁴: Information Meetings

12/20061/20221

The Resource Unit staff~~Worker~~ or designee will:

- A. Address the following topics at the Information Meeting:
 - 1) Overview of foster care-;
 - 2) Demographics and characteristics of children in care-;
 - 3) Types of foster-resource homes needed in the county;
 - 4) Approval standards; and,
 - 5) Application and assessment process ~~(i.e., the application process formally begins with the In Home Consultation Visit).~~
- B. Ensure a current or former resource~~foster or adoptive~~ parent is present and available to answer questions.

~~Provide all participants with a copy of PUB-22: Standards of Approval for Foster and Adoptive Homes and PUB-30: Foster Parent Handbook.~~

~~Provide all participants with a Background Check Packet (MidSOUTH shall not provide the packet to prospective foster families), which includes:~~

~~FBI fingerprint card~~

~~CFS-316: Request for Child Maltreatment Central Registry Check~~

~~APS-0001: Authorization for Adult Maltreatment Central Registry~~

~~CFS-341: Certification of Absence of Criminal Record~~

~~CFS-342: State Police Criminal Record Check~~

~~CFS 419: Foster Family Support System Information~~

~~CFS 593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers~~

~~VSP 1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~

~~VSP 2: Authorization to Obtain Traffic Violation Record~~

~~Arkansas State Vehicle Safety Program Manual~~

~~Have a notary present to notarize the forms in the Background Check Packet if the family chooses to complete during the Information Meeting.~~

~~Provide participants with additional Background Check Packets for their FFSS and any other household members. Any household member who resides in the home for more than (3) cumulative months in a calendar year (e.g. an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for (6) weeks twice a year) must clear all background checks.~~

POLICY VII-C: ~~FOSTER-RESOURCE~~ HOME ASSESSMENT PROCESS

~~08/2013~~2061/2022

In order to ensure quality ~~resourcefoster~~ homes, DCFS will complete a thorough home assessment for each prospective ~~resourcefoster~~ family. The purpose of the assessment process is to educate prospective ~~resourcefoster~~ parents on the characteristics of children in out-of-home placement and evaluate their ability to meet those needs, as well as evaluate the applicants' compliance with the Minimum Licensing Standards for Child Welfare Agencies and DCFS policy requirements for ~~resourcefoster~~ homes. The home assessment is a mutual selection process. It involves several components including, but not limited to, background checks, an in-home consultation visit, pre-service training, a home study, and ongoing consultation with the prospective ~~resourcefoster~~ parents to ensure that all appropriate criteria related to both compliance and quality are met. ~~Prospective resourcefoster parents, with the exception of except for provisional foster parents, are highly encouraged to attend an Information Meeting before the In-Home Consultation Visit.~~

BASIC CRITERIA

Basic criteria for consideration in determining the appropriateness of ~~resourcefoster~~ homes include, but are not limited to the following.

Age

~~An applicant must be~~ at least twenty-one (21) years of age ~~and not older than 65 years of age.~~
A policy waiver may only be approved in rare circumstances for provisional homes.

Citizenship

A traditional resource parent applicant must be a United States citizen or a legal permanent resident. However, persons who are undocumented may be considered as a resource home applicant for their relatives or fictive kin.

Relationship Stability

- A. In a two (2)-parent home, both parents ~~shall~~will be joint applicants and both parents ~~shall~~will actively participate in the approval process. The couple ~~shall~~will demonstrate a stable relationship. In assessing relationship stability, considerations may include major life changes such as:
- Death or serious illness among family members.
 - Marriage, separation, divorce, or other significant changes in the couple's relationship.
 - Addition of household members (e.g., birth, adoption, aging relative moving in).

- Loss of or change in employment.

~~B. Marriages and divorces will be verified. Applicants must provide a copy of their marriage license to verify marriage and a copy of their most recent divorce decree to verify divorce.~~

~~C.B.~~ In a single parent home, the major life changes listed above ~~shall~~will also be considered when assessing the person's ability to be an effective resourcefoster parent.

A resourcefoster home may not house or admit any roomer or boarder. A roomer or boarder is:

- ~~A~~ a person to whom a household furnishes lodging, meals, or both, for a reasonable monthly payment; and,
- ~~N~~ot a household member.

A household member is a resident of the home who:

- ~~O~~wns or is legally responsible for paying rent on the home (household head); ~~or,~~
- ~~i~~s in a close personal relationship with a household head; or,
- ~~i~~s related to a household head or a to person in a close personal relationship with a household head.

Any household member who resides in the home for more than three (3) cumulative months in a calendar year must clear all the following background checks as applicable by age of the household member (see Background Check section below for more information): Arkansas Child Maltreatment Central Registry, Child Maltreatment Registry Check in any state in which the household member has lived within the preceding five (5) years, ~~Arkansas Adult Maltreatment Registry,~~ Arkansas State Police Criminal Record Check, and FBI Criminal Background Check.

General Physical and Mental Health

—Members of the household must not have a health condition or disability that would interfere with the family's ability to parent the child. Each member of the household ~~shall~~will have a physical examination by a physician within ~~six~~twelve (12) months prior to the approval of the home study on the prospective resourcefoster family, and annually thereafter, though biological and adopted children of provisional resource applicants are exempt from the physical exam requirement. ~~-Additional information may be requested based on the results of the physical examination report. The resource parent applicant must also provide the Division with the health history of each household member, in addition to the physical exam required for approval. This history will include physical and mental health services, treatment received, a list of currently prescribed medications, and any other medications or other substances currently taken.~~

Resource parents will not engage in the use of illegal substances, abuse alcohol by consuming in excessive amounts, or abuse legal prescription drugs or non-prescription drugs by consuming them in excessive amounts or using them other than as indicated or prescribed.

It is recommended that all children who are household members of a resource home be up to date on immunizations consistent with the recommendations of the American Academy of Pediatrics (AAP), the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (ACIP), and the American Academy of Family Physicians (AAFP). All family members under the age of eighteen (18) in the household shall have proof of current health immunizations, or an exemption (medical, religious, or philosophical) in accordance with the Arkansas Department of Health. Immunizations against COVID-19 are encouraged for all applicable household members in a resource home but are not required.

Diphtheria, tetanus, and acellular pertussis (DTaP)

Poliovirus;

Measles, mumps, and rubella (MMR); and,

Varicella.

If these immunizations are contrary to the child's health as documented by a licensed health care professional and the child has a medical exemption from the Arkansas Department of Health, then these immunizations are not required.

The minimum immunization requirements for a child age seven (7) through eighteen (18) include:

- Tetanus, diphtheria, and acellular pertussis (Tdap); and,
- Meningococcal ACYW (MCV4).

If these immunizations are contrary to the child's health as documented by a licensed health care professional and the child has a medical exemption from the Arkansas Department of Health, then these immunizations are not required.

In addition, all household members who will have contact with infants (children under twelve (12) months) are encouraged to have an up-to-date Tdap vaccination to protect against pertussis (whooping cough) consistent with the recommendations of the ACIP. Finally, all household members who will be caregivers of infants (children under twelve (12) months) and medically vulnerable children are encouraged to have an up-to-date annual influenza vaccine consistent with the recommendations of the ACIP. To determine if a child is considered medically vulnerable to influenza if placed in a resource home whose household members have not received an annual influenza vaccine, DCFS staff will consult with the child's PCP to make sure the child can safely be placed with that family.

Provisional and approved relative and fictive kin resource homes may have a waiver for these immunization requirements on a case by case basis.

Housing

DCFS adheres to Minimum Licensing Standards which include, but are not limited to (please refer to PUB 30: Resource Parent Handbook for a full list of standards):

- A. The resource home will be a house, mobile home, housing unit, or apartment occupied by an individual or a family and will be the primary residence of the individual or family. The location will be zoned for single family use and will have an individual address for emergency response purposes (i.e., 911).
- B. Resource parents will reside in the same single-family unit with foster children and will not have separate living quarters.
- C. The resource home, ground, and all structures on the property will be maintained in a clean, safe, and sanitary condition and in a reasonable state of repair within community standards.
- D. The resource home will not have signage or advertising related to a supporting recruitment agency, to include signage on vehicles used to transport foster children.

- E. The resource home interior and exterior will be free from dangerous objects and conditions, and from hazardous materials.
- F. Space must be adequate to promote health and safety. Each bedroom should have at least fifty (50) square feet of space per occupant. This includes infants sleeping in master bedrooms.
- G. The resource home will have a heating, ventilating, and air conditioning source, maintained in safe operating condition, that keeps the temperature a minimum of sixty-five (65) degrees and a maximum of eighty-five (85) degrees.
- A.H. The resource home will be free of obvious fire hazards such as defective heating equipment or improperly stored flammable materials.
- I. All firearms must be maintained in a secure, locked location, and ~~stored~~ stored separately from ammunition, which must also be locked.
- J. The resource home will have proper trash and recycling disposal.
- B.K. The resource home will be free of rodent and insect infestation.
- L. All water hazards and dangerous pets will~~will~~ be assessed. Safeguard measures will be implemented, as appropriate.
- C.M. The resource home will be responsible for their own meal planning.
- D.N. Children of opposite sexes will~~will~~ have their own separate bedrooms if either child is four (4) years old or older, except for a mother in foster care with her child(ren). Resource parents will not co-sleep or bed share with a foster child of any age, including infants.
- E.O. Water ~~must~~shall be provided by public water system or approved annually by the Department of Health.
- P. Prospective ~~resource~~foster parents who rent must obtain acknowledgement from their landlord that they plan to ~~foster~~ become a resource family on landlord's property if they are approved by DCFS to ~~foster~~ be a resource home.
- F. ~~Prospective resource parents will be responsible for making their own decisions regarding which children to accept into their home, however, they will recognize the priority to maintain sibling groups.~~
- Q.

Smoking Restrictions

—DCFS ~~shall~~will not place or permit a child in foster care in any ~~resource~~foster home if the ~~resource~~foster parent smokes or allows anyone else to smoke in the presence of any child in foster care, unless it is in the child's best interest to be placed in or remain in the ~~resource~~foster home. This includes the use of E-cigarettes and vaping. If the ~~resource~~foster parent indicates smoking will not occur in the presence of a child in foster care, then DCFS will designate the home

a “non-smoking” ~~resourcefoster~~ home. If a ~~resourcefoster~~ parent indicates that smoking will occur in the presence of a child in foster care, the ~~resourcefoster~~ home will be designated a “smoking” ~~resource_foster~~ home, and no child may be placed or remain in the ~~resourcefoster~~ home unless it is in the child’s best interest to be placed in or remain in the ~~resourcefoster~~ home. Second-hand smoke is detrimental to a child’s health and, as such, it is generally not in a child’s best interest to be placed in a ~~resourcefoster~~ home that permits smoking in the presence of a child in foster care. In addition, state law prohibits smoking in a vehicle if a child in the car is under the age of fourteen (14) and under DCFS policy this prohibition to smoking in a vehicle extends to all children in foster care regardless of age of the child in care.

~~Resources~~

The applicant must have sufficient resources to meet the financial, medical, physical, educational, emotional, and shelter needs of the child, without relying solely on state or federal financial assistance (e.g., SNAP, SSI, SSA, etc.) to meet those needs (although these forms of assistance may be used to supplement a family’s income). DCFS may make some exceptions for applicants depending on the totality of their financial and other circumstances.

~~RA~~ recent check stubs and the previous year’s income tax return ~~are~~is required to verify income and employment.

While the foster care board payment may be ~~a resource provided~~ for a child, ~~resourcefoster~~ parents ~~must~~should have sufficient ~~personal resources income~~ to care for a child even without a board payment. The ~~fosterfoster~~ care board payment ~~shall~~will not be considered a part of the ~~resourcefoster~~ family’s income.

BACKGROUND CHECKS

In addition to ensuring that homes meet the basic criteria, the Division ~~shall~~will only place children in approved ~~resourcefoster~~ homes where the ~~resourcefoster~~ parents and appropriate members of the household have been cleared through a series of background checks: the ~~Arkansas~~ Child Maltreatment Central Registry, ~~the Arkansas Adult Maltreatment Central Registry,~~ the Arkansas State Police Criminal Record Check, and an FBI Criminal Background Check (with the exception that placements may be made in ~~p~~Provisional ~~Foster resource h~~Homes before FBI results are received). Any household member who resides in the home for more than three (3) cumulative months in a calendar year (e.g., an adult biological child of the ~~resourcefoster~~ parents who is home for the summer and holiday breaks or a relative who visits for six (6) weeks twice a year) must clear all applicable background checks.

Child Maltreatment Central Registry— Foster

Resource parents and all other members of the household age fourteen (14) years and older, excluding children in foster care, must be cleared through the Arkansas Child Maltreatment Central Registry. The Arkansas Child Maltreatment Central Registry Check will be repeated every two (2) years on all appropriate household members. If applicable, a Child Maltreatment Central Registry Check ~~shall~~will also be conducted on each household member age fourteen (14) years or older in any state of residence in which they have lived for the past five (5) years, and in their state of employment, if different, for reports of child maltreatment.

~~*Adult Maltreatment Central Registry— Foster parents and all other members of the household age 18 and one-half years and older, excluding children in foster care, must be cleared through the Arkansas Adult Maltreatment Central Registry. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the Arkansas Adult Maltreatment Central Registry Check must be initiated to ensure results are received by the time that household member reaches 18 and one-half years of age. The Arkansas Adult Maltreatment Registry check will be repeated every two years on all appropriate household members.*~~

State Police Criminal Record Check— Foster

Resource parents and all other members of the household age eighteen and a half (18.5)~~and one half~~ years and older, excluding children in foster care, must be cleared through a State Police Criminal Record Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the State Police Criminal Record Check must be initiated to ensure results are received by the time that household member reaches eighteen and a half (18.5)~~and one-half~~ years of age. The State Police Criminal Record Check ~~shall~~will be repeated every ~~two-two (2)~~ years on all appropriate household members. If a provisional State Police Criminal Record Check enters pending status DCFS staff may work with local law enforcement to obtain local verification of criminal record for the individual to expedite placement of the child in the home of the relative or fictive kin. DCFS staff will ensure follow up with State Police Criminal Record Check within two (2) business days of check entering pending status.

FBI Criminal Background Check— Foster

~~-Resource~~ parents and all members of the ~~resource~~foster home who are eighteen and a half (18.5)~~and one-half~~ years of age and older, excluding children in foster care, must also clear an FBI fingerprint-based Criminal Background Check. As soon as possible, after a household

member, ~~(excluding children in foster care),~~ reaches his or her 18th birthday, the paperwork to request the FBI Criminal Record Check must be initiated to ensure results are received by the time that household member reaches eighteen and a half (18.5) and one-half years of age. The FBI Check does not need to be repeated. Placement in a provisional resource home may be made prior to receipt of FBI Criminal Background Check results, when in the best interest of the child. When placement in a provisional home occurs, DCFS will ensure that FBI Criminal Background Checks are submitted for processing within five (5) business days. Barriers to completion within five (5) business days should be assessed on a case-by-case basis and decisions should be made relevant to the best interests of the youth(s) placed in the provisional resource home.

Traffic Violations Record~~Vehicle Safety Program~~ Check

~~—DCFS will check the driving record~~Traffic Violations Record (violation points) from the Office of Driver Services for each prospective resourcefoster parent and other applicable members of the household. This record returns the number of traffic offenses and other violations incurred by the resource applicant, to include the number of points assessed by the Office of Driver Services for convictions of moving traffic violations as per the Arkansas State Vehicle Safety Program (ASVSP). The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points that a resourcefoster parent may be allowed. Vehicle Safety Program ChecksThe Traffic Violations Record Check will be repeated every two (2) years. To ensure child safety, DCFS will carefully assess what, if any, safety concerns exist for any applicant or current resource parent accumulating ten (10) or more points on their Traffic Violation Record.

A family member with no current valid Arkansas driver's license will be given twenty (20) days to apply and receive an Arkansas driver's license. If the resource family member does not wish to obtain an Arkansas license, a written explanation from the applicant is required and a driving~~traffic violations record check must be completed in the State of issuance for the currently held license. The applicant is responsible for obtaining and providing the traffic violations record check from the other State.~~

The requirement for a driver's license may be waived for provisional applicants if an acceptable plan to transport the children placed in their home to school, court dates, medical appointments, and similar engagements is approved.

PROCEDURE VII-C1: Background Check Processing

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With the exception of~~to provisional resource homes being completed by resource staff in the field, if the prospective resourcefoster family did not attend an Information Meeting, the~~

~~Resource Worker resource family must submit an application to become a resource home online at www.fosterarkansas.org. The Centralized Inquiry Unit will provide the family with a Background Check Resource Packet #1 by email, which includes:~~

- ~~A. FBI fingerprint card (if not using harvester);~~
- ~~B. CFS-316: Request for Child Maltreatment Central Registry Check Instructions (form electronically generated per the Central Registry Request instructions);~~
- ~~C. APS-0001: Authorization for Adult Maltreatment Central Registry~~
- ~~D. CFS-341: Certification of Absence of Criminal Record;~~
- ~~E. CFS-342: State Police Criminal Record Check or instructions for electronically generating the CFS-342;~~
- ~~F. CFS-419: Foster Resource Family Support System Information;~~
- ~~G. CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers;~~
- ~~H. VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business;~~
- ~~I. VSP-2: Authorization to Obtain Traffic Violation Record; and,~~
- ~~J. Arkansas State Vehicle Safety Program Manual.~~

~~The Resource Worker Centralized Inquiry Unit will:~~

- ~~A. Submit the signed CFS-593: DCFS Arkansas State Vehicle Safety Program, VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business, and VSP-2: Authorization to Obtain Traffic Violation Record to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each prospective resource foster parent, RFFSS member, and any applicable teenage drivers to the appropriate person in the DCFS Background Check Unit for processing.~~
 - ~~1) Ensure Copy of the front and back of the driver's license includes front and back of license.~~
 - ~~2) Document on the Provider Household Member Required Checks Information Screen.~~
 - ~~3) The county office must receive the results of the Arkansas State Vehicle Safety Program Traffic Violations Record check before the family can be approved for training.~~
- ~~B. Assist with Submit the completion, as needed, of the CFS-316: Request for Child Maltreatment Central Registry Check for each household member and RFFSS member age fourteen (14) years and older, excluding children in foster care to the Central Registry Unit. The CFS-316: Request for Child Maltreatment Central Registry Check must be notarized. The Child Maltreatment Central Registry Check shall will be repeated every two (2) years.~~
 - ~~1) If applicable, a Child Maltreatment Central Registry Check should also be conducted on each household member and RFFSS member age fourteen (14) years or older, in~~

- ~~any state of residence in which they have lived for the past five (5) years, and in their state of employment, if different, for reports of child maltreatment.~~
- ~~— Route each completed CFS-316: Request for Child Maltreatment Central Registry Check to the Central Registry Unit.~~
- ~~2) Document on the Provider Household Member Required Checks Information Screen.~~
- ~~3) Provide File a copy of the results to the county office for filing in the foster resource home record. The county office must receive the results of the Arkansas Child Maltreatment Central Registry Check before the family can be approved for training. Training waivers may be approved if child maltreatment check results from other states are still pending.~~
- ~~C. Submit the completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services for each household member age 18 and one half years and older, excluding children in foster care. The APS-0001: Authorization for Adult Maltreatment Central Registry must be notarized. The person must have no history of true abuse and/or neglect.~~
- ~~1) Route each completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services.~~
- ~~2) File a copy of the results in the foster home record. The county office must receive the results of the Adult Maltreatment Central Registry Check before the family can be approved for training.~~
- ~~D. Use CFS-341: Certification of Absence of Criminal Record to obtain written certification from the resourcefoster parents that any household member ages ten (10) through seventeen (17) (10-17) does not have a criminal record. Provide a copy of results to the county office for Ffileing a copy in the resourcefoster home record.~~
- ~~E. Submit the completed CFS-342: State Police Criminal Record Check for each household member and RFFSS member age eighteen and a half (18.5) and one half years and older, excluding children in foster care to the DCFS Criminal RecordsBackground Check Unit or assist the applicant with submission of the State Police Criminal Record Check via the online Information Network of Arkansas (INA) process, as applicable. The CFS-342: State Police Criminal Record Check must be notarized. The State Police Criminal Record Check must be completed prior to requesting the FBI Criminal Background Check. The State Police Criminal Record Check shallwill be repeated every two (2) years.~~
- ~~1) Route each completed CFS-342: State Police Criminal Record Check to the Criminal Records Unit.~~
- ~~2) Document on the Provider Household Member Required Checks Information Screen.~~

~~3) Provide File a copy of the results to the county office for filing in the resource foster home record. The county office must receive the results of the State Police Criminal Record Check before the family can be approved for training.~~

~~F. Facilitate the initial steps of the Process an FBI fingerprint-based Criminal Background Check for all resource foster parent applicants and all members of the prospective resource foster home who are eighteen and a half (18.5) and one-half years of age and older, excluding children in foster care. The fingerprint-based FBI Criminal Background Check must be submitted prior to the family attending training; however, the results are not required before the family can attend training.~~

~~— There are two (2) options for completing the FBI check:~~

~~G. Electronic Fingerprint Scanning~~

~~1) Foster Resource parent applicants do NOT need to fill out an FBI fingerprint card, as a request for electronic scanning will be done via CFS-342: State Police Criminal Record Check.~~

~~2) The Resource Inquiry Unit Worker will fForward the completed CFS-342: State Police Criminal Record Check to the Criminal Records Background Check Unit or ensure completion of the State Police Criminal Record Check via the online INA process, as applicable.~~

~~3) The Criminal Records Unit will use the CFS-342: State Police Criminal Record Check to get a transaction number from the State Police or a transaction number will be generated by the online INA process, as applicable.~~

~~— The Criminal Records Unit will forward the Upon receipt of the transaction number from the Criminal Background Check Unit, to the Centralized Resource Inquiry Unit Worker or the Centralized Inquiry Worker will receive the transaction number generated through the online INA process forward the transaction number to the applicant's resource worker who will ensure the applicant goes to an approved electronic harvester to have fingerprints scanned.~~

~~— In the event of an applicant's fingerprints being rejected, the Criminal Background Check Unit will receive the rejection letter rom the Arkansas State Police.~~

~~— The Criminal Background Check Unit will send the rejection letter to the Resource Worker or other requestor to provide to the applicant.~~

~~— The applicant must schedule a new fingerprint appointment using the online scheduling tool and take the rejection letter with them to the new appointment.~~

~~— The applicant's fingerprints will be run again using the initial transaction number.~~

- ~~4) If there are two fingerprint rejections using the same transaction number both times, the Arkansas State Police may then run a name search. This can only be done when there have been two rejections on the same transaction ID per federal requirements.~~
- ~~5) The Centralized Resource Inquiry Unit Worker will forward the transaction number to the applicants resource worker.~~
- ~~6) Applicants must go to an approved Electronic Harvester to have fingerprints scanned. Check with the Resource resource w/Worker for the closest location.~~
- ~~7) 5) Applicants must pay the electronic harvester fee. If applicants are approved and opened as a foster home, they may request reimbursement. A receipt for the harvester fees and a DHS 1914 must be submitted to the Resource Worker's local financial coordinator for reimbursement processing.~~
- ~~— The Centralized Resource Inquiry Unit Worker will dDocument the results on the Provider Household Member Required Checks Information Screen in the Division information management system and file provide a copy of the results to the county office for filing in the resourcefoster home record.~~
 - ~~— FBI results will be uploaded directly into the Division's designated system. The assigned Resource Worker or designee will receive an email from the Criminal Background Check Unit notifying the assigned Resource Worker or designee that the FBI result is available to be viewed.~~
 - ~~— Only those who have CJIS Clearance and have an absolute need to view FBI results will be given access to view background checks in the Division's designated system.~~

If there are any offenses listed on an applicant's criminal background check results, the Resource Worker will:

- ~~— Send a CFS 508 A to the applicant via certified, restricted mail and document the letter in Provider Contact Information Screen in the Division information management system.~~
- ~~— If the applicant chooses to challenge the accuracy and completeness of his or her criminal history record or obtain missing disposition information and contacts the assigned Resource Worker within thirty (30) days of receipt of the CFS 508-A to inform the Resource Worker that the family will challenge the results, keep the resource parent application and associated provider number open in the Division information system until the requested corrections are either approved or denied at which point further action will be taken, as appropriate.~~
- ~~— If there are changes or updates to an applicant's criminal history record and the decision is made to move forward with a request for an alternative compliance~~

request from the Child Welfare Agency Review Board, see Appendix 8: Alternative Compliance and Policy Waiver Protocol.

- If the Resource Worker does not receive notification that the family has elected to challenge the results of their criminal history report, then remove the Resource Parent application from the system and close the associated provider number.
- If the family chooses to review and request corrections to their state or FBI criminal history reports in the future, they may reapply to become a resource parent at any point once corrections are made. Resubmission of a Resource Parent application does not guarantee approval as a Resource parent.
- For information regarding denial of an applicant based on background checks, please see Policy VII-D: Denial of a Resource Home Applicant and related procedures.

IN-HOME CONSULTATION VISIT

The In-Home Consultation Visit allows resource staff to gather initial information on provisional applicants and additional information for traditional applicants that was not provided in the online application. The In-Home Consultation Visit will determine if the home meets approval requirements and, if not, what changes are needed to come into compliance. Resource home approval requirements include Minimum Licensing Standards for Child Welfare Agencies and DCFS policy requirements for resource homes.

PROCEDURE VII C2: In-Home Consultation Visit

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The Centralized Inquiry Unit Worker will:

Provide the background check results electronic file to the Resource Supervisor for traditional resource applicants.

Assign the traditional applicant family to the Resource Supervisor's inbox.

The Resource Supervisor will:

Conduct a thorough history check in the Division information management system.

Assign the family to a Resource Worker within one business day upon receipt.

The Resource Worker will:

Within five (5) working business days after clearances on all required background checks have been received, (FBI checks must have been submitted but not completed) being assigned the resource home, contact the prospective resource foster family to schedule an in-home consultation (IHC) visit and FBI fingerprinting with them. The in-home consultation visit for traditional resource applicants will should take place within two (2) weeks of the scheduling call.

However, IHC visit for prospective provisional relative or fictive kin resource families — will be conducted as soon as possible as needed for a particular case.

A..... D
uring the in-home consultation visit:

Observe family functioning and assess the family's capacity to meet the need of the children in foster care.

1)..... P
rovide all Information Meeting documents (aside from the Background Check Packet which should have already been completed) to the family if they have not yet attended an Information Meeting (see Procedure VII B4). Families are encouraged to attend an Information Meeting but are not required to do so.

Review and complete:

Tthe resource staff portion of the CFS-450: Prospective Provisional Resource Parent Information and Questionnaire for provisional applicants and send to the applicable MidSOUTH Training Academy by the next business day.

2).....T
~~he CFS-446: In-Home Consultation Visit Report for traditional applicants.. The completed CFS-446: In-Home Consultation Visit Report will serve as the first formal step in the application process.~~

3).....
4).....D
~~Discuss Minimum Licensing Standards and other DCFS policy requirements related to resource homes for foster homes as outlined in PUB-30: Resource Parent Handbook22 and answer any questions the family may have.~~

5).....I
~~Inform the prospective resourcefoster family that they will not be approved until they meet Minimum Licensing Standards, DCFS policy requirements, and any other qualifications deemed appropriate (with the exception of certain non-safety standards that may be waived for relative and fictive kin providers).~~

6).....D
~~Discuss training required prior to approval, including completion of CPR and Standard First Aid training and certification (for specific CPR and First Aid requirements, see PUB-30: Resource Parent Handbook).~~

7).....P
~~Provide Review the Arkansas State Vehicle Safety Program (ASVSP) with the family and have them complete the following forms, if they have not already done so:~~

~~CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers.~~

~~Teenage drivers in the home will be subjected to the ASVSP and must be licensed if they will be allowed to transport children in foster care who are placed in the home. The result of the teenager's ASVSP report should not impact the decision to approve the home as long as the parents' ASVSP check is favorable. If teenager does not pass the ASVSP report, he or she will not be able to transport children in foster care.~~

~~VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~

~~VSP-2: Authorization to Obtain Traffic Violation Record~~

~~If the Background Check Packet for the members of the Foster Family Support System has not been completed and processed, collect and begin processing the CFS-419: Foster Family Support System Information (one per FFSS member family) and each of the following documents for each appropriate member of each FFSS family (following Procedure VII-C1: Background Check Processing):~~

~~CFS-316: Request for Child Maltreatment Central Registry Check~~

~~CFS-342: State Police Criminal Record Check~~

~~CFS-593: Arkansas State Vehicle Safety Program (ASVSP)~~

~~VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~

~~VSP-2: Authorization to Obtain Traffic Violation Record~~

~~Provide the family with the following documents and review/explain as necessary:~~

~~CFS-363: Foster Parent, Adoptive Parent or Applicant Smoking Certification~~

~~CFS-404: General Medical Report (one for each person residing in the household)~~

~~CFS-409: Foster/Adoptive Family Preference Checklist~~

~~CFS-455: Request/Consent for Health Department Services, if applicable. This form should only be utilized if the family uses a well to access drinking water or if the Resource Worker has other concerns related to the drinking water, sanitation, or general health/safety conditions of the home and/or its surroundings that require an inspection by the Health Department.~~

~~CFS-480: Alternate Compliance of Water Supply Agreement, if applicable. If the family will use bottled water (and purified water for bathing if infants or children under the age of 5 will be placed in the home), this must be noted on the CFS-480: Alternate Compliance, signed by the foster parents, and updated annually. Neither a policy waiver nor an alternative compliance is required to accompany CFS-480: Alternate Compliance if the agreement to use bottled water is noted on this form and signed by the foster parents.~~

~~CFS-484: Landlord Notification of Potential Tenant Foster Care Services~~

~~PUB-30: Foster Parent Handbook~~

~~SAFE Questionnaire I, as applicable.~~

~~8)~~

~~Inform the family that three (3) positive confidential references are required, including at least one (1) from a relative and one (1) from a non relative.~~

~~Request that the family provide the names and addresses of three (3) references.~~

~~Ensure that the rSAFE Reference Letter Templates are delivered to the identified references with instructions:~~

~~For returning the completed SAFE References; and,~~

~~That they are not to share the completed SAFE Reference Letter with the prospective resource family.~~

~~Mail the SAFE Reference Letter Templates and the SAFSE envelope (to either their area MidSOUTH Training Academy c/o Foster Parent Program or contract provider, as appropriate) to each of the references that the family provides. Include a brief cover letter that:~~

~~Introduces the Resource Worker~~

~~Explains the reason for the SAFE Reference Templates~~

~~a)~~

~~Instructs the reference to mail the completed SAFE Reference Templates using the envelope~~

~~provided.~~

~~b) I
nforms the reference that they are not to share the completed SAFE Reference Letter with the
prospective foster family.~~

~~c) E
nsureInform the prospective resourcefoster family members understand that the individual
writing the reference letter must mail it directly to the agency listed on the stamped addressed
envelope provided. The prospective fosterthey family wishall not view the reference letters.~~

~~9) B
egin completing CFS-475-A: Initial Checklist for FosterResource/Adoptive Home Assessment.~~

~~10) D
etermine whether the family would be willing to serve as an informal respite home in addition
to a regular resourcefoster home (see Policy VII-G: Alternate Care).~~

~~11) I
f the family is being opened as a provisional resourcefoster home, also:~~

~~Complete the CFS-446: In Home Consultation Visit Report within two weeks of the
IHC visit and send completed CFS-446: In Home Consultation Visit Report to applicable
MidSOUTH Training Academy by the next business day.~~

~~a) C
omplete the CFS-452: Provisional Foster Resource Home Verification with the family.~~

~~b) P
rovide a copy of the CFS-452: Provisional Foster Resource Home Verification to the family and
file the original in the resourcefoster home record.~~

~~c) C
omplete the CFS-474: Provisional Foster Resource Home Orientation Checklist with the family.~~

~~d) O
nce all signatures are obtained, provide the family with a copy of CFS-474: Provisional Foster
Resource Home Orientation Checklist.~~

~~File the original CFS-474: Provisional Foster Resource Home Orientation Checklist in the
resourcefoster home record.~~

~~Provisional relative or fictive kin resourcefoster parents are not required to complete CFS-409:
FosterResource/Adoptive Family Preference Checklist. However, they must complete CFS-363,
CFS-404, CFS-455 (if applicable), and CFS-480 (if applicable) prior to the end of the six (6)
month provisional period but not necessarily before the relative child is placed in their home.~~

~~The Area DirectorResource Worker Supervisor or designee will:~~

- A. Sign the CFS-474: Provisional Foster Resource Home Orientation Checklist.
- B. Return the signed CFS-474 to the Resource Worker.

PRE-SERVICE TRAINING

~~Foster Resource~~ parents must also complete the Division's approved pre-service training curriculum which includes twenty-seven (27) hours of Foster/Adopt PRIDE or other pre-service training curriculum approved by the Division and three (3) hours of DCFS orientation prior to placement of a child in their home, designated for an applicant's specific service type (i.e., relatives and fictive kin or traditional). For traditional resource applicants, pre-service training and the DCFS orientation and final walk-through of the home must be completed prior to placement of a child. Pre-service training will include, but is not limited to the following topics:

- A. Legal Rights;
- B. Roles, responsibilities, and expectations of resource parents;
- C. Agency structure, purpose, policies, and services;
- D. Laws and regulations as related to resource homes or foster children;
- E. The impact of childhood trauma;
- F. Managing child behaviors;
- G. Medication administration; and,
- H. The importance of maintaining meaningful connections between the child and parentings, including regular visitation.

Central Registry and State Police Criminal Background checks must be cleared, and the FBI Criminal Background Check must have been submitted before a prospective resource foster parent can begin pre-service training. ~~Foster Traditional Resource~~ parents must also complete infant, child, and adult CPR and Standard First Aid Training and receive certification in both areas prior to placement of a child in their home. Provisional resource parents must complete infant, child, and adult CPR and Standard First Aid Training within six (6) months of the child being placed in their home, though the CPR and Standard First Aid Training is not an element that is required to move from provisional status to fully approved Relative Foster Family Home or Fictive Kin Foster Family Home status

New CPR and First Aid Training is not required for individuals certified as paramedics and Emergency Medical Technicians (EMTs) if proof of current certification is provided to DCFS staff. Current certification in Basic Life Support (BLS) and Advanced Cardiovascular Life Support (ACLS) also meet the Minimum Licensing Standard for CPR if proof of current certification is

provided to DCFS staff. All other medical professionals (including nurses) must have current CPR certification as outlined above and provide a copy of their current certification to DCFS staff. Additional First Aid training for nurses and other medical professionals (to include those with ACLS certification) is not required. If an applicant with a current BLS certification is a paramedic, EMT, or firefighter, additional First Aid Training is not required. A lay person with BLS certification may have to take a First Aid class if current certification in First Aid cannot be provided.

Mark-UP

~~PROCEDURE VII C3: Initiation of Pre-Service Training~~

~~12/2001/20221~~

~~In order to approve applicants for pPre-sService tTraining, within one (1) business day of successfully completing the In-Home Consultation Visit for relative and fictive kin applicants and fiveten (510) businessworking days of successfully completing the In-Home Consultation Visit for traditional applicants (which must include the results of the cleared Child Maltreatment Central Registry Checks, Adult Maltreatment Central Registry Checks, and State Police Criminal Record Checks), the Resource Worker will:~~

- ~~A. Submit the signed and completed CFS-450: Prospective Provisional Resource Parent Information and Questionnaire or CFS-446: In-Home Consultation Visit Report, as applicable, to the Resource SupervisorArea Director or designee with one (1) of the following recommendations:~~
 - ~~1) Invite the applicant to attend pPre-sService tTraining, OR~~
 - ~~2) Do not invite the applicant to pPre-sService tTraining and provide an explanation.~~
- ~~B. If the Resource SupervisorArea Director or designee approves the recommendation to send the applicant to pPre-sService tTraining:~~
 - ~~1) Complete the contact purpose of ""In-Home Consultation/Approval for Training"" in the Provider Contact Information Screen.~~
 - ~~2) Log receipt of the CFS-450 or CFS-446, as applicable, on the DCFS FosterResource/Adopt Home in CHRISthe Division information system.~~
 - ~~3) Submit a copy of the following to the prospective resourcefoster parents and to MidSOUTH (unless one-on-one pre-service training has been arranged):~~
 - ~~a) The CFS-450 or CFS-446, as applicable, approving the family to attend pPre-sService tTraining.~~
 - ~~b) Cover letter to the prospective resourcefoster family that will:~~
 - ~~i. Inform the prospective resourcefoster parents of approval to attend pPre-sService tTraining.~~
 - ~~ii. Inform the prospective resourcefoster parents that the MidSOUTH trainer will contact them to schedule pPre-sService tTraining.~~

~~— Select the "In-Home Consultation/Approval for Training" P-purpose" which you entered in the Provider Contact Information Screen. It is important to select this checkbox prior to the family attending training in order to assist MidSOUTH with pre-service training. Once it is selected, the system will automatically notify MidSOUTH of approval status.~~
- ~~C. When an applicant is NOT approved:~~
 - ~~1) Send letter to applicants who were not approved to attend pPre-sService tTraining.~~
 - ~~2) Forward a copy of the letter to the Resource SupervisorArea Director.~~
 - ~~— Log notice of non-selection on the Provider Household Member Required Checks Information Screen.~~
 - ~~3) Select "IHC/Not Approved for Ttraining" and document why the family was not approved.~~
- ~~D. Arrange and/or provide one-on-one pre-service training to the family if group training sessions are unavailable locally.~~

~~The Resource Supervisor Area Director or designee will:~~

- ~~A. Either approve or disapprove as appropriate the recommendation within five (5) working business days of receipt of the CFS 450 or CFS 446, as applicable, from the Resource Worker.~~
- ~~B. Return the signed CFS 446 to the Resource Worker.~~

~~PROCEDURE VII-C4: Pre-Service Training~~

~~011209/2012201~~

~~The prospective resourcefoster family will:~~

- ~~A. Complete a minimum of twenty-seven (27) hours of Fosterpre-service classroom/Adopt PRIDE training for traditional applicants or twelve (12) hours of pre-service classroom training for relative and fictive kin applicants, and tThree (3) hours of DCFS orientation (individually or in a group) is also required for both traditional as well as relative and fictive kin applicants (orientation must occur prior to a child being placed with traditional resource parents) prior to placement of a child. All make-up sessions shallwill also be completed in order for a family to fully complete pre-service training.~~
- ~~B. Complete CPR and Standard First Aid Training and receive certification for infant, child, and adult training in both areas.~~
- ~~C. Submit the completed SAFE Questionnaire I to their pPre-sService tTrainer on the first day of training, as applicable.~~
- ~~D. Submit the following completed forms to the Resource Worker before completing pPre-sService tTraining (do not submit to the pPre-sService tTrainer):~~
 - ~~1) CFS 363: Foster Resource Parent, Adoptive Parent or Applicant Smoking Certification. Note that if the foster resource home is designated as a smoking resourcefoster home, the Area Director will sign and submit the CFS 363 along with any supporting documentation (explaining why it would be in the child's best interest to be placed in a smoking resourcefoster home) to the Assistant Director of Community Services or designee. No child in foster care will be placed in a smoking resourcefoster home without a policy waiver.~~
 - ~~2) CFS 404: General Medical Report (one (1) for each member residing in the household);~~
 - ~~3) CFS 409: FosterResource/Adoptive Family Preference Checklist;~~
 - ~~4) CFS 455: Request/Consent for Health Department Services, if applicable. This form should only be utilized if the family uses a well to access drinking water or if the Resource Worker has other concerns related to the drinking water, sanitation, or general health/safety conditions of the home and/or its surroundings that require an inspection by the Health Department.~~
 - ~~5) CFS 480: Alternate Compliance of Water Supply Agreement, if applicable.~~
 - ~~6) CFS 484: Landlord Notification of Potential Tenant Foster Resource Care Services;~~

- ~~E. Ensure that the individuals providing references have delivered mailed their letters to the agency responsible for the home study before completing pPre-sService tTraining. Each person providing a reference should mail the reference letter directly to the appropriate MidSOUTH Training Academy (c/o Foster Parent Program) or the contract provider agency as appropriate using the pre-stamped, pre-addressed envelope provided (i.e., all reference letters shall remain confidential; prospective foster family shall not handle a completed reference letter).~~

~~The Resource Worker will:~~

- ~~A. Document the CPR Training and First Aid Training Effective and Expiration Dates, in the Provider Household Members/Requirements Tab in CHRIS the Division information system.~~
- ~~B. File all completed forms in the resourcefoster family record (CFS-404; CFS-455, and if applicable; CFS-480, if applicable; CFS-484, if applicable).~~
- ~~C. Enter prospective resourcefoster family preferences (based on their selections on CFS-409) in the Preferences Tab in the Provider Services/Admission Criteria Button.~~
- ~~D. Attend the last training module and as many other training modules as possible.~~
- ~~E. Hold the Area or County Orientation Session using the CFS-465: Foster Resource Parent Orientation Checklist to guide the orientation session.~~

~~HOME STUDY~~

The home study ~~(a component of the overall home assessment)~~ assists in determining if a family is ready, willing, and able to become a suitable and safe placement resource for a child. At least two (2) home study visits must be conducted ~~in person~~ with ~~at the resource foster~~ parent applicants, ~~including at least one visit to the both of which will be conducted in the applicant's home. The preference is for both visits to take place in the resource applicant home, but, as needed, it is permissible for one visit to be in the resource applicant home while the other is conducted over a virtual conference platform (e.g., Zoom, Facetime) with the approval of the applicable DCFS Program Manager or designee who oversees home study provider contracts.~~ The evaluator ~~shall~~will interview each age-appropriate member of the household.

The Division's approved home study ~~tool must~~ evaluates a family's dynamics including but not limited to, motivation for wanting to become a resource home foster, household composition, housing, safety hazards, income and expenses, health, education, childcare arrangements or plans, child rearing practices, daily schedules, social history, family activities, and support systems, (for more information, see PUB-0430: Minimum Licensing Standards for Child Welfare Agencies Resource Parent Handbook). By learning more about these areas, the home study assists in ascertaining how members of a family function individually and as a unit, and, subsequently, helps inform the conclusions and recommendation as to whether a family should serve as a resource foster home.

~~To complete a successful home study, the Division uses the Structured Analysis Family Evaluation (SAFE). SAFE includes a series of interviews guided by questionnaires and then an evaluation using the SAFE Psychosocial Inventory and Desk Guide, which is summarized in the final home study report. The use of these tools ensures a common evaluation process and promotes uniformity in the home studies across the state.~~

If at any point throughout the home assessment process a prospective resource foster home is found to be out of compliance with a licensing standard or a DCFS policy, the non-compliance issue must be addressed. However, if the Resource Worker determines that the non-compliance issue would not endanger the safety or well-being of children placed in a home, an Alternative Compliance or DCFS Policy Waiver may be requested as appropriate, (particularly for relatives and fictive kin). An alternative compliance is a request for approval from the Child Welfare Agency Review Board to deviate from a minimum licensing standard. -A policy waiver is a request to deviate from a DCFS policy or procedure. If the individual conducting the home study finds an area of non-compliance, he or she must notify the Resource Worker who should then take the appropriate steps as outlined in Appendix 8, to address the non-compliance issue.

The successful completion of all home assessment components as outlined above will allow the Division to assess the quality and capability of resourcefoster homes. The home assessment process will also assist prospective resourcefoster parents in determining if fostering is appropriate for them and, if so, prepare them for their new role.

PROCEDURE VII-C1: Background Check Processing

1208/202013

With the exception of to provisional resource homes being completed by resource staff in the field, if the prospective resourcefoster family did not attend an Information Meeting, the Resource Worker resource family must submit an application to become a resource home online at www.fosterarkansas.org. The Centralized Inquiry Unit will provide the family with a Background Check Packet #1 by email, which includes:

- K. — FBI fingerprint card (if not using harvester);
- L. — CFS 316: Request for Child Maltreatment Central Registry Check Instructions (form electronically generated per the instructions);
- M. — APS 0001: Authorization for Adult Maltreatment Central Registry
- N. — CFS 341: Certification of Absence of Criminal Record;
- O. — CFS 342: State Police Criminal Record Check or instructions for electronically generating the CFS 342;
- P. — CFS 419: Foster Resource Family Support System Information;
- Q. — CFS 593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers;
- R. — VSP 1: Authorization to Operate State Vehicles and Private Vehicles on State Business;
- S. — VSP 2: Authorization to Obtain Traffic Violation Record; and,
- T. — Arkansas State Vehicle Safety Program Manual;

The Resource Worker Centralized Inquiry Unit will:

- H. — Submit the signed CFS 593: DCFS Arkansas State Vehicle Safety Program, VSP 1: Authorization to Operate State Vehicles and Private Vehicles on State Business, and VSP 2: Authorization to Obtain Traffic Violation Record to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each prospective resourcefoster parent, RFFSS member, and any applicable teenage drivers to the appropriate person in the DCFS Background Check Unit for processing.
- 1) — Copy the front and back of the driver's license.

~~2) Document on the Provider Household Member Required Checks Information Screen.~~

~~3) The county office must receive the results of the Arkansas State Vehicle Safety Program Traffic Violations Record check before the family can be approved for training.~~

~~I. Assist with Submit the completion, as needed, of theed CFS-316: Request for Child Maltreatment Central Registry Check for each household member and RFFSS member age fourteen (14) years and older, excluding children in foster care to the Central Registry Unit. The CFS-316: Request for Child Maltreatment Central Registry Check must be notarized. The Child Maltreatment Central Registry Check shallwill be repeated every two (2) years.~~

~~4) If applicable, a Child Maltreatment Central Registry Check should also be conducted on each household member and RFFSS member age fourteen (14) years or older, in any state of residence in which they have lived for the past five (5) years, and in their state of employment, if different, for reports of child maltreatment.~~

~~Route each completed CFS-316: Request for Child Maltreatment Central Registry Check to the Central Registry Unit.~~

~~5) Document on the Provider Household Member Required Checks Information Screen.~~

~~6) ProvideFile a copy of the results to the county office for filing in the foster resource home record. The county office must receive the results of the Child Maltreatment Central Registry Check before the family can be approved for training.~~

~~J. Submit the completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services for each household member age 18 and one half years and older, excluding children in foster care. The APS-0001: Authorization for Adult Maltreatment Central Registry must be notarized. The person must have no history of true abuse and/or neglect.~~

~~1) Route each completed APS-0001: Authorization for Adult Maltreatment Central Registry to Adult Protective Services.~~

~~2) File a copy of the results in the foster home record. The county office must receive the results of the Adult Maltreatment Central Registry Check before the family can be approved for training.~~

~~K. Use CFS-341: Certification of Absence of Criminal Record to obtain written certification from the resourcefoster parents that any household member ages ten (10) through seventeen (17) (10-17) does not have a criminal record. Provide a copy of results to the county office for Ffileing a copy in the resourcefoster home record.~~

~~L. Submit the completed CFS-342: State Police Criminal Record Check for each household member and RFFSS member age eighteen and a half (18.5) and one half years~~

~~and older, excluding children in foster care to the DCFS Criminal Records Unit or assist the applicant with submission of the State Police Criminal Record Check via the online Information Network of Arkansas (INA) process, as applicable. The CFS-342: State Police Criminal Record Check must be notarized. The State Police Criminal Record Check must be completed prior to requesting the FBI Criminal Background Check. The State Police Criminal Record Check shall~~will be repeated every two (2) years.

1) ~~Route each completed CFS-342: State Police Criminal Record Check to the Criminal Records Unit.~~

2) ~~Document on the Provider Household Member Required Checks Information Screen.~~

3) ~~Provide File a copy of the results to the county office for filing in the resource foster home record. The county office must receive the results of the State Police Criminal Record Check before the family can be approved for training.~~

M. ~~Process an FBI fingerprint-based Criminal Background Check for all resource foster parent applicants and all members of the prospective resource foster home who are eighteen and a half (18.5) and one-half years of age and older, excluding children in foster care. The fingerprint-based FBI Criminal Background Check must be submitted prior to the family attending training; however, the results are not required before the family can attend training.~~

~~There are two (2) options for completing the FBI check:~~

N. ~~Electronic Fingerprint Scanning~~

8) ~~Foster Resource parent applicants do NOT need to fill out an FBI fingerprint card, as a request for electronic scanning will be done via CFS-342: State Police Criminal Record Check.~~

9) ~~The Resource Inquiry Unit Worker will forward the completed CFS-342: State Police Criminal Record Check to the Criminal Records Unit or ensure completion of the State Police Criminal Record Check via the online INA process, as applicable.~~

10) ~~The Criminal Records Unit will use the CFS-342: State Police Criminal Record Check to get a transaction number from the State Police or a transaction number will be generated by the online INA process, as applicable.~~

11) ~~The Criminal Records Unit will forward the transaction number to the Centralized Resource Inquiry Unit Worker or the Centralized Inquiry Worker will receive the transaction number generated through the online INA process.~~

12) ~~The Centralized Resource Inquiry Unit Worker will forward the transaction number to the applicants resource worker.~~

13) ~~Applicants must go to an approved Electronic Harvester to have fingerprints scanned. Check with the Resource resource wWorker for the closest location.~~

14) ~~Applicants must pay the electronic harvester fee. If applicants are approved and opened as a foster home, they may request reimbursement. A receipt for the harvester fees and a DHS-~~

~~1914 must be submitted to the Resource Worker's local financial coordinator for reimbursement processing.~~

~~The Centralized Resource Inquiry Unit Worker will document the results on the Provider Household Member Required Checks Information Screen and file provide a copy of the results to the county office for filing in the resource foster home record.~~

~~0. — Ink Fingerprint:~~

~~1) — Foster Resource parent applicants will complete CFS-342: State Police Criminal Record Check and the FBI fingerprint card with good, un-smudged prints. Take care not to staple through the fingerprints on the FBI fingerprint card.~~

~~If the prints are not readable, the family will have to re-submit. Foster Resource parent applicants may not use an Electronic Harvester if they have already submitted ink fingerprints and the attempt was unsuccessful.~~

~~If a legible set of fingerprints cannot be obtained after a minimum of two (2) attempts, a name-based FBI check will be conducted instead.~~

~~The Centralized Resource Inquiry Unit Worker will forward the documents to the Criminal Records Unit.~~

~~2) —~~

~~The Centralized Inquiry Unit Worker will document the results on the Provider Household Member Required Checks Information Screen and provide a copy of the results to the county for filing in the resource home record.~~

PROCEDURE VII C2: In-Home Consultation Visit

08/201112/2001/2021

The Resource Worker will:

- ~~— Within five (5) working business days after clearances on all required background checks have been received, (FBI checks must have been submitted but not completed) being assigned the resource home, contact the prospective resourcefoster family to schedule an in-home consultation visit and FBI fingerprinting with them. The in-home consultation visit should take place within two (2) weeks of the scheduling call.~~
- ~~B. During the in-home consultation visit:~~
 - ~~— Observe family functioning and assess the family's capacity to meet the need of the children in foster care.~~
 - ~~1) Provide all Information Meeting documents (aside from the Background Check Packet which should have already been completed) to the family if they have not yet attended an Information Meeting (see Procedure VII B4). Families are encouraged to attend an Information Meeting but are not required to do so.~~
 - ~~2) Review and complete the CFS 446: In-Home Consultation Visit Report. The completed CFS 446: In-Home Consultation Visit Report will serve as the first formal step in the application process.~~
 - ~~3) —~~
 - ~~4) Discuss Minimum Licensing Standards and other DCFS policy requirements related to resource homes for foster homes as outlined in PUB 30: Resource Parent Handbook22 and answer any questions the family may have.~~
 - ~~5) Inform the prospective resourcefoster family that they will not be approved until they meet Minimum Licensing Standards, DCFS policy requirements, and any other qualifications deemed appropriate (with the exception of certain non-safety standards that may be waived for relative and fictive kin providers).~~
 - ~~6) Discuss training required prior to approval, including completion of CPR and Standard First Aid training and certification (for specific CPR and First Aid requirements, see PUB 30: Resource Parent Handbook).~~
 - ~~—~~
 - ~~7) Provide Review the Arkansas State Vehicle Safety Program (ASVSP) with the family and have them complete the following forms, if they have not already done so:
CFS 593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers.
Teenage drivers in the home will be subjected to the ASVSP and must be licensed if they will be allowed to transport children in foster care who are placed in the home. The result of the teenager's ASVSP report should not impact the decision to approve the home as long as the~~

~~parents' ASVSP check is favorable. If teenager does not pass the ASVSP report, he or she will not be able to transport children in foster care.~~

~~VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~

~~VSP-2: Authorization to Obtain Traffic Violation Record~~

~~If the Background Check Packet for the members of the Foster Family Support System has not been completed and processed, collect and begin processing the CFS-419: Foster Family Support System Information (one per FFSS member family) and each of the following documents for each appropriate member of each FFSS family (following Procedure VII-C1: Background Check Processing):~~

~~CFS-316: Request for Child Maltreatment Central Registry Check~~

~~CFS-342: State Police Criminal Record Check~~

~~CFS-593: Arkansas State Vehicle Safety Program (ASVSP)~~

~~VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business~~

~~VSP-2: Authorization to Obtain Traffic Violation Record~~

~~Provide the family with the following documents and review/explain as necessary:~~

~~CFS-363: Foster Parent, Adoptive Parent or Applicant Smoking Certification.~~

~~CFS-404: General Medical Report (one for each person residing in the household)~~

~~CFS-409: Foster/Adoptive Family Preference Checklist~~

~~CFS-455: Request/Consent for Health Department Services, if applicable. This form should only be utilized if the family uses a well to access drinking water or if the Resource Worker has other concerns related to the drinking water, sanitation, or general health/safety conditions of the home and/or its surroundings that require an inspection by the Health Department.~~

~~CFS-480: Alternate Compliance of Water Supply Agreement, if applicable. If the family will use bottled water (and purified water for bathing if infants or children under the age of 5 will be placed in the home), this must be noted on the CFS-480: Alternate Compliance, signed by the foster parents, and updated annually. Neither a policy waiver nor an alternative compliance is required to accompany CFS-480: Alternate Compliance if the agreement to use bottled water is noted on this form and signed by the foster parents.~~

~~CFS-484: Landlord Notification of Potential Tenant Foster Care Services~~

~~PUB-30: Foster Parent Handbook~~

~~—SAFE Questionnaire I;~~

~~8) Inform the family that three (3) positive confidential references are required, including at least one (1) from a relative and one (1) from a non-relative.~~

~~—Request that the family provide the names and addresses of three (3) references.~~

~~—Ensure that the SAFE Reference Letter Templates are delivered to the identified references with instructions:~~

~~—For returning the completed SAFE References; and,~~

~~That they are not to share the completed SAFE Reference Letter with the prospective resource family.~~

~~Mail the SAFE Reference Letter Templates and the SAFE envelope (to either their area MidSOUTH Training Academy c/o Foster Parent Program or contract provider, as appropriate) to each of the references that the family provides. Include a brief cover letter that:~~

~~Introduces the Resource Worker~~

~~Explains the reason for the SAFE Reference Templates~~

- ~~a) Instructs the reference to mail the completed SAFE Reference Templates using the envelope provided.~~
- ~~b) Informs the reference that they are not to share the completed SAFE Reference Letter with the prospective foster family.~~
- ~~c) Ensure/inform the prospective resource/foster family members understand that the individual writing the reference letter must mail it directly to the agency listed on the stamped addressed envelope provided. The prospective foster family will not view the reference letters.~~
- ~~9) Begin completing CFS-475-A: Initial Checklist for Foster Resource/Adoptive Home Assessment.~~
- ~~10) Determine whether the family would be willing to serve as an informal respite home in addition to a regular resource/foster home (see Policy VII-G: Alternate Care).~~
- ~~11) If the family is being opened as a provisional resource/foster home, also:~~
 - ~~e) Complete the CFS-452: Provisional Foster Resource Home Verification with the family.~~
 - ~~f) Provide a copy of the CFS-452: Provisional Foster Resource Home Verification to the family and file the original in the resource/foster home record.~~
 - ~~g) Complete the CFS-474: Provisional Foster Resource Home Orientation Checklist with the family.~~
 - ~~h) Once all signatures are obtained, provide the family with a copy of CFS-474: Provisional Foster Resource Home Orientation Checklist.~~
- ~~File the original CFS-474: Provisional Foster Resource Home Orientation Checklist in the resource/foster home record.~~

~~Provisional relative or fictive kin resource/foster parents are not required to complete CFS-409: Foster Resource/Adoptive Family Preference Checklist. However, they must complete CFS-363, CFS-404, CFS-455 (if applicable), and CFS-480 (if applicable) prior to the end of the six (6) month provisional period but not necessarily before the relative child is placed in their home.~~

~~The Area Director or designee will:~~

- ~~C. Sign the CFS-474: Provisional Foster Resource Home Orientation Checklist.~~
- ~~D. Return the signed CFS-474 to the Resource Worker.~~

PROCEDURE VII-C5: Home Study

011207/2022011

The home study may be conducted by designated Division staff, by staff contracted through the MidSOUTH Training Academy or other contract providers, or by volunteers trained by designated DCFS staff.- The evaluator will complete the Division-approved home study in accordance with established ~~SAFE~~ protocols.

FINAL WALK-THROUGH OF THE HOME AND ORIENTATION ~~inal Walk-Through of the Home and Orientation~~

Prior to approving an open resource home, DCFS staff will conduct a final walk-through of the home to ensure all resource home requirements have been met, and to review what to expect in the immediate future regarding a first placement. This will include DCFS and the resource parents signing the Initial Resource Home Agreement, which provides a summary of the following information:

- A. Expectations and responsibilities of the Division, the staff, and the resource parents
- B. Services to be provided
- C. Financial arrangements for the children placed in the home
- D. Authority that the resource parents can exercise for the children placed in their home
- E. Actions that require DCFS authorization
- F. Legal responsibility for damage or risk resulting from children in their home
- G. DCFS' process and procedures for investigating complaints
- H. DCFS' procedure for giving advance notice of termination of a placement except for documented emergencies.

The individual conducting the home study will:

- ~~A. Conduct an initial face-to-face interview with the prospective resourcefoster parent(s) in the applicant home using the applicants' responses to SAFE Questionnaire I (to have been completed and submitted by the prospective resourcefoster parents by the first day of pre-service training) to guide the conversation.~~
- ~~B. Evaluate the first interview and note responses that will require further clarification and/or development.~~
- ~~C. Conduct a second face-to-face interview with the applicant(s) in the applicant home to include pursuing clarification or other follow-up items from the first interview.~~
- ~~D. During the second interview, provide SAFE Questionnaire II to the prospective resourcefoster parents who will complete this questionnaire in the presence of the home study evaluator. In the case of joint applicants, each applicant should complete and discuss their responses to the SAFE Questionnaire II with the home study evaluator separately, before holding another couple interview to discuss shared issues.~~
- ~~E. Evaluate the second interview and note responses that will require further clarification and/or development.~~
- ~~F. Conduct additional face to face interviews with the prospective resourcefoster parent(s) and/or other household members to further explore topics noted during the evaluation process.~~
- ~~G. Interview each household member separately who is ten (10) years of age or older. Observe younger children and interview if appropriate.~~
- ~~H. Review the three (3) reference letters and ensure that all three (3) letters are positive references.~~
- ~~I. Using information collected during the interviews, complete the Division approved template and any other associated tools. and SAFE Reference Templates, along with the Desk Guide, complete the SAFE Psychosocial Inventory.~~
- ~~J. Within forty five (45) working business days of the family completing pre-service training, complete and submit the final SAFE Home Study Report to the Resource Worker for review and assessment.~~

The Resource Worker will:

- ~~A. Review the final SAFE Hhome sStudy Rreport and other assessment documents.~~
- ~~B. Based on the review, submit the recommendation to approve or deny the home to the Resource Supervisor Area Director or designee within seven (7) businessworking days of receiving the final SAFE Hhome Sstudy Rreport.~~
- ~~C. Document the Initial Home Study Completed Date on the Provider Service Details Screen in the Division information systemCHRIS.~~
- ~~D. Notify the applicant in writing if a determination to approve or deny the home based on the final SAFE Hhome sStudy rReport and other assessment documents cannot be completed within sixty (60) business working days of the family completing pre-service training and explain the reason.~~
- ~~— Provide a copy of the final hSAFE Home sStudy rReport, stamped with “DCFS use only” and “Not for private use” to the family regardless of approval or denial.~~
- ~~— Maintain all components of the Division approvedSAFE H home Sstudy (e.g.i.e., report template, reference letters, questionnaires, ration sheet) per the Division record retention schedule.~~

The Resource SupervisorArea Director or designee will:

- ~~A. Review and assess the completed final hSAFE Home sStudy rReport and other assessment documents as well as the Resource Worker’s recommendation to approve or deny.~~
- ~~B. Approve or deny the home within seven (7) businessworking days of receipt of all final documents from the Resource Worker.~~

PROCEDURE VII C6: Final Approval of Foster Resource Homes

08/201112/2001/20221

The Resource Worker will:

- ~~A. Ensure the CFS 475-A: Initial Checklist for Foster Resource/Adoptive Home Assessment is completed, that any safeguard measures deemed necessary have been implemented, and that any requested alternative compliances or policy waivers have been approved.~~
- ~~B. Invite the County Supervisor to accompany them on the final face-to-face visit with the prospective resource foster parents and final visual inspection of the home.~~
- ~~C. Conduct a final walk through, face-to-face visit with the prospective resource foster parents and a final visual inspection of the home (preferably with the County Supervisor).~~
- ~~— Provide the family with an Approval Packet.~~

D. E. Rev

~~Review the Approval Packet content with the resource foster parents. The Approval Packet will include:~~

- ~~1) Stamped envelopes addressed to the appropriate county office~~
- ~~2) Examples of the completion of travel documentation that must be submitted monthly.~~
- ~~3) Copy of the Code of Ethics.~~
- ~~4) Copy of the Arkansas Practice Model~~
- ~~5) CFS 381-A: Resource Parent Training Record Log~~
- ~~6) CFS 364: Medication Log.~~
- ~~7) CFS 369: Tornado and Child Inventory Log~~
- ~~8) Fire Drill Log.~~
- ~~9) CFS 352: Medical, Dental, Vision, Hearing, and Psychological Episodic Visits.~~
- ~~10) After hours contact sheet.~~
- ~~11) Foster Care Board Sheet.~~
- ~~— Appropriate Foster Resource Parent Association contact information.~~

- ~~— If the Provide a Background Check Packet for each adult the members of the Resource Family Support System (if not already completed) and process accordingly once the resource home is approved and opened has not been completed and processed, collect and begin processing the CFS-419: Resource Family Support System Information (one (1) per RFSS member family) and each of the following documents for each appropriate member of each RFSS family (following Procedure VII-C1: Background Check Processing):~~
 - ~~— CFS-316: Request for Child Maltreatment Central Registry Check (as generated by the Arkansas Child Maltreatment Registry website).~~
 - ~~— CFS-342: State Police Criminal Record Check.~~
 - ~~— CFS-593: Arkansas State Vehicle Safety Program (ASVSP).~~
 - ~~— VSP 1: Authorization to Operate State Vehicles and Private Vehicles on State Business.~~
 - ~~— VSP 2: Authorization to Obtain Traffic Violation Record.~~
- ~~F. —~~
- ~~G. Complete the CFS-462: Initial Foster Resource Family Agreement with the family.~~
 - ~~—~~
- ~~H. File the CFS-462: Initial Foster Resource Family Agreement in the resource foster home record.~~
- ~~I. Enter a disposition as to the approval/denial of the resource foster home within three (3) working business days of receipt of the Resource Supervisor/ Area Director's or designee's approval or denial.~~
 - ~~1) If the recommendation is approval, then:~~
 - ~~a) If the orientation has not already taken place, schedule a date for a County or Area Orientation Session for newly approved resource foster parents.~~
 - ~~b) Complete Provider Alternate Care Screen in the Division information system CHRIS if family has determined they are willing to serve as an Informal Respite Home and, using CFS-419, enter all appropriate identified Foster Resource Family Support System~~

~~Individual Members including information on their cleared background checks (see Policy POLICY VII-G: Alternate Care).~~

~~c) Enter Begin Date on Availability Status on Provider Service Status Screen and Request Approval on Provider Service Detail Screen in the Division information system CHRIS.~~

~~d) If the family has indicated interest and been approved to foster children/youth with specific characteristics, identify the appropriate Disability Willing to Accept selection under the Preferences Tab in the Provider Services/Admission Criteria Button.~~

~~e) File the approval letter in the resource foster home record.~~

~~— If the recommendation is denial, then:~~

~~a) Send a denial letter “Letter of Denial” to the applicants who were not approved. See Policy POLICY VII-D: Denial of a Foster Resource Home and document in Provider Contact Information Screen in CHRIS.~~

~~b) End dDate the Foster resource fFamily sService, on the Provider Services Tab selecting the appropriate rReason for eEnd dDate.~~

~~— Specify why the home was denied, in the comment box on the Provider Services Tab.~~

~~— For approved homes, develop and maintain a record for each resource home, that contains all information and documentation as required by Minimum Licensing Standards and DCFS policy. The resource home record order will include the items listed in Appendix 4: Resource Home Record Order.~~

~~The County Supervisor or designee is encouraged to:~~

~~A. Participate in the final face to face visit with the prospective resource foster parents and final visual inspection of the home, with the Resource Worker.~~

Mark-Up

The Resource SupervisorArea Director or designee will:

- ~~A. If appropriate, approve the Resource Worker's Request for Approval in Provider Service Detail Screen, in the Division information system, CHRIS to finalize the approval of the Foster Resource Family. Upon approval, the information system CHRIS automatically provides the Foster Resource Family Approval Letter to be printed, mailed, and filed in the resourcefoster home record.~~

The Resource Worker will:

- ~~A. Develop and maintain a record for each resource foster home, that contains all information and documentation as required by Minimum Licensing Standards and DCFS policy. The resourcefoster home record order will include the items listed in Appendix 4: Foster Resource Home Record Order.~~

POLICY VII-D: DENIAL OF A ~~FOSTER-RESOURCE-HOME~~ APPLICANT

0601/2022011

If at any point during the home assessment process the Division determines that an applicant does not meet the standards or any other criteria of a quality resource~~foster~~ home, DCFS will deny approval of the home.

PROCEDURE VII-D1: Denial as a Result of Negative Results of a Background Check

06/2022

The Resource Worker or designee will:

- A. Share the results with the applicant ~~family~~ and inform them of their ineligibility to attend training.
- B. For denials related to criminal background check record results, ensure that a CFS-508-A: Letter of Denial was previously sent to the applicant via certified, restricted mail and document the letter in Provider Contact Information Screen in the Division information system.
 - 1) If the family chose at initial notification of the criminal history via CFS-508-A to challenge the accuracy and completeness of their criminal history record or obtain missing disposition information and contacted the assigned Resource Worker within thirty (30) days of receipt of the CFS-508-A to inform the Resource Worker that the family planned to ~~will~~ challenge the results, keep the resource parent application and associated provider number open in the Division information system until the requested corrections are either approved or denied at which point further action will be taken, as appropriate.
 - f)a) If there are changes or updates to an applicant's criminal history record and the decision is made to move forward with a request for an alternative compliance request from the Child Welfare Agency Review Board, see Appendix 8: Alternative Compliance and Policy Waiver Protocol.
 - 2) If the Resource Worker does not receive notification that the family has elected to challenge the results of their criminal history report, then remove the Resource Parent application from the system and close the associated provider number.
 - a) If the family chooses to review and request corrections to their state or FBI criminal history reports in the future, they may reapply to become a resource parent at any point once corrections are made. Resubmission of a Resource Parent application does not guarantee approval as a Resource parent.

- C. Document the results of the background check in the Division's information management system selecting the appropriate Reason for end date.
- D. Specify why the home was closed.

Mark-UP

PROCEDURE VII-D~~21~~: Denial as a Result of the In-Home Consultation Visit

~~0601/2022~~~~11~~

The Resource Worker will:

- A. Inform the family of their non-compliance with any identified standard or policy and determine if the family is willing ~~and~~/or able to implement a safeguard measure in a timely manner in order to achieve compliance. The family cannot be approved to open as a ~~resource~~~~foster~~ home until the safeguard measure is implemented.
- B. If the family chooses not to address compliance issues or, despite trying, fails to achieve compliance, share the non-compliance with the family and document it on the CFS-446: In-Home Consultation Visit Report with all signatures. ~~-~~The family will sign the In-Home Consultation, acknowledging non-compliance.
- C. Recommend non-approval for training if the family cannot comply with all approval standards, ~~including if they receive a negative result from the Vehicle Safety Program.~~
- D. End ~~d~~Date the ~~Foster R~~esource ~~F~~amily ~~S~~ervice on the Provider Services Tab ~~by~~, selecting the appropriate ~~r~~Reason for ~~the e~~End ~~d~~Date in ~~the Division information system.~~~~CHRIS.~~
- ~~E.~~ Specify why the home was closed in the comment box on the Provider Services Tab.

The ~~Resource Supervisor~~~~Area Director~~ or designee will:

- ~~A.~~ If a family fails to address non-compliance issues, disapprove the family and provide them with a copy of the CFS-446: In-Home Consultation Visit Report with all signatures.

~~PROCEDURE VII-D2: Denial as a Result of Negative Results of a Background Check~~

~~01/2011~~

~~The Area Director or designee will:~~

- ~~A. Share the results with the family and inform them of their ineligibility to attend training.~~
- ~~B. Send a "Letter of Denial" to the family and document in Provider Contact Information Screen in CHRIS.~~
- ~~C. Document the results of the background check in the Provider Household Member/Requirements Tab and End Date the Foster Family Service on the Provider Service Tab selecting the appropriate Reason for End Date in CHRIS.~~
- ~~Specify why the home was closed in the comment box on the Provider Services Tab~~
- ~~D.~~

PROCEDURE VII-D3: Denial as a Result of the Home Assessment

0601/202211

The Resource Worker Supervisor~~Area Director~~ or designee will:

- A. Send a ~~“Letter of d~~Denial letter to all applicants who are not approved and document in Provider Contact Information Screen in ~~CHRIS~~the Division information system.
- B. End ~~d~~ate the ~~Foster r~~Resource fFamily ~~s~~Service on the Provider Service ~~T~~ab, by selecting the appropriate ~~R~~reason for the eEnd ~~d~~ate in ~~CHRIS~~the Division information system.
- C. Specify why the home was closed in the comment box on the Provider Services Tab.

POLICY VII-E: REEVALUATION OF THE FOSTER RESOURCE HOME MONITORING AND REEVALUATION

0608/202211

In order to ensure continued quality of all DCFS ~~resource~~~~fo~~ster homes, the Division ~~shall~~will monitor resource homes at least quarterly and conduct a complete reevaluation of each resource~~fo~~ster home's ability to care for children at least annually. At least one of the quarterly monitoring visits shall be unannounced and shall be documented as unannounced in the resource home record.

Resource staff shall use the Division-approved monitoring and reevaluation forms and tools for the quarterly monitoring and reevaluation visits to include background check request forms and tools when a family's Child Maltreatment Central Registry Checks and State Criminal Background must be updated.

Quarterly monitoring and annual reevaluation visits will ensure the resource home remains in compliance with all Minimum Licensing Standards for Placement as well as DCFS Policy for resource homes and otherwise appropriately meeting the physical, mental health, and emotional needs of the children placed in the home. Corrective action plans may be put into place as appropriate to bring a resource home into compliance with Minimum Licensing Standards and DCFS policy or address any other issues identified. Corrective action plans shall be time-limited - generally not to exceed sixty (60) days. and whenever there is a major life change. Major life changes include:

In addition, a reevaluation shall be conducted whenever there is a major life change. Major life changes include:

- A. Death or serious illness among the members of the resource family
- B. Marriage, separation, or divorce (see more detailed information concerning resource parents who plan to marry or divorce below.)
- C. Loss of or change in employment
- D. Change in residence
- E. Suspected child maltreatment of any child in the resource home
- F. The addition of family members (e.g., birth, adoption, aging relative moving in)

If during the monitoring or reevaluation process or at any other time a resource home is found to be out of compliance with any Minimum Licensing Standard or DCFS policy and does not come into compliance within the timeframe noted in a corrective action plan, the Division may close a

resource home. In this event, a face-to-face meeting will occur with resource parents to discuss the closure of the home and a written notice will also be provided. This notice will include information regarding the process for an internal review of adverse action (for additional information, PUB-30: Resource Parent Handbook regarding Internal Review of Adverse Action Involving Resource Parents). The notice will also include a summary documenting the reasons for closure, as well as all efforts by the county office to rectify the problem. The final assessment and determination of closure will be made by the Resource Worker, in collaboration with designated county staff, the Area Director and Central Office staff, as appropriate.

SINGLE RESOURCE PARENTS WHO PLAN TO MARRY

In situations when a resource parent plans to marry (or otherwise move in with/live together with a partner) and wishes to continue providing care to children in foster care, the future spouse or partner will be considered an applicant seeking approval to serve as a resource parent. The future spouse or partner must also complete pre-service training and resource parent orientation. The resource parent and fiancé(e) or partner will be informed that the reevaluation will have to be completed before the fiancé(e) or partner can take on the role of resource parent and reside with the children in the home.

If the future spouse or partner does not clear any of the background checks or does not complete pre-service training before moving into the home, the home must be made unavailable. The Division will also work toward closing the resource home. However, decisions regarding when to close the home and move a child currently may be currently placed in the home will be made on a case-by-case basis and take into account the reason the future spouse or partner does not qualify as a resource parent (e.g., background checks, failure to complete training) and the impact of a placement move on the child. The following shall participate in the decision regarding placement moves:

- A. Resource parent
- B. Child placed in the home, as age and developmentally appropriate
- C. Resource Worker
- D. Child's FSW
- E. Respective supervisors of the Resource Worker and FSW
- A. ~~Child's attorney ad litem~~ ~~Death or serious illness among the members of the resourcefoster family.~~
 - ~~• Marriage, separation, or divorce. (See more detailed information concerning resourcefoster parents who plan to marry or divorce in procedures below.)~~
 - ~~• Loss of or change in employment.~~
 - ~~• Change in residence.~~
 - ~~• Suspected child maltreatment of any child in the resourcefoster home.~~
 - ~~• F. The addition of family members (e.g. birth, adoption, aging relative moving in).~~

TWO PARENT HOMES THAT PLAN TO SEPARATE OR DIVORCE

When approved resource parents who currently have children placed in their home plan to divorce or separate, the Resource Worker will conduct a reevaluation on the resource parent who has elected to continue the role of care provider using the Division approved update/reevaluation tools. The household member who is no longer in the home will be ended in the Division information system. If both individuals wish to continue as resource parents, a new provider service must be initiated for the parent who will be residing at a new address.

The completion and approval of all ~~resourcefoster~~ home monitoring visits and reevaluations must be documented in ~~CHRIS~~the Division information system. -If a ~~resourcefoster~~ home reevaluation is not completed and documented annually in ~~CHRIS~~the Division information system, any IV-E eligible child placed in the home will lose IV-E eligible claim ability until the reevaluation of the family is completed and documented.

CONTINUING EDUCATION REQUIREMENTS

In addition to continuing to meet all Minimum Licensing Standards and DCFS Policy requirements as they relate to ~~resourcefoster~~ homes, ~~resourcefoster~~ parents must also complete a minimum of fifteen (15) hours of Division-sponsored or Division-approved in-service training annually after the first year of service. Training classes may cover a wide range of topics related to parenting, child development and behavior, and medical needs. Continuing education hours may be earned through in-person/classroom trainings, online courses, video, television programs, or books related to child abuse, child development, parenting, trauma-informed care, and other approved topics. Continuing education hours obtained through videos, books, online courses, or television programs for each resource parent must have prior approval by the assigned Resource Worker. The Resource Worker will inform resource parents of any training and educational opportunities known to them. Funds may be available to defray expenses for the resource parent continuing education opportunities. Prior approval from the local Resource Unit is required for reimbursement.

~~No more than nine 5 (9) hours of videos, TV programs, books, or online courses for each resourcefoster parent will be accepted per year and must have prior approval by the Area Director or designee. Foster Resource~~ parents must also maintain current CPR certification and Standard First Aid training. -Maintenance of CPR certification and First Aid training is in addition to the fifteen (15) hours of continuing education and, therefore, cannot be counted as part of the annual fifteen (15) hour continuing education requirement.

~~Foster-Resource~~ parents must complete their annual in-service training requirements before any additional children in care are placed in their home, unless an exception is granted. ~~Foster Resource~~ parents who do not meet the in-service training requirements will be notified that they must complete the in-service training requirements within sixty (60) days. -No additional children will be placed in the home during this sixty (60)-day period.

If the ~~resource~~~~foster~~ parents' annual in-service training requirements are more than sixty (60) calendar days overdue, then a reevaluation will also be required unless an extension to meet in-service training requirements has been granted by the Area Director. Extensions should be the exception and not the rule.

PROCEDURE VII-E1: Resource Home Quarterly Monitoring

06/2022

The Resource Worker will:

- Monitor approved resource homes through quarterly visits to ensure compliance with Minimum Licensing and Division standards as well as conduct a reevaluation in the case of any major life change.
- Complete 475-B: Quarterly Monitoring Checklist for Resource Home to document completion of each quarterly monitoring visit.
- File each completed 475-B in the resource home record and document in the Division information system.

PROCEDURE VII-E2: Resource Home Annual Reevaluation or Reevaluation Due to Major Life Change

06/2022

- Complete Division approved update/reevaluation tools, CFS 451: Resource Parent Reevaluation and CFS 475-C: Reevaluation Checklist for Resource/Pre-Adoptive Home. The completion and approval of all resource home reevaluations must be documented in the Division information system.
- Document in the resource home record that the resource parent(s) have maintained current certification in both CPR and Standard First Aid and document in the Provider Household Members/Requirement Tab in the Division information system.

- Update any expired State Police Criminal Record Checks and Central Registry Checks for each member of the household or members of the RFSS and document in the Provider Household Members/Requirement Tab.
- Enter the resource parents' hours of in-service training in the Training Screen in the Division information system.
- Request an exception for any resource parent whose annual in-service training hours are sixty (60) calendar days overdue, if applicable.
- Submit documentation with recommendation to approve or disapprove the home to the Resource Supervisor or Designee.
- Complete the Provider Reevaluation Screen and Request Approval for Resource Supervisor's review and approval.

The Resource Supervisor will:

- Review the Division-approved update/reevaluation tools, CFS-451: Resource Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Resource Home and Resource Worker recommendation to approve or deny the home.
- Approve the Resource Worker's Request for Approval on the Provider Reevaluation Screen in the Division information system.

When an exception to the in-service training requirements is requested, the Area Director will:

- Receive the request for extension to in-service training requirements.
- Review the quality of care provided by the resource family and the reasons for overdue training.
- Determine whether to grant an exception to the in-service training requirement for up to sixty (60) calendar days.

PROCEDURE VII-E1: Quarterly Monitoring of Foster Resource Home

~~1208/202011~~

The Resource Worker will:

- ~~A. Monitor approved resourcefoster homes through quarterly visits to ensure compliance with Minimum Licensing and Division standards.~~
- ~~B. Complete 475-B: Quarterly Monitoring Checklist for Foster Resource Home to document completion of each quarterly monitoring visit.~~
- ~~— File each completed 475-B in the resourcefoster home record and document in CHRIS the Division information system.~~
- ~~C. 08/2011~~

The Resource Worker will:

- ~~A. — Conduct a reevaluation of the resourcefoster home annually and in the case of any major life change.~~
- ~~B. Complete SAFE Update/Reevaluation Tools, CFS-451: Foster Resource Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Foster Resource/Pre-Adoptive Home. The completion and approval of all resourcefoster home reevaluations must be documented in CHRIS the Division information system.~~
- ~~C. Complete/update the Individual Training Needs Assessment (ITNA) with the foster parent.~~
- ~~D. Submit the completed ITNA to MidSOUTH within 45 working days of completing the reevaluation.~~
- ~~E. Document in the resourcefoster home record that the resourcefoster parent(s) have maintained current certification in both CPR and Standard First Aid and document in the Provider Household Members/Requirement Tab in CHRIS the Division information system.~~
- ~~F. Update any expired State Police Criminal Record Checks and Central Registry Checks for each member of the household or members of the RFFSS and document in the Provider Household Members/Requirement Tab in CHRIS.~~
- ~~G. Enter the resourcefoster parents' hours of in-service training in the Training Screen in the Division information system CHRIS.~~
- ~~— Request an exception for any resourcefoster parent whose annual in-service training hours are sixty (60) calendar days overdue, if applicable.~~
- ~~H. Submit documentation with recommendation to approve or disapprove the home to the Area Director or Designee.~~
- ~~I. Complete the Provider Reevaluation Screen in CHRIS and Request Approval for Area Director's review and approval.~~

~~The Area Director~~Resource Supervisor will:

- ~~A. Review the SAFE Update/Reevaluation Tools, CFS 451: Foster Resource Parent Reevaluation and CFS 475 C: Reevaluation Checklist for Foster~~Resource/Pre-Adoptive Home and Resource Worker recommendation to approve or deny the home.
- ~~B. Approve the Resource Worker's Request for Approval on the Provider Reevaluation Screen in CHRIS~~the Division information system.

~~When an exception to the in-service training requirements is requested, the Area Director will:~~

- ~~A. Receive the request for extension to in-service training requirements.~~
- ~~B. Review the quality of care provided by the resourcefoster family and the reasons for overdue training.~~
- ~~C. Determine whether to grant an exception to the in-service training requirement for up to sixty (60) calendar days.~~

~~PROCEDURE VII-E3: Single Foster Resource Parents Who Plan to Marry~~

~~61208/202011~~

~~When a single resourcefoster parent plans to marry (or otherwise move in with/live together with a partner) and wishes to continue providing care to children in foster care, the Resource Worker will:~~

- ~~A. Conduct a reevaluation using the SAFE Update/Reevaluation Tools, CFS 451: Foster Resource Parent Reevaluation and CFS 475 C: Reevaluation Checklist for Foster~~Resource/Pre-Adoptive Home. This is to ensure the resourcefoster home will maintain compliance and quality with the inclusion of the new spouse/partner in the home.

~~The future spouse/partner will be considered an applicant seeking approval. He or she must complete and submit the following to the Resource Worker:~~

- ~~A. Vehicle Safety Program documents:~~
 - ~~1) CFS 593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers;~~
 - ~~2) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business;~~
 - ~~3) VSP-2: Authorization to Obtain Traffic Violation Record;~~
- ~~B. Background check documents:~~
 - ~~1) CFS 316: Request for Child Maltreatment Central Registry Check;~~
 - ~~2) APS 0001: Authorization for Adult Maltreatment Central Registry~~
 - ~~3) CFS 342: State Police Criminal Record Check;~~

- 4) ~~FBI fingerprint card (This is not needed if applicant is completing FBI fingerprint check via Electronic Harvester or FBI fingerprint card.).~~
- ~~Complete the Required Checks Tab on the Provider Household Member Screen in CHRIS^{the} Division information system.~~
- 5) ~~Provide documentation of certification in infant, child, and adult CPR and First Aid.~~

~~The future spouse/partner must also complete pre-service training and resource foster parent orientation. The resource foster parent and fiancé(e)/partner should be informed that the reevaluation will have to be completed before the fiancé(e)/partner can take on the role of resource foster parent and reside with the children in the home. If the future spouse/partner does not clear any of the background checks or does not complete pre-service training before moving into the home, the home must be closed.~~

~~PROCEDURE VII-E4: Two Parent Homes that Plan to Divorce/Separate~~

~~61208/202011~~

~~When approved resource foster parents, who currently have children placed in their home, plan to divorce or separate, the Resource Worker will:~~

- A. ~~Conduct a reevaluation on the resource foster parent who has elected to continue the role of care provider using the SAFE Update/Reevaluation Tools, CFS-451: Foster Resource Parent Reevaluation, and CFS-475-C: Reevaluation Checklist for Foster Resource/Pre-Adoptive Home.~~
- B. ~~Determine if the resource foster parent still meets all other licensing standards.~~
 - 1) ~~If the home continues to comply with all standards, an alternative compliance is not needed.~~
 - 2) ~~If the home is out of compliance or does not meet other DCFS policies designed to ensure the quality of the home, determine if a corrective action plan could bring the home into full compliance and/or maintain the quality of the home.~~
 - a) ~~If the resource foster parent agrees to participate in the corrective action plan, the home may remain open and he or she may continue caring for the child(ren) currently placed in the home.~~
 - b) ~~The corrective action plan must be completed successfully within sixty (60) days.~~
 - c) ~~If a corrective action plan is not feasible, the case may be referred for alternative compliance or a policy waiver request.~~
- C. ~~End d Date the h Household m Member who is no longer in the home, in the Household Information Tab of the Provider Household Members Screen in CHRIS^{the} Division information system.~~

~~—If both individuals wish to continue as resource foster parents, a new Provider Screen must be initiated for the parent who will be residing at a new address.~~

Mark-UP

POLICY VII-F: ~~FOSTER-RESOURCE~~ HOME REOPENING

~~01/2006/202211~~

In order to secure the best placement for each child in foster care, the Division seeks to maintain a large pool of quality ~~resourcefoster~~ homes. For this reason, the Division will consider reopening ~~resourcefoster~~ homes when situations arise where ~~resourcefoster~~ parents who previously self-elected to close their home ~~and/or~~ whose home was closed by the Division would like to reopen. Requirements vary depending on ~~how long a~~ circumstances surrounding the ~~resourcefoster~~ home has been closed.

A reconsideration by the Resource Family Review Committee is required ~~for any closed resource home closed~~ that has any history of child maltreatment investigations involving the provider as an alleged offender, regardless of:

- A. The outcome of the investigation;
- B. Whether the resource home was closed by the Division or closed at the resource parent's request; or
- C. Whether there is documentation indicating the reason for closure was related to the investigation.

The reconsideration to reopen packet will be submitted to the Resource Family Review Committee via the Foster Care Manager who will present the request to the Committee for consideration. If a reconsideration to reopen packet is sent to the Resource Family Review Committee, the assumption is that local staff who submitted the packet are in support of the request. The Resource Family Review Committee will make review and make recommendations to the Division Director or designee regarding whether to reopen a resource home. The Division Director or designee will make the final decision regarding the request.

PROCEDURE VII-F1: Reopening a ~~Foster-Resource~~ Home ~~That Has Been Closed Less Than One Year~~

~~012/20061/2022111~~

For former ~~resourcefoster~~ homes that have been closed ~~less than a year~~ and express interest in reopening, the Resource Worker ~~shall~~will:

- A. Complete new background checks (i.e., Arkansas Child Maltreatment Central Registry Check, applicable out of state child maltreatment checks if the applicant has lived or worked in another state outside of Arkansas in the last five (5) years, ~~Arkansas Adult Maltreatment Central Registry Check,~~ Arkansas State Police Record Check, FBI

Background Check, Vehicle Safety Checks) on all appropriate members of the household regardless of whether previous background checks are still current.

B. Conduct a reevaluation of the prospective home as an annual reevaluation of any standing ~~resourcefoster~~ home would be completed to determine if the prospective ~~resourcefoster~~ home would ~~be~~ still be an appropriate placement for a child in care, based on the following:

- 1) Date and reasons for closure.
- 2) Motivation to re-open.
- 3) Changes in circumstance since last closure.
- 4) Updated in home consultation report.
- 5) Recommendations.
- 6) Completed background check results.
- 7) Original home study.
- 8) Home study updates completed prior to closure of the resource home.

C. Submit a reconsideration to reopen request to the Resource Family Review Committee via the Foster Care Manager for any resource home that was previously closed and has any history of child maltreatment investigations.

D. For resource homes closed two (2) years or less, in addition to the steps above:

- 1) Collect documentation of fifteen (15) hours of continuing education training completed.

E. For resource homes closed more than two (2) years, complete the steps above with the exception collecting documentation of fifteen (15) hours of continuing education training completed and:

- 1) ~~Submit a recommendation to complete pre-service training again; or~~

1)

- 2) Submit a waiver request packet to exempt applicant from pre-service training to include:

a) ~~Parenting experiences since resource home closure~~

a) ~~;~~ and

b) Training participated in related to trauma, behavior issues, child development, parenting, etc.

B.F. Notify resource parent of determination and any additional requirements to be completed prior to the resource home re-opening, such as CPR/First Aid, current physical report, current proof of insurance, etc.

**The exception to this requirement is for a family who is eligible for the streamlined adoption process per Arkansas Code section: 9-9-701. A family is eligible for the streamlined adoption*

process if the family has adopted a child from the Department and then chooses to adopt another child from the Department and DHS selects the family to be the adoptive parents of a child in DHS custody. An adoptive family is not eligible for the streamlined adoption process if more than five (5) years have passed since the adoptive family finalized the initial adoption. If a family qualifies for the streamlined adoption process or if there are questions regarding a family's eligibility for the streamlined adoption process, please consult with the local Office of Chief Counsel (OCC) attorney, for additional information and next steps.

~~PROCEDURE VII-F2: Reopening a Foster Home That Has Been Closed More Than One Year but Less Than Two Years~~

08/2011

~~For former foster homes that have been closed for more than one year but less than two years and express interest in reopening, the Resource Worker shall:~~

~~Follow the process outlined in POLICY VII-C: FOSTER HOME ASSESSMENT PROCESS and Procedures VII-C1: Background Check Processing, VII-C2: In-Home Consultation Visit, VII-C5: Home Study, and VII-6: Final Approval of Foster Homes.~~

~~Ensure that the foster parents have earned 15 hours of continuing education for the year that their home was closed. Time spent during the In-Home Consultation Visit and updating foster parents on new DCFS policy may be counted toward the 15 continuing education hours. Document number of hours spent on the In-Home Consultation Visit and policy updates on the CFS-446: In-Home Consultation Visit Report.~~

~~If, based on the Resource Worker's home assessment, the family does not need to complete pre-service training, inform the family that while they are not required to attend pre-service training, they have the option to do so.~~

~~If the family elects to attend pre-service training, follow the process outlined in Procedures VII-C3: Initiation of Pre-Service Training and VII-C4: Pre-Service Training.~~

~~PROCEDURE VII-F3: Reopening a Foster Home That Has Been Closed for More Than Two Years~~

08/2011

~~For former foster homes that have been closed for more than two years and express interest in reopening, the Resource Worker shall:~~

~~Follow all policies and procedures outlined in POLICY VII: DEVELOPMENT OF FOSTER HOMES. Pre-service training is required for all former foster homes that have been closed for more than two years.~~

POLICY VII-G: ALTERNATE CARE FOR CHILDREN IN OUT-OF-HH HOME PLACEMENT

Alternate care for children in out-of-home placement may be used to ~~assist provide assistance to~~ foster-resource parents when circumstances requiring supervision by an appropriate adult other than the foster-resource parents exist. The Division also promotes the use of certain types of alternate care (e.g., normal age appropriate activities, interaction with a Foster-Resource Family Support System) among children and youth ~~as a way~~ to foster normalcy in the lives of children and youth in out-of-home placements.

There are five (5) categories of alternate care:

- A. Normal Age-Appropriate Activities – Children in all out-of-home placement types will be encouraged to participate in extracurricular, enrichment, cultural, ~~and/or~~ social activities that are age- and developmentally-appropriate for a ~~particular~~ child. Age- and developmentally appropriate activities are those that are generally accepted as suitable for children of the same chronological age and that are determined to be developmentally-appropriate for a child, based his or her cognitive, emotional, physical, and behavioral capacities. Examples of normal age- and developmentally appropriate activities include, but are not limited to, overnight visits with friends, school field trips, school sports or other sport leagues, faith-based activities, and short-term summer camps.

Foster-Resource parents, contract placement providers, and any private provider with whom the Division maintains a Memorandum of Understanding (MOU) will uphold the reasonable and prudent parent standard in regards to children participating in age- and developmentally appropriate activities. The reasonable and prudent parent standard requires foster-resource parents and other out-of-home placement providers to exercise careful and sensible consideration when determining whether an activity for a particular child will not only encourage the emotional and developmental growth of the child, but also maintain the health, safety, and best interests of the child.

-The resource family or authorized official of a contract placement provider will:

- 1) Use the reasonable and prudent parent standard in determining whether to give permission for a child living in an out-of-home placement to participate in extracurricular, enrichment, cultural, or social normal age-appropriate activities by considering:
 - a) The child's chronological age, maturity level, physical and behavioral capacities, and cognitive and emotional developmental levels;
 - b) The potential risk factors and the appropriateness of the activity;
 - c) The best interest of the child, based on information known by the caregiver;

- d) The importance of encouraging the child's emotional and developmental growth;
- e) The importance of providing the child with the most family-like living experience possible; and,
- f) The behavioral history of the child and the child's ability to safely participate in the proposed activity.

Resource parents are responsible for monitoring extra-curricular activities to ensure a foster child does not become overwhelmed with too many activities. Children must have ample time in the resource home for relaxation, completion of daily household activities, completion of homework, and bonding with the resource family.

All contract placement providers as well as any private provider with whom the Division maintains an MOU will establish an on-site official who is authorized to apply the reasonable and prudent parent standard to ensure appropriate caregiver liability when approving an activity for a child in an out-of-home placement.

A caregiver is not liable for harm caused to a child who participates in an activity approved by the caregiver, provided the caregiver has acted in accordance with the reasonable and prudent parent standard. This paragraph may not be interpreted as removing or limiting any existing liability protection afforded by law.

The Division will provide information and skill-based training to ~~foster~~-resource parents, contract placement providers, and private providers with whom the Division maintains an MOU regarding how to apply the reasonable and prudent parent standard for the participation of a child in age- and developmentally-appropriate activities. This training will include sharing knowledge and skill-based applications relating to the developmental stages of the cognitive, emotional, physical, and behavioral capacities of a child.

~~Foster-Resource~~ parents, contract placement providers, and private providers will notify the child's FSW if the child will spend more than twenty-four (24) continuous hours outside the approved placement when participating in said activities.

- B. Child Care – Child care may be routinely provided as a part of an out-of-home placement case. Child-care providers must be on the voucher system and licensed by ~~t~~^{the} Division of Child Care and Early Childhood Education (DCCECE) or on the Voluntary Child Care

Registry. Every attempt should be made to place children in care in a quality child care setting.

Child care for children may also be provided as a part of an out-of-home placement case to provide assistance to foster parents for non-routine circumstances that relate to the retention ~~and~~/or support of the foster-resource home such as foster-resource parent training. Child care provided for such purposes may be reimbursed by the Division.

- C. Babysitting – Babysitters may be used to provide occasional care for children in the foster resource home for no more than eight (8) continuous hours at one (1) time. Foster Resource parents ~~shall~~will exercise careful consideration when evaluating the character and competence of any individual asked to babysit. ~~Foster-Resource~~ parents may reimburse the babysitter if they choose to do so. The Division will not reimburse for babysitting services. Babysitters ~~shall~~will not transport children. Background checks are not required.
- D. ~~Foster-Resource~~ Family Support System – The ~~Foster-Resource~~ Family Support System (RFFSS) may be comprised of up to three (3) other households identified by the foster resource family. RFFSS members may provide care for children when the foster-resource parent is unable to do so on ~~the occasion of~~ anticipated or unanticipated events.

~~Foster-Resource~~ parents ~~shall~~will exercise careful consideration when evaluating the character and competence of any household asked to serve as an RFFSS member. RFFSS members must be at least twenty-one (21) years of age. There is not a standard maximum age limit for RFFSS members, but RFFSS members must be physically, mentally, and emotionally capable of caring for children for up to seventy-two (72) hours. Adoptive parents may not be RFFSS members unless they are related to the resource parent (i.e., parent or sibling to the resource parent). ~~Foster-Resource~~ parents may reimburse an RFFSS member if they choose to do so. The Division will not reimburse RFFSS members.

Members of a ~~Foster-Resource~~ Family Support System may transport children and care for children in the foster-resource home or in the home of the RFFSS member. However, an RFFSS member ~~shall~~will not provide care for more than seventy-two (72) continuous hours at one (1) -time regardless of the location in which care is provided ~~and~~/or regardless of which RFFSS member is providing care. However, for extenuating circumstances only, the Area Director may approve for a child to stay with an RFFSS member for more than seventy-two (72) hours, but no more than seven (7) days. To go beyond the seventy-two (72) hour timeframe requirement, a written request must be

submitted to the Area Director explaining the reasons for the extension request. The Area Director must approve or deny the request in writing. No extensions may be granted for FFSS care of a child. The FSW ~~shall~~will be notified when an RFSS member will provide care for more than twenty-four (24) continuous hours. RFSS members taking children out-of-state for overnight trips are prohibited.

The ~~Foster-Resource~~ Family Support System ~~shall~~will not be used in place of respite care or as an out-of-home placement. The number of children placed in an RFSS member household must meet all Minimum Licensing and DCFS Policy requirements.

All prospective RFSS members must be cleared through the Child Maltreatment Central Registry and a State Police Criminal Record Check. The Division will request any other state where the prospective RFSS member has resided in the preceding five (5) years to check its child abuse and neglect registry. The Division will provide documentation in the case record that the Child Maltreatment Central Registry and State Criminal Record Checks were received on the prospective RFSS member.

~~Documentation of at least one (1) visual inspection of the home for evaluation purposes is required of all prospective FFSS members.~~

The Division will check the ~~Traffic Violations Record~~driving record (violation points) for each potential RFSS member. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points an RFSS member ~~foster-resource~~ parent may be allowed.

Proposed RFSS members' background checks will be processed once the primary resource home with which the RFSS members are associated is approved and opened.

Documentation of at least one (1) visual inspection of the home for evaluation purposes is required of all prospective ~~FFSS~~ members.

- E. Respite Care – When a ~~Foster-Resource~~ Family Support System member is not available to provide needed care on a short-term ~~basis~~basis; respite care may be utilized in order to temporarily relieve the foster family of the ongoing responsibilities and stresses of care. There are two (2) types of respite care:

1) Informal Respite – An approved DCFS ~~foster-resource~~ home that can provide temporary care when the ~~Foster-Resource~~ Family Support System is unable to assist

or for situations- in which children will be outside of the ~~foster-resource~~ home for more than seventy-two (72) continuous hours. An informal respite home may provide care for no more than seven (7) continuous days at one (1) time. Periods of respite care in an informal respite home lasting longer than seven (7) -consecutive days require approval from the Area Director or designee.

If an Area Director approved extension exceeds fourteen (14) continuous days, the regular ~~foster-resource~~ parents' board payment will be affected. If the child has stayed in any combination of ~~RFSS~~ or informal respite homes (i.e., outside of the regular ~~foster-resource~~ home placement, the total amount of days within those alternate care types cannot exceed fourteen (14) -consecutive days as board payment may be affected).

A stay in an informal respite home must be documented in ~~CHRIS~~the Division information system, but not as a separate/new placement. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

~~Foster-Resource~~ parents may reimburse an informal respite provider if they choose to do so. The Division will not reimburse an informal respite provider. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

2) Formal Respite – A DCFS contract provider who supplies short-term respite care particularly when a child's current placement is at risk of disruption ~~and/or~~ respite is needed to prevent a residential, acute psychiatric, or similar placement. Formal respite care should be provided in accordance with a family-driven, youth-guided respite plan and in coordination with a child's behavioral health treatment plan (if applicable).

Formal respite care ~~shall~~will be provided for no more than seven (7) days per three (3) -month period. A stay with a Formal Respite Care provider must be documented in ~~CHRIS~~the Division information system, but not as a separate/new placement (provided it does not exceed the more than seven (7) days per ~~3-month~~three (3) month period).

Longer periods of formal respite care require approval from the ~~Prevention & Support Manager~~Area Director.- If an approved extension exceeds fourteen (14) consecutive days, the regular foster parents' board payment will be affected. If the child has stayed

in any combination of ~~RFFSS~~ or informal respite homes before a formal respite stay, the total amount of days within those alternate care types (i.e., outside the regular ~~foster resource~~ home placement) cannot exceed fourteen (14) consecutive days as board payment may be affected.

~~PROCEDURE VII-G1: Normal Age Appropriate Activities~~

~~0120/2022015~~

~~The foster resource family or authorized official of a contract placement provider will:~~

- ~~1) Use the reasonable and prudent parent standard in determining whether to give permission for a child living in an out-of-home placement to participate in extracurricular, enrichment, cultural, or social normal age appropriate activities by considering:~~
 - ~~1) The child's chronological age, maturity level, physical and behavioral capacities, and cognitive and emotional developmental levels;~~
 - ~~2) The potential risk factors and the appropriateness of the activity;~~
 - ~~3) The best interest of the child, based on information known by the caregiver;~~
 - ~~4) The importance of encouraging the child's emotional and developmental growth;~~
 - ~~5) The importance of providing the child with the most family like living experience possible; and,~~
 - ~~6) The behavioral history of the child and the child's ability to safely participate in the proposed activity.~~
- ~~2) Notify the Family Service Worker if the child will participate in an age appropriate activity that will cause the child to be outside of the approved placement for more than twenty-four (24) continuous hours. The foster resource family will provide as much advance notice as possible, particularly for normal age appropriate activities that require the child to be outside the approved placement for several days such as summer camps.~~
- ~~3) Provide the Family Service Worker with:~~
 - ~~1) Activity location address;~~
 - ~~2) Contact name at identified location;~~
 - ~~3) Contact phone number;~~
 - ~~4) Anticipated dates for which the child will stay at this location; and~~
 - ~~5) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).~~

~~The Family Service Worker will:~~

- ~~A. Assess the appropriateness of the proposed activity when notified by the foster resource family or the authorized official of a contract placement provider that the child in care~~

~~will be outside the approved placement for more than twenty four (24) continuous hours in order to participate in said activity.~~

~~1) If the proposed activity is determined to be appropriate:~~

~~a) Select the Alternate Care button on the Foster Children Screen in CHRISthe Division information system.~~

~~b) Complete the Alternate Care Screen.~~

~~i. If the child is already participating in the activity, this screen should be completed immediately.~~

~~ii. If the child has not yet begun participating in the activity, this screen should be completed prior to the start of the activity.~~

~~c) Enter the actual end date of the activity on the Alternate Care Screen when the foster resource family or other placement provider confirms with the Family Service Worker that the child has returned to the foster resource home.~~

~~2) If there are concerns regarding the appropriateness of the proposed activity:~~

~~a) Notify the FSW Supervisor.~~

~~b) If the FSW Supervisor and Family Service Worker determine that the proposed activity is inappropriate, notify the foster resource family or authorized official of a contract placement provider that the child shallwill not participate in the said activity.~~

~~c) Document notification in the Contact Screen.~~

~~The FSW Supervisor will:~~

~~A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker to determine if proposed activity is appropriate.~~

~~Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the FSW Supervisor.~~

~~PROCEDURE VII-G2: Babysitting~~

~~201/2022~~

~~The Family Service Worker will:~~

- ~~A. Notify the County Supervisor if he or she has cause to believe that babysitting services are being used inappropriately, excessively, and/or if the Family Service Worker has concerns about the character or competence of the individual(s) providing baby-sitting services.~~
- ~~B. Call a meeting with the foster resource family, if deemed appropriate by the Supervisor, to clarify the appropriate use of babysitting services.~~
- ~~C. Document the meeting with the foster resource family in the Contacts screen.~~

~~The County Supervisor will:~~

- ~~A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker, to determine if a meeting with the foster resource family or another action is needed to ensure the appropriate use of babysitting services.~~
- ~~B. Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the Supervisor.~~

~~PROCEDURE VII-G3: Child Care for Children in Temporary Out-of-Home Placement~~

~~12/2001/20221~~

~~For routine child care services, the Family Service Worker will:~~

- ~~A. Complete the Child Care Referral Request Screen.~~
- ~~B. Authorize services for a maximum of three (3) months.~~
- ~~C. Make verbal requests to the County Supervisor for approval in an emergency, followed by a completed automated request within five (5) business working days.~~
- ~~D. Initiate renewals no later than the first (1st) day of the last month of the eligibility period.~~
- ~~E. Notify the child care center in writing ten (10) business days prior to last day the child will attend if the child will no longer be attending.~~
- ~~F. Complete a new Child Care Referral Request if the child leaves Foster Care and enters Protective Services and child care is to continue.~~
- ~~G. Complete a new Child Care Referral Request if the child has been part of a Protective Services case and enters Foster Care and Child Care is to continue.~~

~~If the child leaves the foster care or protective services program, CHRIS the Division information system will automatically notify the child care system.~~

~~The County Supervisor will:~~

- ~~— Approve the Child Care Referral Request, which will then be sent automatically to Central Office for review and approval.~~

~~For non-routine child care services (e.g. when the foster resource parents are obtaining foster resource parent training), the Family Service Worker will:~~

- ~~A. Assist foster resource parents into obtaining childcare. This transportation is payable via DHS-1914. All other requests must receive prior approval from the Area Director.~~

~~PROCEDURE VII-G4: Foster Resource Family Support System for Children in Out-of-Home Placement~~

~~12/2001/20221~~

~~The Family Resource Worker will:~~

- ~~A. Per Procedure VII-C1, collect and process Review the CFS-419: Foster Resource Family Support System Information provided by the Centralized Inquiry Unit and provide (one (1) per FFSS RFSS member household), background check forms and for each appropriate member of each FFSS RFSS family as follows:~~
 - ~~1) CFS-316: Request for Child Maltreatment Central Registry Check (as generated by the Arkansas Child Maltreatment Central Registry website);~~
 - ~~2) CFS-342: State Police Criminal Record Check;~~
 - ~~3) CFS-593: Arkansas State Vehicle Safety Program (ASVSP);~~
 - ~~4) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business;~~
~~and,~~
 - ~~5) VSP-2: Authorization to Obtain Traffic Violation Record;~~
- ~~B. Complete and document visual inspection of the RFSS home.~~
- ~~C. Select the Support System Button on the Provider Screen.~~
- ~~D. Complete the Foster Resource Family Support System Individual Member Tab and Required Checks Tab for all appropriate members of the Foster Resource Family Support System.~~
- ~~E. Update this information as necessary following each annual reevaluation.~~

~~The Foster Resource Family will:~~

- ~~A. Notify the Family Service Worker each time the child in care will stay with a member of the Foster Resource Family Support System for more than twenty-four (24) continuous hours and indicate:~~
- ~~1) With which member of the Foster Resource Family Support System the child will be staying; and,~~
 - ~~2) The dates that the child will be with the identified member of the Foster Resource Family Support System; and,~~
 - ~~3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).~~

~~The child's Family Service Worker will:~~

- ~~A. Select the Alternate Care Button on the child's current placement screen each time a child stays with a member of the Foster Resource Family Support System for more the twenty-four (24) continuous hours.~~
- ~~B. Complete the Alternate Care Screen.~~
- ~~— Enter actual end date of stay with FRFSS on the Alternate Care screen when the child returns to the regular foster resource family.~~
- ~~—~~

~~PROCEDURE VII G5: Respite for Children in Out of Home Placement~~

~~01121/20220~~

~~The foster resource family will:~~

- ~~A. Notify the Family Service Worker in advance of each time the child in care will stay with an informal respite home and indicate:~~
- ~~1) With which informal respite home the child will stay; and,~~
 - ~~2) The dates that the child will be with the identified informal respite home; and,~~
 - ~~3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).~~
- ~~B. Request approval from the Family Service Worker for informal respite home stays longer than seven (7) consecutive days.~~
- ~~C. Notify the Family Service Worker immediately if the child needs is in need of formal respite care in order to prevent a child's current placement from disrupting and/or to prevent a residential, Division of Youth Services (DYS), juvenile detention center, acute psychiatric, or similar placement.~~

~~The Family Service Worker will:~~

~~A. For informal respite care:~~

- ~~1) Select the Alternate Care Button on the Foster Children Screen each time a child stays with an informal respite home for more than twenty four (24) continuous hours.~~
- ~~2) Complete the Alternate Care Screen.~~
- ~~3) Update the Alternate Care Screen with the actual end date when the child returns to the regular foster resource family.~~
- ~~4) Request extension approval for stays in an informal respite home longer than seven (7) consecutive days from the Area Director through CHRIS the Division information system.~~
- ~~5) Notify the foster resource family as to whether a request for the child's placement in an informal respite home for longer than seven (7) consecutive days is approved or denied.~~
- ~~6) Complete Alternate Care Screen accordingly.~~

~~B. For formal respite care:~~

- ~~1) Contact the financial coordinator to request formal respite placement for up to seven (7) days.~~
- ~~2) If a formal respite placement is authorized and available, make necessary arrangements with the formal respite care provider (however, please note the referral form for the formal respite provider must be signed by a DCFS County Supervisor, Financial Coordinator, Area Director, or Central Office Staff) and the regular foster resource family.~~
- ~~3) Select the Alternate Care Button on the Foster Children Screen each time a child stays with a formal respite placement.~~
- ~~4) Complete the Alternate Care Screen.~~
- ~~5) Update the Alternate Care Screen with the actual end date when the child returns to the regular foster resource family.~~
- ~~6) If an extension is needed beyond seven (7) days, consult with Area Director as to whether it is in the child's best interest to request an extended stay in formal respite care from the Prevention & Support Manager the designated representative in Central Office.~~
- ~~7) If the request for an extended stay in formal respite care is deemed in the child's best interest, request extension approval from Prevention & Support Manager the designated representative in Central Office.~~
- ~~8) Notify the foster resource family and financial coordinator as to whether a request for the child's placement in a formal respite placement, for longer than seven (7) days, is approved or denied.~~

~~The Financial Coordinator or designee will:~~

- ~~A. Contact the appropriate provider to assess formal respite availability for up to seven (7) days.~~
- ~~B. If formal respite is available, notify the Family Service Worker and encumber in PIE/CFM.~~
- ~~C. If formal respite is needed for more than seven (7) days, encumber in PIE/CFM once approval from the Prevention & Support Manager in Central Office is granted.~~

Mark-UP

~~The Area Director or designee will:~~

- ~~A. Consult with the Family Service Worker, as to whether an extended stay request in an informal respite home (more than seven (7) consecutive days at one (1) time) or formal respite placement (more than seven (7) consecutive days per three (3) month period) is in the child's best interest.~~

~~The Prevention & SupportSpecialized Placement Unit Program Manager will:~~

- ~~A. Consult with the Family Service Worker and Area Director as to whether formal respite care is appropriate for more than seven (7) days.~~
- ~~B. Approve or deny accordingly.~~
- ~~C. Notify the Family Service Worker or the Financial Coordinator of the decision to approve or deny.~~

APPENDIX 3: RESOURCE HOME RECORDS

~~01/2013~~06/2022

Special divided folders will be used for the case records of foster-resource homes. When a foster-resource home is approved, the resource ~~foster~~-home record should include the items listed below. All documents should be filed in chronological order with the most current on top.

Front left:

- Approval or ~~Denial Letter~~denial letter;
- CFS-475-A: Initial Approval Checklist for Resource Home Record_i;
- Verification of marriage ~~and~~/or divorce, if applicable_i;
- All ~~Records Checks~~record checks_i;
- Results of the CFS-316: Child Maltreatment Central Registry Check for each applicable household member_i all information received_i and_i (in case of a report of violations)_i a summary of the face-to-face discussion, determination, and reasons for the determinations_i;
- ~~Results of the APS-0001: Authorization for Adult Maltreatment Central Registry check for each applicable household member, all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determinations~~
- CFS-341: Certification of Absence of Criminal Record, if children ~~age of ages ten~~ (10) through seventeen (17) years of age reside in the household_i;
- Results of the CFS-342: State Police Criminal Record Check for each applicable household member_i all information received_i and_i (in case of a report of violations)_i a summary of the face-to-face discussion, determination, and reasons for the determination:
 - Results of the ~~FBI~~Federal Bureau of Investigation Criminal Background Check for each applicable household member_i all information received_i and_i (in case of a report of violations)_i a summary of the face-to-face discussion, determination, and reasons for the determinations_i; and

- Results of the Arkansas State Vehicle Safety Program ~~ASVSP~~ check for each ~~foster-resource~~ parent and applicable teenage driver:
 - Copy of driver's license for each applicable driver; and
 - Documentation of current auto insurance.
- CFS-446: In-Home Consultation Visit Report;
- CFS-363: ~~Foster/Adoptive~~ Resource Applicant Smoking Certification;
- CFS-404: General Medical Report;
- Current immunization records for all children in the home;
- Documentation of current rabies vaccinations for all household pets;
- CFS-409: ~~Foster/Adoptive~~ Resource Family Preference Checklist;
- CFS-455: Request or /Consent for Health Department Services, including to include Alternate Compliance of Water Supply Agreement, when appropriate;
- ~~CFS-480: Alternate Compliance of Water Supply Agreement, when appropriate~~
- CFS-484: Landlord Notification of Potential Tenant Foster Care Services, when appropriate;
- CFS-448: Privacy and Use of Surveillance in Resource Homes;
- Written approval from a ~~Fire~~ Department for an approved alternate escape route, when appropriate;
- Current floor plan;
- Documentation of homeowner's or renter's insurance and general liability insurance;
- Written approval from the owner of the home that the applicants may care for children in foster care, when appropriate;
- Three (3) completed, positive Structured Analysis Family Evaluation (SAFE) ~~SAFE~~ reference letters;

- SAFE Home Study Final Report and supporting documents, including but not limited to (e.g., (for example, SAFE Questionnaires I & II, or Psychosocial Inventory);
- Alternative ~~e~~Compliance ~~and~~/or policy waiver approval, if applicable;
- Current certification in Cardiopulmonary Resuscitation (CPR)-CPR and Standard First Aid;
- Summary with r~~R~~ecommendations;
- CFS-462: Initial ~~Foster~~Resource Home Agreement;
- CFS-462-A: ~~Foster~~Resource Home Agreement Addendum on each child currently placed in the home;
- CFS-474: Provisional ~~Foster~~Resource Home Orientation Checklist, (for ~~provisionals~~provisional resource homes only);
- CFS-452: Provisional ~~Foster~~Resource Home Verification, (for provisionals only) (for provisional resource homes only); and
- CFS-445: Agency Approved Tornado Plan.

Front Right:

- Placement history;

Center Left:

- CFS-475-B: Quarterly Monitoring Checklist for Resource Home; and
- a~~A~~ny documentation gathered during the quarterly visit;

Center Right:

- Letter of Notification of Disposition of Reevaluation or of Closure;
- CFS-475-C: Reevaluation Checklist for ~~Foster/Pre-Adoptive~~Resource Home;

- Any documentation gathered during the reevaluation visit, ~~including but not limited to (e.g., (for example,~~ updated auto insurance, ~~or an~~ updated CPR certificate)~~); -etc.)~~
- CFS-451: ~~Foster Resource~~ Parent Reevaluation;
- ~~Structured Analysis Family Evaluation (SAFE)~~ ~~SAFE~~ Update Report;
- Documentation of fifteen (15) hours of continuing education;
- Documentation of quarterly emergency evacuation drills;
- CFS-475-G: Checklist for ~~Foster Resource~~ Home Closure, when appropriate; and
- Reevaluation Summary or Closure Summary.

Back Left:

- CFS-475-D: Transfer of a ~~Foster Resource~~ Home to Another County, when appropriate;
- CFS-475-E: Complaint Against ~~Foster Resource~~ Family Other Than Maltreatment, when appropriate; and
- CFS-475-F: True Reports of Child Maltreatment Against ~~Foster Resource~~ Family Members, when appropriate.

Back Right:

- CFS-419: ~~Foster Resource~~ Family Support System Information; and
- Current results of all applicable background checks for Resource Family Support System ~~FFSS~~ members.

APPENDIX 4: CASE RECORD ORDER ~~FOR~~ {OUT-OF-HOME PLACEMENT CASES}

~~0603/2022~~18

~~The~~The Family Service Worker shall maintain and organize the current case record on every child in foster care in ~~his~~their caseload. -Policy I-E: Official Record Keeping & Access to Official Records, states that a hard copy file of case information will be maintained for data ~~not in~~outside of the Children's Reporting and Information System (CHRIS) ~~CHRIS~~. -Hard copy files will be created, if ~~necessary~~necessary, for case review.- The following is the case record order ~~to~~for maintaining ~~maintain~~ files on information ~~not in~~outside of CHRIS.- This case record order will also be used when hard copy files are created for case review.

Front Left: —Legal Section

- Original Birth Certificate;
- Social Security Card SS-5;
- Affidavit (including protection plan and Team Decision Making (TDM), if applicable);
- Petitions;
- Emergency Order;
- Summons;
- Warning Orders;
- Adjudication Order;
- ~~Six (6) Month~~Six-Month Review Orders;
- Order Terminating Parental Rights and Granting to the Department of Human Services (DHS) the Power to Consent to Adoption;
- Court Reports (including attachments) for all hearings;
- Photograph of Child printed from the Children's Reporting and Information System (CHRIS); and
- Blue Face Sheet.

Order the Terminating Parental Rights (if applicable); next to the top, ~~then followed by the~~ most current court order, followed by all legal documents related to ~~that the court order; for example, (i.e., (including without limitations: petitions, warning orders, and/or summons), etc.)~~. Behind each court order, file all legal documents and court reports related to the order. Any additional information included is to be filed in chronological order (with the most current on top) behind the court reports. Other information behind this is filed completed in chronological order with the most current on top. Behind each court order, file all legal documents and court reports related to the order. A blueBlue face sheet should be on top of all records in this section and be readily visible when the file is open.

Front Right: —Child and Adolescent Needs and Strengths (CANS) ~~CANS/~~ or FAST, Family Advocacy and Support Tool (FAST) Case Plans

- Any Family Strengths, Needs, and Risk Assessment (FSNRA) or Case Plans prior to CANS/FAST;
- ~~CANS/FAST signed by~~ Signatures of family members, stakeholders, and parties related to the case;
- CFS-6010: Case Plan signed by family members, stakeholders, and parties to the case; and
- Transitional Plan, ~~{if applicable}~~.

Order: filed in chronological order with the most current on top.

Center Left: —Contacts

- Documentation of Efforts to Locate Family from ~~{i.e. Lexis Nexis search results}~~;
- Handwritten Contact Sheets or ~~{home visiting forms}~~ signed by family members who were present during the visit;
- Handwritten Notes pertaining to the case, ~~{including phone messages}~~; and
- Printed CHRIS Contacts (printed for IV-E Review only).

Order: File in chronological order with the most current on top.

Center Right: -Correspondence

- CFS-590: Invitation to Family Centered Meeting;
- Email verification of distribution of 590, CANS/FAST, Case Plans and Court Reports;i
- Emails and Faxes;
- Incident Reports (use ~~HRIS~~ the Incident Reporting Information System link on DHS Share);
- Letters or ~~/~~ Memos; and
- CFS-4000 and/or DHS-81: Release of Information.

Order: Releases of Information should be grouped on the bottom.- Other documents should be filed in chronological order with most current on top.

Back Left: —Medical and Educational

- CFS-352: Medical, Dental, Vision, Hearing, and Psychological Episodic Form;
- ~~CFS-353: Past Medical History Records Requested (Release of Information)~~
- CFS-366: Health Screening or ~~/~~ Initial Physical;
- ~~CFS-368: Child Health Services Plan~~
- CFS-456: Birth Family Background;

- Comprehensive Assessment Report from the University of Arkansas for Medical Sciences (UAMS), or Programs of All-Inclusive Care for the Elderly (PACE);
- Drug Screens;
- CFS-364: Medication Logs;
- Placement Reports ~~(TFC)~~ (such as Therapeutic Foster Care (TFC), Group Home, or Residential Care);
- Provider Reports (such as Parenting, and/or Anger Management);
- Psychological Evaluations; and
- School Records, (such as including without limitation (R)report Cards, Individualized Education Program (IEP)EP, Educational Testing Reports, and/or Early Intervention Assessments, etc.)).

Order: Child's medical record on top; with the others intermixed with the most current on top.

Note: Educational records and reports for each age-appropriate child, not just ~~those~~ children with special educational needs, shall be filed in the foster child's case record. Reports and records include, without limitation: report cards, and Individual Education Plans (IEPs), etc.

Back Right: —Forms and Financial

- CFS Numbered Forms (without specification for other filing instructions);
- CFS-334: Authorization for Billing (only for payments from child's trust account);
- Encumbrance and Service Referral Paperwork;
- Medicaid Application;
- Medical Bills;
- Medical Passport;
- Social Security Card Application; and
- Supervisory Review Forms.

Order: Intermixed with most current on top.

APPENDIX 7: ALTERNATIVE COMPLIANCE AND POLICY WAIVER PROTOCOL

06/202208/2013

“Policy Waiver” is defined as a request to deviate from the Division of Children and Family Services (DCFS) policies and procedures. The DCFS Director or designee approves all policy waiver requests. The following circumstances require a policy waiver:

A. Any misdemeanor convictions, except for minor traffic violations;

B. Driving Under the Influence or Driving While Intoxicated;

—Any issues that are not in compliance with

C. DCFS Policy; and,

D. Record of maltreatment:-

—However, any person found to have record of child maltreatment will not only be reviewed by the DCFS Director or designee, but the DCFS Director or designee will also notify and consult with the Child Welfare Agency Review Board, via the Division of Child Care and Early Childhood Education (DCCECE) Placement and Residential Licensing Unit Manager as its designee, regarding the policy waiver and any corrective action associated with the policy waiver.

“Alternative ComplianceAlternative Compliance” is defined as a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. -This includes, but is not limited to, without limitation regulations governing criminal background checks and convictions for prohibited offenses.

~~“Policy Waiver” is defined as a request to deviate from the letter of the DCFS Policy, and procedures or standards. The DCFS Director approves all policy waiver requests.~~

Traffic violations, other than Driving Under the Influence (DUI)dui or DWIDriving While Intoxicated (DWI), do not require a policy waiver or Alternative ComplianceAlternative Compliance, as they are dealt with through the vehicle safety program. Driving Under the Influence (DUI)DUI and Driving While Intoxicated (DWI)DWI are violations that require a Policy Waiver.

The ~~procedures—standard protocol~~ for requesting a ~~Ppolicy~~ wWaiver or an Alternative ComplianceAlternative Compliance ~~isare~~ the same, up until the point when the request is given to the ~~Assistant DCFS Director of Community Servicesor designee~~.

The ~~procedures~~ for standard policy waiver and Alternative Compliance requests are as follows:

The Family Service Worker will:

A. ~~D~~The FSW will determine if a ~~p~~Policy ~~w~~Waiver or Alternative Compliance ~~Alternative Compliance should will~~ be requested, based on their professional judgment. Issues to take into consideration on criminal convictions ~~and record of maltreatment would~~ include:

- 1) The nature and severity of the crime or maltreatment;
- 2) Consequences of the crime or maltreatment;
- 3) Frequency and duration of the crime or maltreatment and when the maltreatment occurred;
- 4) Relationship between the crime or maltreatment and the health, safety, and welfare of any individual; and,
- 5) For maltreatment offenses listed on the Child Maltreatment Central Registry, whether the offender is eligible to request removal from the Child Maltreatment Central Registry Review Team.

~~A. the time frame and circumstances of the offense. When an Alternative Compliance is requested for an excluded criminal offense, the police report and any other reports regarding any criminal charges or convictions must be attached as documentation.~~

B. If approval is recommended by the Family Service Worker Supervisor or designee, the Family Service Worker FSW will request a ~~P~~policy ~~w~~Waiver or an Alternative Compliance ~~Alternative Compliance~~ using the CFS-509-B: Request ~~f~~For Alternative Compliance ~~Alternative Compliance~~ or ~~Policy-policy Waiver-waiver~~, and will attach all appropriate supporting documentation, as applicable:

- 1) Three (3) personal references;
- 2) CFS-446: In-Home Consultation Visit Report;
- 3) Current home study, if one (1) has been completed;
- 4) Copy of the Child Maltreatment Central Registry Check, State Police Criminal Record Check, and/or FBI-Federal Bureau of Investigation Background Check resulting in a hit; and,
- 5) The police report and any other reports regarding any criminal charges or convictions must also be attached as documentation when an Alternative Compliance is requested for an excluded criminal offense.

The Family Service Worker Supervisor or designee will:

~~A. Within (10) business days of receipt of the request, the Supervisor will d~~A. Within (10) business days of receipt of the request, the Supervisor will ddetermine if the requested ~~p~~Policy ~~w~~Waiver or Alternative Compliance ~~Alternative Compliance~~ is appropriate for approval within:

- 1) Five (5) business days of receipt of the request for traditional applicants; or
- 2) Three (3) business days for relatives and fictive kin.

~~Issues to take into consideration would include, as applicable the time frame and circumstances of the offense:-~~

- a) The nature and severity of the crime or maltreatment;
- b) Consequences of the crime or maltreatment;
- c) Frequency and duration of the crime or maltreatment and when the maltreatment occurred;
- d) Relationship between the crime or maltreatment and the health, safety, and welfare of any individual such as the:

- i. Age and vulnerability of the crime victim;
 - ii. Harm suffered by the victim; and,
 - iii. Similarity between the victim and the person served by a child welfare agency;
 - e) Time elapsed without a repeat of the same or similar event;
 - f) Documentation of successful completion of training or rehabilitation related to the incident; and
 - a)g) Any other information that relates to the applicant's ability to care for children or that is deemed relevant.
- A. ~~If approved, the Family Service Worker Supervisor or designee will send it to the Area Director or designee.~~
- B.
- C. If denied, the Family Service Worker Supervisor or designee will notify the Family Service Worker ~~FSW~~ and the family.

The Area Director or designee will:

- A. ~~Determine if the requested policy waiver or Alternative Compliance is appropriate for approval based on the considerations previously outlined in this protocol w~~Within five (5) business days of receipt of the request for traditional applicants or three (3) business days for relatives and fictive kin, the Area Director will determine if the requested Ppolicy wWaiver or Alternative Compliance Alternative Compliance is appropriate for approval based on the considerations previously outlined in this protocol. Issues to take into consideration would include the time frame and circumstances of the offense.-
- 1) If approved, the Area Director or designee will send it to the DCFS Director or designee.~~Assistant Director of Community Services~~
 - 2) If denied, the Area Director will return it to the Family Service Worker Supervisor or designee:-
 - a) ~~If denied, the Family Service Worker Supervisor will notify the Family Service Worker~~ Worker ~~FSW~~ and the family.

At this point, the procedures for requesting a policy waiver differ from the procedures for requesting an Family Service Worker alternative compliance ~~Alternative Compliance~~. ~~The Assistant Director for Community Services or designee will determine if the requested Policy Waiver or Alternative Compliance should be approved or denied.~~

Policy Waivers

When a ~~p~~Policy ~~W~~waiver has been requested, the DCFS Director or designee ~~Assistant Director of Community Services or designee~~ will, within three (3) business days of receipt of the request:

- A. Deny any inappropriate request for a ~~P~~policy ~~w~~Waiver and return it to the Area Director or designee; or,

- B. Approve an appropriate request for a ~~p~~Policy ~~W~~waiver, and send to the DCFS Director for final approval or denial.

The DCFS Director's or designee's final decision will be conveyed to the Area Director or designee for appropriate action. ~~The following require a Policy Waiver:~~

~~Any misdemeanor convictions, except for minor traffic violations
Driving under the influence (DUI) or Driving while intoxicated (DWI);~~

~~Any issues that are not in compliance with DCFS Policy;~~

~~Alternative Compliance~~Alternative Compliance

When an Alternative Compliance ~~a~~Alternative c~~Compliance~~ has been requested, the DCFS Director or designee ~~Assistant Director of Community Services or designee~~ will:

- A. Deny any inappropriate request for an Alternative Compliance ~~Alternative Compliance~~ and return it to the Area Director or designee within three (3) business days; or;
- B. Approve an appropriate request for an Alternative Compliance ~~Alternative Compliance~~ and ~~send notify it to~~ the DCFS Area Director or designee and send it to the Placement and Residential Licensing Unit Manager or designee, all within in three (3) business days.

The DCFS Director will:

- ~~A. —~~
- ~~B. Deny any inappropriate request for an Alternative Compliance and return the request to the Assistant Director of Community Services, or~~
- ~~C. Approve the request and send it to the PRLU (Placement and Residential Licensing Unit) Manager and staff.~~

The Placement and Residential Licensing Unit ~~(PRLU)~~ Manager will:

- A. Review the ~~AC~~Alternative Compliance request to ensure all required documents are in the packet;~~;~~
- B. Request any missing documentation be submitted; ~~and;~~
- C. If all required documentation is included in the Alternative Compliance~~AC~~ packet, place the Alternative Compliance~~AC~~ request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board ~~(CWARB)~~.

The Family Service Worker who made the original request for an Alternative Compliance on behalf of the resource parent applicant or resource parent will:

- A. Notify the resource parent applicant or resource parent of the Child Welfare Agency Review Board meeting at which their presence is required via CFS-510 sent by certified, restricted mail;
- B. Prepare the resource parent applicant or resource parent for what to expect at the Child Welfare Agency Review Board meeting; and;
- C. Appear with the resource parent at the Child Welfare Agency Review Board meeting to answer questions.

~~The Foster or Adoptive Parent and FSW who made the original request for an Alternative Compliance will appear before the CWARB to answer questions.~~

The ~~Child Welfare Agency Review Board~~CWARB will give final approval or denial of the request for the ~~Alternative Compliance~~Alternative Compliance.

Temporary Alternative Compliance

In an effort to expedite the placement of a child with a safe and appropriate relative or fictive kin,⁷ and reduce the amount of trauma a child experiences when entering foster care, a temporary Alternative Compliance may be granted when attempting to place a child with a relative or fictive kin on a provisional basis. A temporary Alternative Compliance may be initiated by the Family Service Worker via phone or email but must go through the chain of command receiving approval from the Family Service Worker Supervisor or designee, the Area Director or designee, and the DCFS Director or designee.

If a temporary Alternative Compliance is approved by the Division of Children and Family Services (DCFS) Director or designee, the DCFS Director or designee will then notify the Placement and Residential Licensing Unit Manager or designee of the temporary Alternative Compliance approval. The Placement and Residential Licensing Unit Manager will place the temporary Alternative Compliance request on the next scheduled Child Welfare Agency and Review Board meeting agenda for review. The Family Service Worker will invite the resource parent applicant to that Child Welfare Agency and Review Board meeting via CFS-510.

The following crimes require an ~~Alternative Compliance~~Alternative Compliance from the ~~Child Welfare Agency and Review Board~~CWARB:

- (A) Criminal attempt;_i
- (B) Criminal complicity;_i
- (C) Criminal conspiracy;_i
- (D) Criminal solicitation;_i
- (E) Assault in the first, second, or third degree;_i
- (F) Aggravated assault;_i_i
- (G) Aggravated assault on a family or household member;_i
- (H) Battery in the first, second, or third degree;_i
- (I) Breaking or entering;_i
- (J) Burglary;_i
- (K) Coercion;_i
- (L) Computer crimes against minors;_i
- (M) Contributing to the delinquency of a juvenile;_i
- (N) Contributing to the delinquency of a minor;_i_i
- (O) Criminal impersonation;_i
- (P) Criminal use of a prohibited weapon;_i

(Q) Communicating a death threat concerning a school employee or student;
(R) Domestic battery in the first, second, or third degree;
(S) Employing or consenting to the use of a child in a sexual performance;
(T) Endangering the welfare of a minor in the first or second degree;
(U) Endangering the welfare of an incompetent person in the second degree;
(V) Engaging children in sexually explicit conduct for use in visual or print media;
(W) False imprisonment in the first or second degree;
(X) Felony abuse of an endangered or impaired person;
(Y) Felony interference with a law enforcement officer;
(Z) Felony violation of the Uniform Controlled Substance Act;
(A)(A) Financial identity fraud;
(B)(B) Forgery;
(C)(C) Incest;
(D)(D) Interference with court ordered custody;
(E)(E) Interference with visitation;
(F)(F) Introduction of controlled substance into the body of another person;
(G)(G) Manslaughter;
(H)(H) Negligent homicide;
(I)(I) Obscene performance at a live public show;
(J)(J) Offense of cruelty to animals;
(K)(K) Offense of aggravated cruelty to dog, cat, or horse;
(L)(L) Pandering or possessing visual or print medium depicting sexually explicit conduct involving a child;
(M)(M) Sexual solicitation;
(N)(N) Permanent detention or restraint;
(O)(O) Permitting abuse of a minor;
(P)(P) Producing, directing, or promoting a sexual performance by a child;
(Q)(Q) Promoting obscene materials;
(R)(R) Promoting obscene performance;
(S)(S) Promoting prostitution in the first, second, or third degree;
(T)(T) Prostitution;
(U)(U) Public display of obscenity;
(V)(V) Resisting arrest;
(W)(W) Robbery;
(X)(X) Aggravated robbery;
(Y)(Y) Sexual offenses;
(Z)(Z) Simultaneous possession of drugs and firearms;
(A)(A)(A) Soliciting money or property from incompetents;
(B)(B)(B) Stalking;
(C)(C)(C) Terroristic act;
(D)(D)(D) Terroristic threatening;
(E)(E)(E) Theft of public benefits;
(F)(F)(F) Theft by receiving;
(G)(G)(G) Theft of property;

- (H)(H)(H) Theft of services;
- (I)(I)(I) Transportation of minors for prohibited sexual conduct;
- (J)(J)(J) Unlawful discharge of a firearm from a vehicle; and
- (K)(K)(K) Voyeurism.

An Alternative Compliance ~~alternative compliance~~ may not be requested by any individual who has pleaded guilty or nolo contendere to, or has been found guilty of any of the following offenses, as ~~he or she is~~ they are permanently disqualified from being a ~~foster or adoptive resource~~ parent per A.C.A. § 9-28-409(e)(1):

- ~~A.~~
- A. ~~A~~ Felony abuse of an endangered or impaired person, ~~if a felony~~;
- ~~B.~~
- B. Arson;
- ~~C.~~
- C. Capital murder;
- ~~D.~~
- D. Endangering the welfare of an incompetent person in the first degree;
- ~~E.~~
- E. Kidnapping;
- ~~F.~~
- F. Murder in the first or second degree;
- ~~G.~~
- G. Rape; or;
- ~~H.~~
- H. Sexual assault in the first or second degree.

An Alternative Compliance ~~alternative compliance~~ may not be requested by any prospective ~~foster or adoptive resource~~ parent with a felony conviction for the following offenses, as no foster child in ~~DHS~~ the Department of Human Services' (DHS') custody may be placed in such an individual's home:

- ~~A.~~
- A. Child abuse or neglect;
- ~~B.~~
- B. Spousal abuse or domestic battery;
- ~~C.~~
- C. A crime against children, including child pornography; or;
- ~~D.~~
- E-D. A crime involving violence, (including rape, sexual assault, or homicide), but not including other physical assault or battery.

A prospective ~~foster or adoptive resource~~ parent may request an ~~alternative compliance~~ Alternative Compliance for a felony conviction for physical assault, battery, or a drug-related offense if the offense was not committed within the past five (5) years.

~~If an applicant produces evidence that a conviction has been expunged or sealed, this information must be forwarded to OCC for review. Any conviction requiring an Alternative Compliance that has been expunged or sealed must be reviewed by the Child Welfare Agency and Review Board.~~

A Placement and Residential Licensing Unit~~PRLU~~ Licensing Specialist will monitor DCFS for continued compliance with ~~CWAL~~ standards and issue a corrective action notice if any deficiencies are found. ~~The notice will state the agreement regarding the corrective action and a reasonable time frame for the violation to be corrected.~~

APPENDIX 6: FOSTER/ADOPTIVE PARENT APPLICATION & ASSESSMENT PROCESS



APPENDIX ~~67~~: SAFEGUARDS FOR CHILD VICTIMS TESTIFYING IN JUDICIAL AND ADMINISTRATIVE PROCEEDINGS

~~0602/202208~~

~~No content changes. Technical change only to renumber appendix based on deletion of what was previously Appendix 6.~~

~~In order to~~To facilitate testimony that is fair and accurate, the following safeguards should be implemented or used:

- A. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel ~~A~~attorney shall inform the child about the nature of the judicial or administrative proceeding in age-appropriate language;
- B. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney shall explain:
 - 1) The meaning of the oath that the child will take; and
 - 2) The judge's decision about whether the child understands the issues well enough and has the capacity to provide meaningful testimony;
- C. The prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney shall explain to the child that if the child does not understand a question while testifying in the judicial proceeding or administrative proceeding, the child has a right to say that ~~he or she does~~they do not understand the question;
- D. The prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney may file a motion to have the child testify at a time of day when the child is most alert and best able to understand questions posed in court;
- E. If it is in the child's best interest, the prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney may file a motion for the child to have a comfort item (for example, a favorite toy, or a transitional blanket) when testifying in a judicial or administrative proceeding;
- F. If it is in the child's best interest, the prosecuting attorney, victim-witness coordinator, attorney ad litem, or Office of Chief Counsel attorney may file a motion for the child to have a support person present when the child testifies in a judicial ~~proceeding~~ or administrative proceeding; and
- G. The prosecuting attorney, attorney ad litem, or Office of Chief Counsel attorney shall consider the effect upon the child when the child is subjected to argumentative or harassing questions and shall make the proper objections, when appropriate, to ensure the child is not subjected to argumentative or harassing questioning.

APPENDIX **89**: ARKANSAS HEALTH AND SAFETY FACTORS

068/2022~~13~~

Technical change only to reflect renumbering. No content changes.

- 1) Caretaker's behavior towards the child~~(ren)~~ is violent or out of control.
- 2) Caretaker describes or acts towards the child in predominantly negative terms or has extremely unrealistic expectations of the child.
- 3) Caretaker caused serious physical injury to the child or made a plausible threat to cause severe physical injury to the child.
- 4) Caretaker's explanation for the child's injury is unconvincing.
- 5) The family refuses access to the child, ~~and~~ there is reason to believe that the family is about to flee, or the child's whereabouts cannot be ascertained.
- 6) Caretaker has not, cannot, or will not provide supervision necessary to protect the child from potentially dangerous harm.
- 7) Caretaker is unwilling or unable to meet the child's needs for food, clothing, shelter, ~~and/or~~ medical, or mental, health care.
- 8) Child is fearful of the caretaker, other family members, or other people living in or having access to the home.
- 9) Child's physical living conditions are hazardous and immediately threatening, based on the child's age and developmental status.
- 10) Child sexual abuse is ~~suspected~~suspected, and circumstances suggest that the child's safety may be an immediate concern.
- 11) Caretaker's current substance use seriously affects ~~his/her~~their ability to supervise, protect, or care for the child.
- 12) Caretaker fails to protect the child~~(ren)~~ from serious physical or threatened harm.
- 13) Caretaker's emotional stability seriously affects current ability to supervise, protect, or care for the child.
- 14) Caretaker has previously maltreated a child, and the severity of the maltreatment or the caretaker's response to the previous incidents suggest that the child's safety may be an immediate concern.

~~FOSTER~~ ~~PARENT~~ ~~HANDBOOK~~

~~Arkansas Department of Human Services~~
~~Division of Children and Family Services~~

~~Our mission is to keep children safe and help families.
DCFS will respectfully engage families and youth
and use community-based services and supports
to assist parents in successfully caring for their children.
We will focus on the safety, permanency,
and well-being for all children and youth.~~

~~CARE * COMMIT * CONNECT~~

~~PUB-30
Revised August 2013~~

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ABOUT THIS HANDBOOK

This handbook has been prepared to provide foster parents with information they will need to become a foster family and to maintain standing as a foster family. This handbook contains the standards that are required for a family to become approved to operate as a foster home, as well as information about the role of a foster family. Please read this entire handbook to be familiar with the standards for which a family is responsible for upholding, and to ensure the family's continued compliance. Please contact the designated resource worker with questions about compliance or any of the licensing standards.

This handbook is only a reference guide. Contact your local Department of Human Services (DHS) County Office for clarification and interpretation of any information provided in this publication.

INTRODUCTION

The Division of Children and Family Services (DCFS) is a licensed Child Welfare Agency, and all of its approved foster homes must be in compliance with all licensing requirements. The Child Welfare Licensing act defines a "Foster Home" as a private residence of one (1) or more family members that receives from a child placement agency any minor child who is unattended by a parent or guardian in order to provide care, training, education, custody, or supervision on a 24-hour basis, not to include adoptive homes (see PUB-04: Minimum Licensing Standards for Child Welfare Agencies). Although the licensing standards' definition of a foster home does not include adoptive homes, DCFS foster and adoptive homes must meet the same licensing standards to comply with federal funding regulations.

Foster Care is a program designed to provide a substitute family life experience in a DCFS approved foster home, provisional foster home, or licensed facility for a child who needs care for a temporary, or (in some instances), for an extended period of time. During this time, the birth/legal family (birth, legal, or both) is either nonexistent or dysfunctional due to social, emotional, economic, and/or physical reasons. Foster care is founded on the premise that all children have a right to a safe and supportive environment in which to grow.

The purpose of foster care is to provide a healthy home and community experience for the child while the conditions which that caused the placement away from the birth/legal family (birth, legal, or both) are being resolved. Thus, foster care is intended to be temporary. The length of a child's stay in foster care will depend a great deal on the conditions which that caused the placement and the time and the resources available to resolve them. The goal of foster care is to work toward a permanent placement for the child, preferably, return to the birth or legal parents.

Foster care is a team effort involving DCFS, the foster parents, the child in foster care, and the birth/legal parents (birth, legal, or both). When all individual those directly involved in the situation understand their own and each others' roles and cooperate as team members in a team effort, the quality of the experience for all is increased, and the effect on the child's future well being is greatly improved.

Good communication among all team members, as well as mutual respect, understanding, and honesty are essential for achievement of foster care goals. All team members share the responsibility for ensuring that lines of communication are kept open and in use.

Because of differences in responsibilities and perspectives, conflicts may arise. How well conflicts are worked out will determine the success with which the team is able to serve the needs of the child.

TYPES OF FOSTER HOMES

There are two (2) types of foster homes: Regular Foster Homes and Provisional Foster Homes.

Regular Foster Homes

Regular foster homes are ones in which the foster parents agree to provide 24-hour care for a particular child in foster care. There will be an agreement between the child placing agency and the foster parents that the family can care for that child as a substitute family until such a time as a permanent plan can be developed

and implemented for that child. The foster parents will be given pertinent information about the child in foster care. This includes reasons for placement, circumstances for removal from the parent's home, where siblings are placed, a copy of the case plan, and a copy of the visitation plan. They will be kept informed concerning plans for the child's future. In many instances, it will be appropriate for foster parents to reach out to the birth/legal parents (birth, legal, or both). However, this outreach will be supervised by members of the reunification services team.

Family members and the physical characteristics of the home must be evaluated to determine special qualifications of the prospective foster family. Evaluation is considered with regard to special training and expertise, experience, and preference as to the numbers, ages, sex, and characteristics of children who may be placed in their home.

Provisional Foster Homes

In an effort to preserve family connections and expedite placement of children, the Division DCFS may place a child in foster care with a relative or fictive kin if one (1) has been identified and is appropriate. Relative means a person within the fifth degree of kinship to the child by virtue of blood or adoption. Fictive kin means a person not related to the child by blood or marriage but who has a strong and, positive, emotional tie to the child, and plays a positive role in the child's life, such as a godparent, neighbor, or family friend. This type of placement is classified as a "Provisional Foster Home". The purpose of opening a provisional foster home is to enable DCFS to make a quick placement for the child with a relative or fictive kin with whom a bond already exists. Therefore, a provisional home may be opened before the results of the FBI Background Check are received, before the provisional foster parents have completed the pre-service training, and before a full home study is finished (however a walkthrough of the home is required before placement in a provisional home). These are the only differences in approval requirements, including minimum licensing requirements, between provisional foster homes and regular foster homes in Arkansas.

Once opened as a provisional home, DCFS staff works with the foster parents in that home to bring them into full compliance within a six six month period. Provisional foster homes that are not in full compliance at the end of six (6) months must be closed and the child(ren) removed, or the relative must have been granted permanent custody by the court. If the home is opened as a regular foster home, the foster parents may then request to care for non-relative or /non fictive kin children in foster care with the understanding that additional evaluation of their home would be required to ensure that it would be an appropriate placement for non relative or /non fictive kin children. Provisional foster homes shall not be paid a board payment until the relative meets all of the licensing requirements and, meets all of the DCFS standards, and standards, and is reclassified as a regular foster home.

The child is in the custody of the Department DCFS, therefore, the child shall remain in a licensed or approved foster home, shelter, or facility until the relative or fictive kin's home is opened as a provisional foster home, regular foster home, or the court grants custody to the relative or other person after a written, approved home study is presented to the court.

RESPONSIBILITIES OF THE FOSTER CARE TEAM

Children in Foster Care

Children have certain inherent rights based on their special status as children and their inability to care for themselves. Among these inherent rights are the right to live with their birth/legal family (birth, legal, or both); and the right to receive love, protection, nurturance, and support until they reach the age of majority; the right to be free from harm, neglect, and abuse; the right to receive an education; the right to have physical care and medical attention; the right to enjoy all facets of family life; the right to be disciplined and; the right to receive religious and moral training; and the right to grow into well-adjusted young adults.

When a child's right to live with his or her their own birth/legal family (birth, legal, or both) is in jeopardy, the child has a right to be represented by legal counsel and to have their legal rights protected in any judicial procedure which that addresses custody or guardianship. DCFS has certain responsibilities to children who have been removed from the custody of their birth/legal parents (birth, legal, or both).

Responsibilities of DCFS to children in foster care

1. Place the child in a foster home, provisional foster home [MG1], or other substitute care facility that can best serve the child's needs and is the least restrictive environment.
2. Place the child close to birth/legal parents (birth, legal, or both) to allow frequent contact.
3. Ensure the child has regular visits with birth/legal parents (birth, legal, or both), siblings, and others with whom there is a significant relationship, unless restricted by court order.
4. Give the child honest information regarding all decisions.
5. Provide the child the basic rights inherent to all children, as stated above.
6. Allow the child to participate in case planning, conferences, staffings, and court hearings, etc., whenever possible and age appropriate.
7. Keep a record for each child that includes legal documents (e.g., for example, birth certificate, social security card, and court orders).
8. Help the child return to the birth/legal parents' (birth, legal, or both) home at the earliest possible time, or be legally freed to form new family ties with relatives or adoptive parents.
9. Prepare the child for a successful transition to adulthood.

Birth/Legal Parents (Birth, Legal, or Both)

Birth/legal parents (birth, legal, or both) are the key to long range planning for the child in foster care. They are central members of the foster care team. The child began with them, identifies with them, and, in most instances, has a longing to return to them. The return home of the child is dependent on his their birth/legal parents' (birth, legal, or both) ability to improve their situation. Otherwise, the birth/legal parents (birth, legal, or both) face the possibility of long range plans being made which may include termination of parental rights. With the exception of parents of children for whom DHS is guardian or birth/legal parents (birth, legal, or both) whose rights have been permanently terminated, DCFS has certain responsibilities to the birth/legal parents (birth, legal, or both) of children placed in the custody of DHS. [JH2]

Responsibilities of DCFS to Birth/Legal Parents (Birth, Legal, or Both)

1. Offer and provide services that will help keep their family together.
2. Let them know they may seek the assistance of an attorney any time a legal action involves their child. Arkansas law requires that defendants have the opportunity to be represented by legal counsel at all stages of court proceedings. If it is determined by the court that a parent or legal guardian, based on their financial resources, is unable to pay for an attorney, the court will appoint an attorney to represent them.
3. Let the family know why it was necessary to temporarily remove their child and place him or her the child with a foster family [MG3].
4. Do not judge or criticize the family. Acknowledge that they share in their child's life.
5. Let the family know how they can still be involved in their child's life while he or she the child is in foster care.
6. Let them know what they must do to have their child return home.
7. Include the family when creating the case plan.
8. Give the family every possible support and service for achieving the goals of the case plan to help their child return home.
9. Return their child home when the necessary changes or conditions required by the court have been made.

Responsibilities of birth/legal parents (birth, legal, or both)

1. Provide any and all important information about their child and family to DCFS.
2. Tell their FSW about any special needs their child has, including health conditions, school information, and important family customs or cultural practices.
3. Participate in staffings and court hearings.
4. Work with FSW to create a case plan.
5. Participate in the services to support the case plan goals offered to the family and work on achieving the goals of the case plan.
6. Be involved in their child's medical appointments or and social or religious activities.
7. Keep in contact with FSW and keep him or her them updated on progress in achieving the goals of the case plan.

8. ~~Maintain contact and communication with their child. Keep appointments to visit with their child.~~
9. ~~Let DCFS know as soon as possible if they wish to give up parental rights.~~

Foster Parents and Provisional Foster Parents^[MG4]

~~It is the responsibility of foster parents and provisional foster parents to provide 24-hour²⁴ twenty-four-hour nurturing care to children in foster care. They also have a responsibility to help the child develop a good self image and have positive feelings about their past, present, and future.~~

~~As temporary substitute parents, foster parents are close to the child in foster care on a day to day basis. This closeness allows the foster parents to function as a vital member of the foster care team. As such, the foster parents are in an excellent position to evaluate the child's current needs and ensure that those identified needs are being met by the foster family or through resources in the community.~~

~~As team members with a unique perspective of the child, foster parents can contribute a special knowledge to DCFS and to the birth/legal parents (birth, legal, or both), including information about the child's behavior, relationships with playmates, and other members of the foster family, and adjustment to school and to the neighborhood.~~

~~By observing the child's relationship with their birth/legal parents (birth, legal, or both) and the child's reactions to visitation, foster parents can enhance the DCFS work with the birth/legal parents (birth, legal, or both). In some instances, the foster parent may also serve as a mentor to the birth/legal parents (birth, legal, or both). This mentoring relationship may be the first opportunity the parent has had to observe and learn effective parenting skills.~~

Responsibilities of DCFS to Foster Parents

1. ~~Provide pre-service training and continuing education.~~
2. ~~Provide all available information concerning the child and the birth/legal family (birth, legal, or both) situation to enable them to make an informed decision about the ability or inability to provide care for the child and participate in the case.~~
3. ~~Involve them as team members in pre-placement activities and case planning as well as staffings and court proceedings.~~
4. ~~Ensure they have a clear understanding of their role, as well as the role of other team members, in achieving case goals.~~
5. ~~Provide them with a board payment for food, clothing, and shelter for children in their care.~~
6. ~~Allow them to continue their own family patterns and routines, as much as possible.~~
7. ~~Allow them to request the removal of a child from their home, with notice.~~
8. ~~Give advance notice, whenever possible, when a child is to be removed from their home.~~
9. ~~Promptly inform them of any complaint against their home or of any condition or problem in the home which that adversely affects their status as foster parents, and provide guidance and support toward resolution of the condition or problem. (See section on Complaints Against Foster Family Other Than Child Maltreatment.)~~
10. ~~Provide access to an internal review of adverse action procedure when differences arise with DCFS which that have not been resolved to their satisfaction. (See section on Internal Review of Adverse Action Involving Foster Parents.)~~
11. ~~Inform them of DCFS programs, services, and policies, which related to foster care.~~

Responsibilities of foster parents to DCFS, the child, and the child's family

1. ~~Participate in foster parent pre-service training and continuing education programs designed to enhance their ability to care for children in foster care.~~
2. ~~Help develop an individualized training plan, and follow the plan.~~

- ~~3. Follow the policies and the decisions of DCFS and accept the supervision of DCFS; Cooperate with monitoring and investigations, and provide information required to verify compliance with rules.~~
- ~~4. Assist the child and DCFS in planning and achieving the child's return to their parents' (birth, legal, or both) home or to a permanent placement.~~
- ~~5. Communicate with the attorney ad litem about the status and needs of the child so that the attorney can present to the court a complete and accurate picture of the client.~~
- ~~6. Attend and participate in case planning and case plan reviews.~~
- ~~7. Provide a nurturing family life experience for the child, including guidance, intellectual stimulation, affection, and appropriate discipline.~~
- ~~8. Provide the level of supervision, care, and treatment necessary to ensure the safety and well being of each child placed into their home, taking into account the child's age, individual differences and abilities, surrounding circumstances, hazards, and risks.~~
- ~~9. Establish well-defined rules; set expectations and limits consistent with the child's age, and clearly establish that there will be consequences for inappropriate behavior; discipline with kindness and understanding; train and teach the child using positive techniques that stress praise and encouragement, rather than using negative techniques.~~
- ~~10. Protect the child by locking up all dangerous objects and substances.~~
- ~~11. Store all medications in a secure location and follow the instructions on the label when giving them to the child. Understand the possible side effects of all medications and keep a log of all medications given to the child.~~
- ~~12. Provide for enrollment and regular school attendance (when age appropriate) in an accredited school and encourage the expression of the child's strengths and special talents. Provide the child with regular activities to promote the physical, social, intellectual, spiritual, and emotional development of the children in their care.~~
- ~~13. Attend school conferences concerning a foster child, and child and notify DCFS of any situations that may affect the case plan or require agency involvement.~~
- ~~14. Notify DCFS promptly of serious illness, injury, or unusual circumstances affecting the health, safety, or welfare of the foster child.~~
- ~~15. Provide each child their own clothing that is clean, well fitted, seasonal, appropriate to age and sex, and comparable to community standards.~~
- ~~16. Allow foster children to acquire and keep personal belongings.~~
- ~~17. Cooperate with DCFS in arranging for routine medical and dental care, as well as making sure the child receives appropriate care during any illness. Accompany the child on all medical appointments.~~
- ~~18. Provide routine transportation for each child.~~
- ~~19. Protect the child from exposure to second hand smoke and take every precaution to ensure his or her the child's health and safety.~~
- ~~20. Maintain a record of health care and immunization records via the Medical Passport.~~
- ~~21. Keep a lifebook for the child that includes without limitation periodic photographs of the child; a record of the child's memberships, activities, and participation in extracurricular school or church activities; and trophies, awards, ribbons, etc.~~
- ~~22. Speak positively of the child's birth/legal family (birth, legal, or both).~~
- ~~23. Maintain absolute confidentiality of private information about each foster child and their birth/legal family (birth, legal, or both).~~
- ~~24. Fully cooperate with DCFS's efforts to achieve the case plan goals for each foster child, including visitation.~~
- ~~25. Maintain open communication with all team members, including communication with the child's birth/legal family (birth, legal, or both) when contact between foster parents and the family is part of the case plan.~~
- ~~26. Give advance notice to DCFS of any major changes that affect the life and circumstances of the foster family, including change of residence, whenever possible.~~
- ~~27. Show support and help prepare the child for any move that he or she they must make (back to their family (birth, legal, or both), to a relative's home, to another foster home, to an adoptive home, or to independent living).~~
- ~~28. Keep the terms of the Initial Foster Home Agreement and Addendum.~~

Foster parents are prohibited from using corporal punishment on a child in foster care

Methods of discipline that are unacceptable for use by foster parents with the child include, but are not limited to ~~without limitation~~:

1. ~~Cruel, severe, or humiliating actions, such as washing mouth with soap;~~
2. ~~Taping or obstructing a child's mouth;~~
3. ~~Placing painful, or unpleasant tasting, or hot substances in a child's mouth;~~
4. ~~Placing a child in dark areas;~~
5. ~~Humiling a child in public;~~
6. ~~Physical punishment inflicted on a child in any manner, such as including without limitation hitting, pinching, pulling hair, slapping, kicking, twisting the arms, forcing fixed body positions, and spanking, etc.;~~
7. ~~Denying a child of meals, clothing, or shelter;~~
8. ~~Interference Interfering with any child's case plan requirements, or any denial denying a child any of basic rights;~~
9. ~~Denial of Denying a child visits, telephone, or mail contact with family members;~~
10. ~~Assignment of Assigning a child extremely strenuous exercise or work;~~
11. ~~Locked Locking a child in isolation of any kind; and~~
12. ~~Punishment Punishing a child (in any way) of any kind for bedwetting or poor toilet habits. If a child is experiencing problems with enuresis, a therapist should be engaged to help with this issue.~~

DEPARTMENT OF HUMAN SERVICES & AND DIVISION OF CHILDREN AND& FAMILY SERVICES

DHS, acting through DCFS, serves as the court-appointed legal custodian of the child and has the ultimate responsibility for ensuring that the child has the best possible foster care experience and that appropriate long-term plans are made. There is also a direct vested interest in resolution of the problems or conditions affecting the status of the birth/legal family (birth, legal, or both). The cooperative efforts from the courts, other agencies, and community resources are necessary to ensure that responsibilities to the child and assistance in resolution of problems or conditions affecting the child's birth/legal parents (birth, legal, or both) are carried out.

Department and /Division responsibilities

1. ~~Remain legally responsible for the supervision and decision making regarding foster children. (Foster parents have daily responsibility for the care of the children.)~~
2. ~~Provide the child in foster care, birth/legal their parents (birth, legal, or both), and their foster family with the necessary support services to accomplish goals set out in the case plan.~~
3. ~~Provide foster parents with the information necessary to provide adequate care to each foster child, including the child's health, reason for entering care, probable length of placement, and siblings. As additional information is obtained by the caseworker, it shall be promptly shared with the foster parents.~~
4. ~~Provide foster parents with instructions for contacting agency personnel at any time.~~
5. ~~Ensure a caseworker visits the child in person, at least monthly while the child is in foster care, at least minimum of once a month while the child is in foster care.~~
6. ~~Include foster parents in case planning for each child and provide them with a copy of the current case plan and visitation plan.~~
7. ~~Provide for timely reimbursements to foster parents for cost of care and fees for services.~~
8. ~~Approve respite care and babysitting arrangements.~~
9. ~~Maintain a record for each foster family that contains all information and documentation required by licensing standards. (See PUB-04: Minimum Licensing Standards for Child Welfare Agencies.)~~
10. ~~Work with birth/legal parents (birth, legal, or both) and foster families to see that the child's emotional needs are met.~~
11. ~~Conduct regular staffings and schedule and attend statutorily required hearings.~~
12. ~~Provide necessary medical and psychological services, evaluations, and care or treatment needed by the child, including eEnsuring that each child in foster care has a medical exam at least annually.~~
13. ~~Ensure that the child has planned regular visitation with their birth/legal parents (birth, legal, or both); or, if there are barriers to visitation, provide services directed toward removal or reduction of barriers to visitation.~~
14. ~~Ensure visits for the child with siblings by planned regular contact (at least every two (2) weeks).~~
15. ~~Maintain regular contact with all team members according to the case plan.~~

- ~~16. Keep all team members informed of significant changes in the status of the case or individual team members.~~
- ~~17. Provide opportunity for religious experiences with respect for the child's and birth/legal (birth, legal, or both) parents' (birth, legal, or both) religion.~~
- ~~18. Take the legal steps necessary to place the child in a permanent home when returning to the birth/legal parents (birth, legal, or both) is not possible within a reasonable length of time, usually not more than one (1) year.~~
- ~~19. Keep the terms of CFS 462: Initial Foster Home Agreement & CFS 462A: Foster Home Agreement Addendum.~~
- ~~20. Communicate with the child's school about custody and other issues that might impact the child's ability to learn.~~
- ~~21. Investigate the foster home if DCFS receives a complaint report of non-compliance with licensing standards. Investigation shall be completed within sixty (60) days of receiving the report, unless good cause is documented.~~
- ~~22. Prepare a closing summary if the home closes, including reasons, if the home closes for closure.~~

APPROVAL, TRAINING, & AND SUPPORT OF FOSTER HOMES

Foster Home Approval Process

~~In order to ensure quality foster homes, DCFS will complete a thorough home assessment for each prospective foster family. The home assessment is a mutual selection process. It involves several components, including without limitation including, but not limited to, an in-home consultation visit, background checks, pre-service training, a home study, and ongoing consultation with the prospective foster parents to ensure that all appropriate criteria related to both compliance and quality are met. An assessment will be conducted prior to the placement of a child in one's home. Families that move to Arkansas from another state where they have been approved as a foster family must complete the entire approval procedure of the Arkansas DCFS.~~

~~The purpose of the foster home assessment is threefold: first, it is to educate candidates; second, it is to assess their character, suitability, and qualifications to open a foster home; and third, it is to see that they meet the Standards of Approval for Foster and Adoptive Homes, PUB 22.~~

~~Assessing the character, suitability, and qualifications of the family to operate a foster home will be done in relation to the following areas:~~

- ~~1) The family's capability to provide for the needs of a child who is placed in their care;~~
- ~~2) The family's ability to accept and encourage the child's relationship with birth/legaltheir family (birth, legal, or both);~~
- ~~3) The family's ability to relate to the child in a helpful way; and~~
- ~~4) The family's ability to work as part of a team with DCFS staff, other agencies, and community resources to reach the goals set forth in the case plan.~~

Standards of Approval

~~**Age**—The minimum age for applicants age is twenty-one (21) years of age. Alternative compliance must be obtained if one (1) or both applicants are age sixty-five (65) years of age or over, or when one (1) or both spouses of a currently opened foster home reaches sixty fiveage (65) years of age.~~

~~**Health**—All household family members must pass a medical exam (within six (6) months prior to the approval) and have a doctor's recommendation at the time the home is initially approved. Each foster parent and every family member must repeat the exam yearly to remain in compliance.~~

~~**Physical Disabilities**—Physical disabilities of any family member will be evaluated to determine the effect, if any, the disability has on the family's ability to provide adequate care for a child and how the disability may affect a child's adjustment to the family.~~

Relationship Stability: In a two-parent home, both people shall be joint applicants and actively participate in the approval process. The couple shall demonstrate a stable relationship. In assessing relationship stability, considerations may include major life changes such as:

- Death or serious illness among family members;
- Marriage, separation, divorce, or other significant changes in the couple's relationship;
- Addition of household members (e.g., for example, birth, adoption, or an aging relative moving in); and
- Loss of or change in employment;

Marriages and divorces shall be verified. Prospective foster parents must provide a copy of their marriage license to verify marriage and a copy of their most recent divorce decree to verify divorce.

Single-parent households are welcome particularly for those children whose need for a two-parent household is not ~~not~~ a crucial aspect of the care required. [MGS] In a single-parent home, the major life changes listed above shall also be considered when assessing the person's ability to be an effective foster parent.

All foster parents should have a strong support system in order to assist them in their role as foster parents and, in turn, better ~~better~~ serve children in foster care. Applicants with professional training, such as nurses, may be desirable for children with special needs. Other adults (for example, including without limitation grandparents and aunts, etc.) and children who are a part of the household shall be assessed ~~assessed~~ regarding how they may be affected by the presence of a child in foster care and also the effect they themselves may have on the child in care.

Maximum Capacity Foster homes shall not have more than five ~~(5)~~ unrelated children in care. The foster home may care for up to eight ~~(8)~~ children, if they are all related to each other. A foster home shall not have more than eight ~~(8)~~ children in their home, including their own children. This includes placement or respite care. Including the foster parents' biological children, the foster home may have no more than two ~~(2)~~ children under the age of two ~~(2)~~ years of age and no more than three ~~(3)~~ children under the age of six ~~(6)~~ years of age. The sole exception to the above limits shall be in those instances in which the placement of a sibling group in a foster home with no other children in the home would exceed the limits.

Eight ~~(8)~~ related children from the same sibling group may be placed together in the same foster home. In this instance, the total number of the foster parent's children who reside in the home will determine the number of children from one ~~(1)~~ sibling group that may be placed together in the home.

For example:

- Zero ~~(0)~~ children of the foster parent and eight ~~(8)~~ foster children that are related (to each other)
- One ~~(1)~~ child of the foster parent and seven ~~(7)~~ foster children that are related (to each other)
- Two ~~(2)~~ children of the foster parent and six ~~(6)~~ foster children that are related (to each other)
- Three ~~(3)~~ children of the foster parent and five ~~(5)~~ foster children that are related (to each other) or unrelated

Including the foster parent's own children, the foster home may have no more than two ~~(2)~~ children under age two ~~(2)~~ years of age and no more than three ~~(3)~~ children under age six ~~(6)~~ years of age.

Parenting Ability — Ability to provide a nurturing family life experience for the child, including guidance, intellectual stimulation, affection, and appropriate discipline.

Employment — In two-parent homes where the parents are both employed outside the home or in a single-parent home where the parent is employed outside the home, careful consideration must be given to the age and characteristics of the children for whom the home wishes to provide care, as well as to the family's plan for child care. Stable employment history is required, when applicable, of the primary wage earner in the foster home. The foster home shall not be licensed as a Child Care Family Home.

Income — Evidence of stable income sufficient to meet the needs of one's family is required for approval. The foster family shall provide documentation of sufficient financial resources to meet their needs. The family shall have sufficient, reliable income to assure stability and security, without including the board payment. Management

~~of income shall be considered more important than amount of income. Keeping children in foster care is not a profitable venture.~~

Physical Standards ~~— Location, condition, and physical layout of the home will be considered. Physical conditions of the home shall present no hazard to the safety or health of a child. The home should have at least two (2) exterior doors situated to provide safe exit or the home shall have a written statement from the Fire Department that the alternative escape route is approved. This approval shall be kept in the foster home case record. There shall be fifty 50 square feet (50 ft²) of sleeping space per child in foster care and an opening window, large enough that the child can exit through it, in each bedroom where a child in foster care sleeps. Bars, grilles, grates, or other items that block access to the window are only permitted only if they can be removed from the inside without the use of a key, tool, or force greater than that required for normal operation of the window. In this event, each such bedroom must have a working smoke detector in the bedroom. The stacking of baby beds is prohibited.~~

Telephone ~~— The home shall have an operational telephone. Working cell phones kept on the premises are acceptable. The phone shall be accessible to children.~~

Transportation ~~— The foster parents shall maintain a mode of transportation which complies with state motor vehicle laws and shall allow children in foster care to be transported only by a licensed driver. Foster parents must have proof of current insurance and a valid vehicle safety record check. Children in foster care shall be transported only while wearing safety belts, or in child safety seats, according to Arkansas law.~~

Home Environment ~~— Cleanliness of the home will be considered.~~

Central Registry ~~— Prior to approval, a Child Maltreatment Central Registry Check must be conducted prior to approval on foster parent applicants and each member of the household fourteen age (14) years of age or older, (excluding children in foster care), including any state where either the applicant or household member works, if different from their state of residence. A registry check will also be conducted in any other state where the applicant has worked or resided during the preceding five (5) years. An Adult Maltreatment Central Registry Check must be conducted prior to approval on foster parent applicants and each member of the household eighteen age 18 and one half (18.5) years of age and older. The Division DCFS will repeat the Child Maltreatment and the Adult Maltreatment Central Registry Checks every two (2) years. Successful completion is necessary before referral to pre-service training. Expedited checks will be done on provisional foster homes.~~

FBI Criminal Background Check ~~— A Prior to approval, a finger print based FBI criminal background check must be conducted prior to approval on foster parents and any other members of the household eighteen 18 and one half (18.5) years of age or older, (excluding children in foster care). This check need not be repeated. Conducting a finger print based criminal record check is not necessary to open a provisional foster home.~~

Criminal Record Check ~~— A Prior to approval, an Arkansas State Police Criminal Record Check must be conducted prior to approval of on the foster parents and all members of the household age 18 eighteen and one half (18.5) years of age and or older, (excluding children in foster care). The Division DCFS shall repeat the Criminal Record Check every two (2) years. Successful completion or approval of alternative compliance is necessary before referral to pre-service training.~~

Motor Vehicle Safety Check ~~— A motor vehicle safety check will be conducted on each household member who will be responsible for transporting children in foster care. Each member must have a current, valid driver's license. The foster family members must be in compliance with the Arkansas Motor Vehicle Safety program. DCFS will check the driving record (violation points) for each potential foster parent. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points that a foster parent may be allowed to accrue. It is the foster family's responsibility to report any traffic violations to their Resource Worker within twenty four (24) hours.~~

References ~~— A minimum of three (3) references, people who are familiar with one's the applicant's child, caring experiences and practices, will be contacted regarding the character and ability to provide for children.~~

Smoking—DCFS policy is that second-hand smoke is detrimental to a child's health and the presumption will be that it is not in a child's best interest to be placed in a foster home that permits smoking in the presence of a child in foster care.

Foster parents will indicate if smokers in the home or who visit the home will be permitted to smoke while in the presence of a child in foster care. If a foster parent indicates that smoking will occur in the presence of a child in foster care, the foster home will be designated a "smoking" foster home and no child may be placed or remain in the foster home unless it is in the child's best interest to be placed in or remain in the foster home. If a request to place or keep a child in a smoking home is made, the worker must clearly identify why it is in the child's best interest to be exposed to second-hand smoke, if a request to place a child in a smoking home is made. No child in foster care shall be placed in a smoking foster home without a waiver from the Assistant Director of Community Services.

State law prohibits smoking in a vehicle if a child in the car is under fourteen the age of (14) years of age. Thus, no foster parent or DCFS employee may smoke in the vehicle when transporting a child in foster care who is under fourteen the age of (14) years of age. Per DCFS policy, foster parents are also prohibited from smoking in a vehicle when a child, in foster care, who is fourteen (14) years of age and older who is in foster care, is present. Per DCFS policy, foster parents are also prohibited from smoking in a vehicle when a child (in foster care) who is fourteen (14) years of age and older is in the car.

In accordance with A.C.A. 20-27-1804, smoking is prohibited in all vehicles and enclosed areas owned, leased, or operated by the State of Arkansas, its agencies, and authorities. Therefore, DCFS staff may not smoke in a state vehicle, NOR in their private vehicle, when a child in foster care or receiving other services from the Division DCFS is present.

Alternative Compliance & And Policy Waiver Requests

DCFS bases its standards of care and character on the Child Welfare Agency Licensing Act (CWALA). If it is believed that an applicant possesses special abilities or circumstances which that would make them good foster parents in spite of their inability to meet a standard, the county office may request an approval for alternative compliance or a policy waiver.

An alternative compliance is a request for approval from the Child Welfare Agency Review Board (CWARB) to allow a licensee to deviate from the letter of a regulation, provided that the licensee has demonstrated how an alternate plan of compliance will meet or exceed the intent of the regulation. What is proposed as an alternative to compliance with policy or standards will comply with the intent, if not the actual requirement.

A policy waiver request is a request to deviate from DCFS policy, procedures, and standards. Waiver requests may be approved by the DCFS Director.

All policy waiver and alternative compliance requests will be approved or denied based on the individual circumstances of the foster parent applicant. Safety and welfare of the child(ren) involved will be paramount.

If a foster parent or applicant has questions or concerns regarding alternative compliance or waiver requests, they should consult their Resource Worker.

Training

DCFS recognizes the child's right to be placed in a home that is able to deal with the special problems and traumas of out-of-home care. Foster parenting is a specialized field, that is different from parenting one's own children, and for which special training is essential. As foster parenting is far too complex to be covered in a single course, DCFS will provide opportunities for training of prospective foster parents and training related to

the special needs of children in out-of-home placements. An individualized training plan will be developed, taking into consideration the age and characteristics of children for whom the foster parent has expressed preferences.

Pre-Service Training

Successful completion of the assessment and, if applicable, approval of an alternative compliance or policy waiver, is necessary before referral to pre-service training. Training of prospective foster parents will be done by using group processes, but processes but may be done on an individual basis when necessary. Foster parents must complete the Division's DCFS' pre-service training curriculum, which includes twenty seven (27) hours of Foster PRIDE or/ Adopt PRIDE training and three (3) hours of DCFS orientation prior to placement of a child. Foster parents shall have current CPR and First Aid Training. No child will be placed in the foster home until each foster parent has obtained CPR Certification and completed First Aid training.

First Aid and CPR training and certification will only be accepted from a certified trainer associated with the American Heart Association, the American Red Cross, the National Safety Council, the Health and Safety Institute, or EMS Safety Services.

Online CPR and First Aid training is acceptable, provided the online course is offered through American Heart Association, American Red Cross, the National Safety Council, the Health and Safety Institute, or EMS Safety Services. In addition, the online curriculum must also require hands-on, skill based instruction, as well as written and practical testing. As such, participants shall demonstrate the skills learned, through the online portion of the curriculum, in the presence of a certified trainer, in order to complete certification (i.e., tTraining and certification that is provided solely online will not be accepted).

Prospective foster parents must obtain a certification card from the trainer representing the certifying national organization. DCFS staff will coordinate the CPR and First Aid training with the national organization.

Continuing Education

DCFS will require participation in local educational and training opportunities. Each foster parent shall annually participate in a minimum of fifteen (15) hours of approved training. This additional fifteen (15) hours becomes due at the end of the second year that a foster home is in operation. The same training classes cannot be repeated yearly. Training classes may cover a wide range of topics related to parenting, child development, behavior problems, and medical needs, etc., and may be offered by educational systems (such as colleges, universities, and local school systems), Health Departments, Community Mental Health Centers, the Foster Parent Association, and others. [JH6]Special TV programs related to subjects such as child abuse, and parenting adolescents, etc. may also be considered training. However, videos, TV programs, online courses, and books are only accepted on a limited basis. No more than five (5) hours of videos, books, or online courses, or TV programs for each foster parent will be accepted per year for each foster parent, and this type of training must have prior approval by the Area Director or designee. To be considered as training, these programs must be discussed with the Resource Worker assigned to the foster parents and receive prior approval before the program is viewed. Participation shall then be documented in the foster home case record. The DCFS County Office will inform all foster parents of any training and educational opportunities known to them.

CPR training is not allowed to be counted toward the required fifteen (15) hours. Online CPR and First Aid training is acceptable, provided that the online course is offered through American Heart Association, the National Safety Council, American Red Cross, the Health and Safety Institute, or EMS Safety Services. In addition, tthe online curriculum must also require hands-on, skill-based instruction, as well as written and practical testing. As such, participants shall demonstrate the skills learned through the online portion of the curriculum in the presence of a certified trainer, in order to complete certification, (i.e., ttraining and certification that is provided solely online will not be accepted).

A statewide foster parent training conference and area conferences are held yearly, (if funds are available), to give foster families the opportunity to obtain the required hours. Both in-state and out-of-state conferences may be considered training. Funds may be available to defray expenses for these educational opportunities. Prior approval is required for reimbursement. Contact a Resource Worker for more information.

The Resource Worker will notify the family of the disposition of the reevaluation in writing within ten (10) days. When if re-approved, the family will receive a reevaluation letter.

Support to Foster Families

As an integral part of the DCFS delivery system, one families can expect support from DCFS in the form of training, in-home contacts, case consultation, board payments, special services to children in one's their care, and recognition and acknowledgment of these efforts.

When a foster parent requests that a child in foster care be removed from their home, excluding an emergency that places the child or a family member at risk of harm, the foster parent will be expected to attend a staffing to discuss what services or assistance may be needed to stabilize the placement. The staffing will be held within forty-eight (48) hours of notification by the foster parent to remove the child from their home. The age-appropriate child in foster care, the child's attorney ad litem and, a CASA, (if appointed to the case), the parent(s), or guardian, and all parties' attorneys shall be notified so that they can attend and participate in the staffing and planning for the child's placement. If the placement cannot be stabilized, the foster parent will continue to provide for the child in foster care until an appropriate alternative placement is located, but this shall not be longer than five (5) business days.

Foster parents work primarily with two (2) different DCFS staff positions. These are the Family Service Worker and the Foster Parent Resource Worker. The Volunteer Foster Parent Liaison may also be another source of support to other foster parents. To better understand how these individuals work as a team and interact with the goal of providing the best overall experience for children in foster care, the following job descriptions are offered.

Family Service Worker

The Family Service Worker (FSW) is primarily responsible for working with the child in foster care and his or her their biological or legal family. They work to correct problems in the home of the birth/legal parent (birth, legal, or both) with the goal of preventing the need for removal and, if removal is necessary, then working to reunify the child and family.

In the course of while serving the needs of children in foster care, the FSW will frequently visit the foster home. When he or she they visits the home, the main objective is to discuss the case plan, any changes in the plan, and/or specific problems with the placement. Neither foster parents nor the FSW are expected to have answers to all problems. Foster parents have the child-raising experience. The FSW has the objective knowledge about children in foster care. Together, solutions are found. The Family Service Worker is expected to be neither a formal guest in the home, nor a casual acquaintance, nor a "best friend." The relationship is most positive beneficial when it is pleasantly professional. Problems with the FSW visiting occur when foster parents, and/or or a child in foster care, do not know the purpose of the visit. Problems also arise when the FSW is seen as a negative authority figure. For example, it is not productive for foster parents threatening to threaten the child with FSW visits (that being, "if you're not good I'll call the worker,"), or for the family perceiving to perceive the FSW as someone who will solve all their problems, i.e., "We'll call the worker; she'll take care of everything," is not productive it's not productive to call the service worker, when problems arise, expecting them to take care of everything. This does not support the team approach, and it undermines the foster family's authority. Foster parents and the Family Service Worker FSW are partners working together. This partnership works best when each person presents the other person to the both parties are representes child as a positive influence in that child's life, each one bringing his or her their contribution to the efforts taking place on behalf of the child.

The following are some of the responsibilities of the Family Service Worker:

- Providing protective services, foster care, and supportive services for abused and/or neglected children;
- Providing assistance in investigating suspected child abuse and neglect complaints to determine if allegations can be substantiated by making on-site visits, securing background information, and interviewing parties involved;
- Documenting all casework activities for children in foster care whose cases they are assigned;
- Providing assistance in developing case plans to establish goals, objectives, tasks, and time frames for all parties involved;

- Recruiting families and providing assistance in conducting home studies and family assessments to determine appropriate child placements;
- Visiting clients (and/or foster parents) to monitor progress toward case objectives;
- Performing any other related responsibilities as required to further the goal of a therapeutic experience for children in protective services and foster care; and,
- Maintaining regular contact with clients, law enforcement officials, medical personnel, teachers, child care personnel, foster parents, agency and private attorneys, and the general public.

Foster Parent Resource Worker

The Foster Parent Resource Worker is responsible for overseeing the operation of all foster homes. Each DCFS service area has an assigned Foster Parent Resource Worker who serves as an advocate for the foster parent. The Resource Worker is responsible for recruiting foster families, facilitating orientations and training sessions, and other licensing and education requirements, both new and on going. They monitor compliance, provide case management to promote foster home retention, provide support, facilitate corrective action, develop resources, and assess homes that are not in compliance, as well as work with those homes and families that are not in compliance, and provide other types of general support to the care providers [119] within their area.

The Foster Family Resource Worker's assistance to the foster care family includes, but is not limited to the following without limitation:

- Conducting interviews for the purpose of gathering social histories or other needed information to assess for the eligibility or appropriateness of referral;
- Administering background checks;
- Responding to adoption inquiries and referring, when appropriate, to adoption staff (when appropriate);
- Conducting quarterly foster home visits for monitoring continued compliance, appropriateness, and suitability;
- Completing annual evaluations of each foster home;
- Checking for licensing compliance;
- Following up with corrective actions for homes that are out of compliance;
- Responding to requests from foster parents as they need required logs and/or on-call lists, etc;
- Creating Family Development Plans for continued inservice training and conducting make-up training as needed;
- Conducting health and safety assessments (as needed, only in regard to licensing complaints n on maltreatment) and other licensing standard compliance;
- Assisting in the development of foster parent support groups or /associations and participating in the annual foster parent conference;
- Visiting the foster home;
- Providing training information;
- Providing information regarding available resources; and,
- Performing any other duties identified by the Area Director that will promote the success of the foster home.

The Resource Worker will work with the foster parents to improve the overall working relations between DCFS and the Foster Parent Association:

Volunteer Foster Parent Liaison

The Volunteer Foster Parent Liaison is an experienced foster parent who serves on a voluntary basis as a statewide advocate for other foster parents when they have specific needs or questions about resources. Some of the Volunteer Foster Parent Liaison duties include:

- Serving as a statewide contact to identify resources needed by foster parents and children in care;
- Developing a list of resources for foster parents;
- Assisting foster parents in navigating the child welfare system;
- Advocating for children's educational needs;
- Tracking trends, /issues, or /concerns and sharing those with the DCFS Foster Care Manager;

- ~~M~~aintaining the foster parent website; ~~or~~
- ~~A~~ssisting with recruitment and retention activities.

The Volunteer Foster Parent Liaison may be contacted if the foster parent has a complaint; ~~H~~owever, the Volunteer Foster Parent Liaison is not part of the official Internal Review of Adverse Action procedure (see the section on Foster Parents Internal Review of Adverse Action, for further clarification). In addition, this is not a position that will respond to or mediate specific case issues or personnel issues. Those issues will continue to be handled through the Division DCFS chain of command.

To obtain the current Volunteer Foster Parent Liaison name and contact information, please ask your Resource Worker.

Visits to the Foster Home

The Family Service Worker overseeing the care of individual children in the foster home will make at least weekly visits in the home during the first month of placement. After the first month, the FSW must make weekly contact with the child at school, or during sibling or parental visits, but must continue to visit the home at least monthly. More frequent visitation may be made to the home to help solve any problems that arise.

The visits will be used to relay necessary information to the child and to allow the foster parents to voice their feelings about the placement and subsequent adjustment jointly, as well as, ~~and~~ privately, and to ascertain if the needs of that particular child are being met. Each visit will include a private conversation with the child away from the foster parent. Visits may be scheduled or unannounced.

The Resource Worker will visit the home at least quarterly to monitor continued compliance with licensing standards and to check in with you to make sure you are receiving the support you need as a foster parent.

~~The Resource Worker will visit the home at least quarterly to monitor continued compliance with licensing standards and to check in with you to make sure you are receiving the support you need as a foster parent. You may also have a visit from a Licensing Specialist from the Placement and Residential Licensing Unit (PRLU) of the DHS Division of Child Care and Early Childhood Education (DCCECE). The role of the Licensing Specialist is to ensure that DCFS is meeting its requirements as a child welfare placement agency rather than evaluating you as an individual foster home.~~

Availability of Family Service Worker & Resource Worker to Foster Families

For foster parenting to be a successful experience, one ~~a family~~ must have access to the Family Service Worker and Foster Family Resource Worker. If either of these staff members is absent from the office when telephoned, calls will be returned promptly. If a visit is necessary, it will be scheduled.

Telephone numbers of the Resource Worker who may be contacted after hours will be furnished (See section on DCFS County Office contact persons in the back of this ~~H~~andbook). After hours contact should be used for emergencies only. Also, information will be provided which ~~that~~ may be needed for the child in the home in an emergency situation, such as the child's Medicaid number and Medical Passport, ~~will be provided~~. At the time of placement, all information known about the child will be provided, such as: expected length of stay, information regarding illnesses, chronic health problems, medication, ~~and~~ habits, etc.

Crisis and After Hours Response

Foster parents will have access to a Family Service Worker in their county ~~twenty four (24) hours a day, seven (7) days a week~~. A list of after ~~after~~ hours numbers (on-call pager ~~or~~ /cell phone numbers), where the local on-call FSW can be reached, will be provided. If the after ~~after~~ hours call requires a direct contact with the child's FSW, the on-call worker will provide the assigned Family Service Worker's home phone number or will contact the assigned worker and have that worker make contact.

Child Care for Children in Foster Care

Child care may be authorized and routinely provided for a child in foster care if both parents work outside of the home ~~or, if it the child care is determined to be appropriate as part of the case plan, or if it is court ordered~~. Appropriate reasons include: 1) socialization, kindergarten readiness, and/or therapeutic benefits for the child;

~~and/or, 2) to ensure the child may be placed in a foster home in his/her/their county or in close proximity to his their home. The service may be authorized for up to three (3) months at a time and only be provided by DCFS when resources are available.~~

~~Child care providers must be on the voucher system and licensed by The Division of Child Care and Early Childhood Education (DCCECE) or be on the Voluntary Child Care Registry. If the child was enrolled in child care prior to coming into care, the child should remain in that particular child care facility (provided it is licensed by DCCECE or on the Voluntary Child Care Registry), if at all possible. This in an effort to provide the child with consistency in his/her/their daily caregivers and reduce the amount of trauma a child experiences when coming into foster care.~~

~~If a child was not enrolled in child care prior to coming into care or if a new child care facility must be used, the Division DCFS and foster parents shall make every effort to place the child in a high quality child care center. For more information on high quality child care centers, visit the Better Beginnings website at <http://www.arbetterbeginnings.com/>. [JH10]~~

~~Enrollment in overnight daycares is not allowed. Likewise, late night pick ups (i.e., that being after 8:00 p.m.) from child care centers that have extended hours are also unacceptable.~~

~~Child care may also be provided as a part of an out-of-home placement case to provide assistance to foster parents for non-routine circumstances that relate to the retention and/or support of the foster home, such as foster parent training. Child care provided for such purposes may be reimbursed by the Division DCFS when funding is available.~~

ALTERNATE CARE

~~Alternate care for children in out of home placement may be used to provide assistance to foster parents when circumstances requiring supervision by an appropriate adult, other than the foster parents, exist, such as: e.g., if both foster parents work, during foster parent training, transporting a child in foster care for medical purposes, need for short term, temporary care to provide relief to the foster parent from the on-going responsibility of care, or if both foster parents work etc. Alternate care is as follows:~~

~~**Normal Age-Appropriate Activities**—Children in foster homes should be encouraged to participate in normal, age-appropriate activities, such as overnight visits with friends, extra-curricular activities, church activities, and short term summer camps. Foster parents shall exercise careful consideration when determining whether a child may participate in any normal age appropriate activity. Foster parents shall notify the FSW if the child will spend more than twenty-four (24) continuous hours outside the foster home when participating in said activities.~~

~~**Babysitting**—Babysitters may be used to provide occasional care for children in the foster home for no more than six (6) continuous hours at a one time. Foster parents shall exercise careful consideration when evaluating the character and competence of any individual asked to babysit. Foster parents may reimburse the baby-sitter if they choose to do so. The Division DCFS will not reimburse for baby-sitting services. Babysitters shall not transport children. Background checks are not required.~~

~~**Foster Family Support System**—The Foster Family Support System (FFSS) may be comprised of up to three (3) other households identified by the foster family. FFSS members may provide care for children when the foster parent is unable to do so, on the occasion of anticipated or unanticipated events.~~

~~Foster parents shall exercise careful consideration when evaluating the character and competence of any household asked to serve as an FFSS member. FFSS members must be at least twenty-one (21) years of age. There is not a standard maximum age limit for FFSS members, but FFSS members must be physically, mentally, and emotionally capable of caring for children for up to seventy-two (72) hours. Foster parents may reimburse an FFSS member if they choose to do so. The Division DCFS will not reimburse FFSS members.~~

Members of a Foster Family Support System may transport children and care for children in the foster home or in the home of the FFSS member. However, an FFSS member shall not provide care for more than seventy-two (72) continuous hours at one a time, regardless of the location in which care is provided and/or regardless of which FFSS member is providing care. No extensions may be granted for FFSS care of a child. The FSW shall be notified when an FFSS member will provide care for more than twenty-four (24) continuous hours. FFSS members taking children out of state for overnight trips are prohibited.

The Foster Family Support System shall not be used in place of respite care or as an out-of-home placement. The number of children placed in an FFSS member household must meet all Minimum Licensing and DCFS Policy requirements.

All prospective FFSS members must be cleared through the Child Maltreatment Central Registry and a State Police Criminal Record Check. The Division DCFS will request any other state where the prospective FFSS member has resided in the preceding five (5) years to check its child abuse and neglect registry. The Division DCFS will provide documentation in the case record that the Child Maltreatment Central Registry and State Criminal Record Checks were conducted on the prospective FFSS member.

Documentation of at least one (1) visual inspection of the home for evaluation purposes is required of all prospective FFSS members.

The Division DCFS will check the driving record (violation points) for each potential FFSS member. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points an FFSS member foster parent may be allowed.

Respite Care—When a Foster Family Support System member is not available to provide needed care on a short-term basis, respite care may be utilized in order to temporarily relieve the foster family of the ongoing responsibilities and stresses of care. There are two (2) types of respite care:

Informal Respite Home—An approved DCFS foster home that can provide temporary care when the Foster Family Support System is unable to assist or for situations in which children will be outside of the foster home for more than seventy-two (72) continuous hours. An Informal Respite Home may provide care for no more than seven (7) continuous days at one a time. Periods of respite care in an Informal Respite Home lasting longer than seven (7) consecutive days require approval from the Area Director or designee.

If an Area Director approved extension approved by the Area Director exceeds fourteen (14) continuous days, the regular foster parents' board payment will be affected. If the child has stayed in any combination of FFSS or informal respite homes (i.e., that being, outside of the regular foster home placement), the total amount of days within those alternate care types cannot exceed fourteen (14) consecutive days, as board payment may be affected.)

Foster parents may reimburse an informal respite provider if they choose to do so. The Division DCFS will not reimburse an informal respite provider. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

Formal Respite Care—A DCFS contract provider who supplies short-term respite care, particularly when a child's current placement is at risk of disruption and/or respite is needed to prevent a residential, acute psychiatric, or similar placement. Formal Respite Care should be provided in accordance with a family-driven, youth-guided respite plan and in coordination with a child's behavioral health treatment plan (if applicable):

Formal Respite Care shall be provided for no more than seven (7) days per three (3) month three-month period. Longer periods of Formal Respite Care require approval from the Prevention and Supports Manager. If an approved extension exceeds fourteen (14) consecutive days, the regular foster parents'

~~board payment will be affected. If the child has stayed in any combination of FFSS or informal respite homes (that being, outside the regular foster home placement) before a formal respite stay, the total amount of days within those alternate care types (i.e., outside the regular foster home placement) cannot exceed fourteen (14) consecutive days, as board payment may be affected.~~

Counseling

~~Counseling shall be provided when~~Where there is a need for counseling services for the foster home to prevent disruption and to promote stabilization, counseling shall be provided. Requests for counseling are made to the Family Service Worker, who is responsible for making that referral to the appropriate Community Mental Health Center.

Transportation

~~Foster families should have their own transportation available to transport the child to appointments and /activities. Transportation costs, such as attending staffing meetings, court, visits with parents or siblings, and all medical appointments, will be reimbursed. (Other extraordinary costs may be approved on a case by case/case by case basis).~~

~~Room and board payments include routine travel expenses. As such, transportation will not be reimbursed for shopping for clothes or groceries, taking a child to school, transportation to school activities or church (unless prior approval has been obtained based on special circumstances), or transportation to child care (unless it is a Medicaid allowable expense).~~

~~Extraordinary circumstances might include situations in which a child may wish to attend a church other than that of a foster parent and travelling to his this church would require a significant deviation from the route taken to the church attended by a foster parent. The Assistant Director of Community Services will consider for approval all written requests. Approval will be made based on each individual situations and will be given only for specified time periods.~~

~~Transportation costs are reimbursed to foster parents at a rate determined by the DepartmentDCFS. The foster parent completes a travel reimbursement form (TR-1) and submits it to the County Travel Supervisor for approval and processing. When determining miles driven from city to city for mileage reimbursement, please use the Rand McNally online services at <http://www.randmcnally.com/>.~~

~~Requests for travel reimbursement must be submitted on a monthly basis. Requests for reimbursement for medical and independent living transportation must be submitted on separate TR-1 forms.~~

Medical Transportation

~~The foster family will complete a TR-1 for regular travel and a separate TR-1 for Medicaid travel, e.g., (for example, when a child is taken to receive services from a medical provider). When the foster parent needs assistance with transportation, the foster parent should contact the Family Service Worker as soon as possible. The FSW, Program Assistant, or a volunteer transporter may be assigned to assist with travel.~~

Community Resources

~~The DHS County Office will inform all foster parents about available resources in the community as well as resources in other areas which may be relevant to a particular child. This information will be updated as new services become available.~~

~~It will be the responsibility of DCFS to pursue any mutually agreed upon resource needed for a child which is mutually agreed upon. Foster parent's assistance may be enlisted for this purpose.~~

Foster Parent Associations

~~The formation of active and independent foster parent associations is encouraged. DCFS will provide support by the appointment ofappointing a Resource Worker to the association. A DCFS representative will also be available~~

~~when called upon to provide information about the Foster Care Program and allow foster parents to voice any concerns they may have with DCFS policies.~~

Income Tax Information

~~Board payments paid to foster parents are not considered taxable income by the Internal Revenue Services. Current tax laws may allow special treatment for foster parents. Because IRS laws are complex and subject to change from year to year, for specific tax advice foster parents should consult with an accountant or tax specialist.~~

Internal Review of Adverse Action Involving Foster Parents

~~Foster parents have the right to appeal decisions affecting them and the operation of their home. Most problems can be solved at the local level if the foster parents and FSW keep each other informed about matters of interest and importance pertaining to the child. It is important for foster parents and Family Service Workers to discuss and work out issues and problems as they occur.~~

~~All complaints may not be~~~~Not all complaints will be~~ appropriate for an internal review, and, while the county office will make every effort to reconcile disagreements or other issues, some situations may not be reconcilable such as those decisions made by the county office based on current policy and procedure.

Examples of issues to take through an Internal Review are:

- ~~Closure of a foster home due to any circumstance;~~
- ~~Removal of a child from the foster home without appropriate cause and/or without appropriate notice;~~
- ~~Failure by DCFS to share appropriate information;~~
- ~~Failure by DCFS to provide necessary support (for example, failure to return phone calls or habitually being unavailable when needed; failure to help with initial clothing or problems with the child; or, failure to help provide medical coverage, /Medicaid coverage, and/or a suitable providers[1111]); or~~
- ~~Failure by DCFS to keep the terms of the initial written agreement with the foster home (CFS 462: Initial Foster Home Agreement and CFS 462A: Foster Home Agreement Addendum).~~

~~Prior to requesting an internal review at the Central Office level, foster parents should request an informal discussion of the problem with the FSW and the FSW's immediate supervisor. If, after the foster parents have discussed their issue(s) related to the adverse action with the FSW and the FSW's supervisor, and believe that DCFS failed to uphold its policies and/or philosophies, then, the foster parents must submit in writing their request for the Area Director of the area where the fosters live to review their case as it relates to the adverse action. This request must be submitted to the Area Director thirty (30) calendar days from the date on which the adverse action occurred. The Area Director will schedule a meeting with the foster parents within ten (10) business days of the receipt of the written request and attempt to resolve the problem.~~

~~If the foster parents are not satisfied with the results of the meeting with the Area Director, the foster parents may request an internal review from the Foster Care Manager or designee in Central Office to present their case. A copy of the request and written reports of the previous two (2) meetings will be forwarded to the Foster Care Manager or designee. The Foster Care Manager or designee will review the request and forward it with a recommendation to the Assistant Director of Community Services or designee within ten (10) business days of receipt of the request and written reports.~~

~~The Assistant Director of Community Services or designee will notify the foster parents in writing of the decision of the review within ten (10) business days of receiving the recommendation and other materials from the Foster Care Manager or designee.~~

~~If the decision is unfavorable to the foster parents, the Assistant Director of Community Services or designee will inform the foster parents that they have fifteen (15) business days in which to submit a written appeal to the DCFS Director. The DCFS Director will review the request as well as the previous reports and dispositions. The DCFS Director will then notify the individual within ten (10) business days of the appeal decision. This is a final action and is not appealable to any other person or entity.~~

REPORTS OF CHILD MALTREATMENT INVOLVING MEMBERS OF FOSTER HOMES

~~_____ All child maltreatment allegations concerning any person in a foster home shall be investigated in accordance with the Child Maltreatment Act § 12-18-602.~~

~~_____ If any child in foster care is the subject (alleged offender or alleged victim) of an allegation of child maltreatment, the Division DCFS shall notify the child's family, the OPLS attorney, Child Abuse Hotline, the CASA, and the attorney ad litem. The attorneys ad litem for all other children placed in the home shall be notified as well.~~

~~_____ The safety and welfare of any children in foster care shall be paramount.~~

~~COMPLAINTS AGAINST FOSTER FAMILY OTHER THAN CHILD MALTREATMENT~~

~~Any complaint against the foster parent will immediately be brought to the attention of the DCFS County Office Supervisor or Area Director.~~

~~After the investigation has determined the validity of the complaint, the foster parent will be advised, in writing, of the complaint, the outcome of the investigation, any corrective action needed to be made, and any other action that will be taken. An agreement will be made between the foster parents and their Resource Worker for corrective action. The foster parents must submit, in writing, the steps necessary to correct the deficiency within ten (10) days after notification from the appropriate decision-making personnel, or submit an application applying for alternative compliance (see section on alternative compliance). This corrective action plan must receive the approval of the DCFS County Office Supervisor. Foster parents will notify their local DCFS County Office and Central Office within thirty (30) days of the original findings being received, and that all corrective steps have been completed. In the absence of said notification from the foster parents, it will be presumed that they have elected not to comply with the findings of the appropriate decision-making personnel.~~

~~DCFS will offer any assistance available to correct the problem. If, after working with the foster parents, the problem still exists, another meeting will be held to discuss closing the home.~~

~~Any complaint, regardless of nature, must be recorded in detail in the foster home's record. The report will include the following information:~~

- ~~1. Date and nature of complaint;~~
- ~~2. Source of complaint;~~
- ~~3. Reaction of the foster family;~~
- ~~4. Services offered to the family;~~
- ~~5. Conclusion of investigation; and~~
- ~~6. Corrective action.~~

~~CLOSING A FOSTER HOME~~

~~Division's Decision~~

~~If it is deemed necessary by the county office to close a foster home, a written summary will be prepared documenting past and present reasons for closure, as well as all efforts by the county office to rectify the problem. The final assessment and determination of closure will be made by the Resource Worker in collaboration with the designated county staff, the Area Director, and Central Office staff, (as appropriate). The closure process will include a mandatory face to face conference with the foster parents, at which time reasons for the closure will be explained. The county office will provide written notification of the closure, including the reasons for the closure and the foster parents' right to request an internal review of the adverse action (for additional information, see section on Internal Review of Adverse Action Involving Foster Parents).~~

~~By Request of Foster Family~~

~~If the foster family requests that their home be closed as a foster home, the Resource Worker will discuss the reasons for closure with the foster parents. The request for closure by the foster parents will be confirmed in writing by the Resource Worker and sent to the foster parents.~~

~~After a home has been closed at the request of the foster family, if the family wishes to reopen their home, the family and home must be reevaluated to ensure that all areas of compliance are still met and all background checks must have been repeated. Additional requirements vary depending on how the foster home has been closed.~~

FOSTER CARE PLACEMENT

Legal Factors Pertaining to Foster Care

~~All children entering foster care do so under authorization by the Court.~~

~~Legal custody constitutes authorization by the court for DCFS to assume physical control of a child. A child will never be placed in foster care without legal custody.~~

~~A.C.A. § 9-27-313 authorizes the Division DCFS to take emergency 72 hourseventy two hour legal custody of any child who is in immediate danger when there is not sufficient time to petition for and obtain a court order.~~

~~Termination of parental rights with the power to consent to adoption is primarily granted in cases where the child cannot return home. Adoption may then occur without further notice to the birth/legal parents (birth, legal, or both).~~

Selection of a Foster Home

~~Based on information from the family assessment, the Family Service Worker will select the foster home that best meets the child's needs.~~

~~The law requires that a child be placed in the least restrictive, most family like environment possible. A child will also be placed as close to his their birth/legal parents (birth, legal, or both) as possible. Placement should be in the same county, unless the child needs special services that are not available in the originating county. This is to help facilitate visits with parents, siblings, relatives, or other people with whom the child has established bonds and supportive relationships. Factors taken into consideration in selecting a foster home include: the child's age, sex, religion, disabilities, interests, problems, existence as part of a sibling group, case plan, proximity to family (within a fifty (50) mile radius), maintaining enrollment in the child's school, developmental needs of the child, and, training and skills of foster parents. Consideration will be given to the foster parent's preferences as to children approved for their home. There will be no violation of the limitations of these preferences.~~

~~A foster home offers a less restrictive environment than other types of out-of-home placement and is particularly adapted to meet the developmental needs of a child.~~

~~A foster home is suitable for any child who can accept family life, attend community schools, and live in the community without posing a danger to self or others. This includes children with special needs.~~

Preparing the Foster Parents for Placement of a Child

~~The Family Service Worker will realistically describe the child in foster care to the foster parent when asking a family to accept a child. However, sometimes in emergency situations, all information may not be known.~~

~~The following will be included in the child's description:~~

- ~~● Age;~~
- ~~● Probable length of placement;~~
- ~~● Education and school information;~~
- ~~● Health of child and, special health needs;~~
- ~~● Disabilities, special equipment, facilities, or help needed;~~
- ~~● Behavior, both positive and negative, that can be expected;~~
- ~~● Siblings and where they live;~~
- ~~● Reasons the child is in foster care;~~
- ~~● A general indication of the case plan, including the plan for visitation of both parents and any siblings; and,~~
- ~~● Interests.~~

~~This information is confidential and should be treated as such.~~

~~The Family Service Worker will arrange pre-placement visits between the child and the foster family. Several visits are preferred, but a minimum of one (1) pre-placement visit is required, except in emergencies.~~

~~The Family Service Worker will know or at least meet the foster parents before taking a child for pre-placement or placement visits in a provider's home.~~

~~The Family Service Worker will discuss these pre-placement issues:~~

- ~~• General requirements regarding the number of children that reside in the foster home;~~
- ~~• Where the child will be in school, how the child will get to school, arrangement for the transfer of school records, and who will have a conference with the teacher or principal;~~
- ~~• Activities, toys, etc. and other things the child enjoys, the child's likes, and any fears the child may have;~~
- ~~• Financial arrangements;~~
- ~~• The foster parent's feelings on the impending placement;~~
- ~~• The foster parent's perception of the child;~~
- ~~• Maintaining the child's records; and,~~
- ~~• Medical needs and issues.~~

~~Foster parents shall maintain records in accordance with DCFS' policy and procedures for the children placed with the family. The records shall include:~~

~~1. Health Records:~~

- ~~a) Name, address, and telephone number of a person to contact in case of emergency and those persons authorized to give medical consent; and~~
- ~~b) A record of the child's medical and dental appointments, illnesses and health problems, prescribed medications, immunization record, and hospitalizations (Medical Passport).~~

~~2. Progress Records:~~

- ~~a) The dates of arrival and departure of the child in the foster home;~~
- ~~b) Progress notes on those areas of the child's case plan as indicated in the written agreement in which foster parents are involved;~~
- ~~c) Journal of the child regarding significant events;~~
- ~~d) School reports;~~
- ~~e) Significant photographs of the child taken periodically; and,~~
- ~~f) A record of the child's memberships, and participation in extracurricular activities.~~

Role of Resource Worker

~~The Resource Worker will help foster parents understand that the child is going through a series of changes. Among these are: separation from the birth/legal parents (birth, legal, or both) and interacting , interactions with DCFS personnel, a new family, and new surroundings. The child in care can experience anxiety as a result of these changes. The Resource Worker will suggest to the foster parents ways to help the child move through these changes. The Family Service Worker will also assist the foster family through difficulties which that occur, emphasizing that there will be good times and bad times during the placement, and that the bad times are no reflection on their parenting ability. In part, the goal of support from the Resource Worker is to help assure continuity for children who are placed in their home. In supporting the foster parents, the Resource Worker will work with them to help prevent the potential harm that can come to a child due to several moves.~~

Placement of Children by a Sheriff or Chief of Police

~~In an emergency situation, a Sheriff or Chief of Police may place children in a DCFS foster home. The foster parent must be well known to the Sheriff or Chief of Police, and they must determine that the foster home is safe and provides adequate accommodations for the child. The foster parent must notify DCFS county staff on the next business day after the placement of the child.~~

FINANCES

Board Payment

DCFS makes a monthly board payment to foster parents. This monthly board payment includes payment for room and board, clothing, ongoing school and personal supplies, and a small allowance for the child. The amount listed below is included in the monthly board payment and must be used for the child. If a child in foster care is eligible for Medicaid, foster parents are required to use a Medicaid provider for meeting the medical needs of the child. Medicaid should be the primary payment source for medical and dental services, including hospitalization. If Medicaid cannot cover such expenses, state funds may be a secondary payment option.

Generally, foster parents receive the board payment in the fourth week of each month. The monthly board payment is for the period starting on the 27th ~~twenty-seventh~~ of the month and ending the 26th ~~twenty-sixth~~ of the following month. For example, October's board payment is for the thirty (30) days that begin on September 27th and end on October 26th.

Other services or supplies needed by the child must be authorized and approved per DCFS policy. (See section on additional expenses.)

DCFS shall pay foster parents a monthly board rate according to the following chart; these rates are effective for board payments of November 2009 and after:

Birth through five (5) years	\$410.00 Monthly
Board and Care	350.00
Clothing	45.00
Personal Needs	15.00
Six (6) through eleven (11) years	\$440.00 Monthly
Board and Care	365.00
Clothing	50.00
School and Personal Needs	25.00
Twelve (12) through fourteen (14) years	\$470.00 Monthly
Board and Care	380.00
Clothing	60.00
School and Personal Needs	30.00
Fifteen (15) through seventeen (17)* years	\$500.00 Monthly
Board and Care	395.00
Clothing	70.00
School and Personal Needs	35.00

*Refer to Policy VIII-B for requirements to continue board payments for youth who are age eighteen (18) through twenty (18-20)(20) years of age (board payments must end the day the youth elects to leave foster care or the end of the month of his thier twenty first 21st birthday).

Board rates are established as part of policy, and any exception must receive prior approval [MG12]. (For more information, see section on Special Board Rates.)

If a child is absent from the foster home for hospitalization or a trial placement for ten (10) days or less and is to return to that home, no change of status is necessary. However, the child's Family Service Worker must always be advised of an absence from the home.

The agency [MG13] pays according to the number of nights a child is in the foster home. Payment for stays of less than twenty-four (24) hours will be based upon a daily rate determined by the Division DCFS. If a child is in the home for part of a month, a partial board payment will be made.

Clothing

When a child first enters foster care, the Division DCFS may issue an initial clothing order for the purchase of new clothing. Initial clothing orders will be issued on a case-by-case basis. Not all children will need to purchase new clothing, as they may come into care with ample clothing. The FSW will assess what clothing items are needed and issue the authorized amount of clothing allowance. Purchases will be made using the DHS 1914 process, which

requires submission to and approval by the Financial Support Unit. Upon approval, a typical scenario might involve the foster parent selecting clothing and leaving it with appropriate customer service staff of the store, where the FSW may present and pay for the merchandise.

Foster parents should use the following guidelines:

1. ~~With the assistance of DCFS, Foster parents shall provide, with the assistance of the Division, each child with their own clean, well-fitting, attractive [MG14], seasonal clothing that is appropriate to age, sex, and individual needs individual needs, and is comparable to the community standards.~~
2. ~~Foster parents shall include the child in the choosing of their own clothing whenever possible and age appropriate.~~
3. ~~Foster parents shall allow the child to bring and acquire personal belongings. The foster parent should establish and maintain a personal property inventory.~~
4. ~~Money for clothing and personal needs paid monthly to foster parents is based on the age of the child. The foster parents are to spend that amount of money for the child. Money may be spent monthly or may be saved and used for a larger purchase at a later time.~~
5. ~~Foster parents shall send all personal clothing and belongings with the child when the child leaves the foster home. To facilitate this, the foster parent should maintain a clothing inventory.~~

Personal Allowance for a Child in Foster Care

The foster parent will give an allowance to the child from the board payment. The amount of the child's allowance is decided by the foster parent, based on the child's age.

Special Board Rates

There are occasions when the regular board rate is inadequate when caring for a child with special needs. Foster parents may identify and document those needs so that the Family Service Worker can request authorization from the Area Director for a special board rate.

Overpayments to Foster Parents

From time to time, foster parents may be overpaid on a board payment. If this happens, during the next month, the computer system may automatically generate a correction. The amount of the overpayment will become an accounts receivable due from the foster parent if restitution is not made prior to the next payment cycle. Per funding source, each subsequent board payment will be offset until the amount of the overpayment is recovered. The funding source of the board payment (federal or state funds) will determine whether the overpayment is deducted from the next board payment. If funds are from the same funding source, it will be deducted from the next board payment. If it is not deducted, the Office of Finance and Administrative Services will send a notice of overpayment. Account reviews are processed monthly, and overpayment statements are normally sent monthly.

A foster parent may contact the Foster Care Technical Assistance Unit at 501-682-8345 for help with any overpayment statement. The unit will research the overpayment and provide an explanation.

Reduced Board Rates

A child's board rate may sometimes need to be reduced rather than increased. This applies to those children who are residents of a state institution, such as, e.g., School for the Deaf or Blind, Rehabilitation [JH15] Training Facility, Human Development Center, or who are attending college and for whom the case plan includes visits in the foster home on weekends, holidays, or summer vacation. Board Payments will only be made for a child visiting in a foster home for the actual time the child is there.

Foster Care Payment and Eligibility for Assistance

Board payments, made by DCFS for the care of children in homes of public assistance recipients, are not considered as a resource in determining eligibility for assistance or the amount of the grant. This payment is designated for certain purposes and is not available to the foster parents. For any foster parent applying for the

~~Supplemental Nutrition Assistance Program (SNAP; formerly: “food stamps”), a re-evaluation of stable income will take place. This may impact the approval status of the foster home.~~

School Lunches

~~Children in foster care are eligible for free meals in all schools which that participate in the National School Lunch and /Breakfast Programs and in the Commodity-only schools.~~

WIC Programs

~~The Women, Infants, and Children Food Program, (WIC), is administered by the Health Department. The program provides, on a monthly basis, nutritious foods for pregnant and nursing women and infants and children up to age five (5) years of age on a monthly basis. Eligibility is determined by a medical assessment of nutrition risks, including but not limited towithout limitation such as iron poor blood and improper growth, etc. Foods provided by WIC are supplemental and are not intended to fulfill all nutritional needs for a month. Children in foster care may be eligible for WIC.~~

Replacement and/or Supplemental Clothing

~~A monthly allowance for clothing replacement is included in the board payment. During the months when there are no replacements, the clothing allowance must be saved for the months when more than usual amounts of clothing are needed. If there is a month when no replacement clothing purchases are made, save the clothing allowance for months when the clothing needs may be more than what the monthly allowance will afford. All receipts from the purchase of clothes must be retained and turned in to the Resource Worker at the quarterly visit.~~

~~With the approval of the County Office Supervisor and Area Director, it is permissible to obtain another clothing order. This should happen only in an exceptional circumstance. The foster parent may request a “Replacement or /Supplemental Clothing Order.” These requests may not exceed four hundred dollars (\$400.00) in one (1) quarter. The foster parent should contact the Family Service Worker in the event that this need should arise.~~

Payment for Medical Services

~~Medicaid is the primary source of medical payment for children in foster care. If a child in the home does not receive a Medicaid card, contact the Family Service Worker. (A card should be received within one (1) a week for a new child and by the third of the month thereafter.) Although the FSW may provide a copy of the Medicaid Card for the foster parent to keep in the Medical Passport, and so that they may obtain medical services for the child, the actual Medicaid Card will be kept in the child’s case record in the county office. When there are no Medicaid providers available in cases of emergency, the Family Services Worker (with the approval of the County Supervisor) will authorize and bill medical services via DHS-1914 or contract. In the event that medical services are denied by Medicaid, the child’s medical needs will be met with Foster Care funds. A child shall not be denied medical services because the child is not Medicaid eligible.~~

Additional Expenses

~~In addition to the items already listed, the following items are allowable with the approval of the County Office Supervisor:~~

- ~~• Required School Materials and School Fees, including athletic wear. Foster parents must have prior approval for such purchases.~~
- ~~• Graduation Expenses—The DivisionDCFS recognizes and values the importance of education, and the importance of youth in foster care completing their education. There are certain expenses that can be purchased and/or reimbursed for senior year graduation. All these expenses, whether purchased by the DivisionDCFS or reimbursed to the foster parent, require prior approval. High School Graduation expenses will be authorized for the following items:
 - ~~○ Senior Ring: Maximum total amount the DivisionDCFS will commit is two hundred and fifty dollars (\$250.00.00).~~
 - ~~○ Prom: Maximum total cost amount the DivisionDCFS will commit is three hundred and fifty dollars (\$350.00).00. This cost amount can be spent on shall include a prom dress or tuxedo, alterations, tux, shoes, undergarments, and tickets to prom (if there is a cost).~~~~

- ~~The Division DCFS will reimburse a maximum amount of five hundred dollars (\$500.00).00 for cap, /gown, graduation invitations, thank-you notes, and senior pictures.~~
- ~~Cell Phones~~ The Division DCFS generally does not provide cell phones. If a foster family chooses to allow a child in care to purchase or use a cell phone, the Division DCFS will not be responsible for any expenses related to the purchase, use, or abuse of the phone.
- ~~Holiday Allowance~~ Children will be provided additional funds so they may participate in H holiday giving. The amount will be based on the age of the child. Consult the Family Service Worker₁ with regard to regarding the amount provided. The money is included in the November check and is to be used by the child for purchasing gifts for biological family members and friends.
- ~~Emergency medical services and drugs not purchasable by Medicaid₂~~
- ~~Non-Medical transportation provided by the foster parent or public carriers when directly related to the case plan for the child. (See Transportation section).~~
- ~~Child care or B baby-sitting fees, when required to attend training or for one's the foster parents' own children when transporting a foster child to services, are also reimbursable. This does not include child care for a foster parent's employment.~~

~~Any other expenses must receive prior approval from the Area Director. This can be requested by the Family Service Worker.~~

Trust Funds

~~When a child in foster care has income from child support or Social Security benefits, DCFS will apply to become payee. The child's funds will be deposited into a trust account for the child if payee status is awarded to the Division DCFS. Separate accounts are maintained for each individual child in foster care, including those from the same sibling group. The funds in the account should be utilized solely for the individual child for whom the account was established, and no funds should be spent for any other child.~~

~~Foster care trust accounts are delineated into two (2) distinct types: Dedicated and Regular. Each account type has different rules for how the funds may be spent.~~

Dedicated Trust Account

~~A Dedicated Account is usually funded from the Supplemental Security Income (SSI) Program administered by the Social Security Administration (SSA). SSA deposits funds in this type of account if the child is owed six (6) or more months of retroactive payments. DCFS must obtain permission from the SSA to spend money from a Dedicated Account. With prior approval from the SSA, income in a Dedicated Account may be used for the following:~~

- ~~1. Medical Treatment; and~~
- ~~2. If pertaining to an impairment:~~
 - ~~a) Personal needs assistance;~~
 - ~~b) Housing modifications;~~
 - ~~c) Special Equipment;~~
 - ~~d) Therapy or rehabilitation; or~~
 - ~~e) Other items or services if approved by the SSA.~~

Regular Trust Account

~~Money in a Regular Account is usually income from child support or Social Security Survivor's (Title II) benefits. Although these funds have fewer restrictions than a Dedicated Account, spending must be appropriately prioritized according to the child's needs:~~

- ~~1. Medical needs.~~
- ~~2. Reimbursement of board or /contract (or both) payments.~~
- ~~3. Clothing purchases:~~

- a) ~~Initial clothing is limited to one hundred and fifty dollars (\$150.00).00 upon entry into foster care.~~
- b) ~~Supplemental clothing is limited to a maximum of four hundred dollars (\$400.00).00 per calendar quarter.~~
- 4. ~~Education-related expenses, including fees for extracurricular activities, but excluding school supplies (which are covered in the monthly board payment).~~
- 5. ~~Miscellaneous expenses, including damaged or /destroyed property, legal fees, or restitution for stolen goods etc, but, eExcluding clothing, toys, and electronic equipment.~~
- 6. ~~Electronic equipment purchases must have prior approval from the Area Director.~~
- 7. ~~Exceptional purchases, such as toys or video games purchased outside of Christmas purchases, must not exceed twenty percent (20%) or five hundred dollars (\$500.00).00 of the child's available trust account balance and be appropriate for the child's age and/or any disability that they may have. Expenditures exceeding twenty percent (20%) must have prior approval of the supervisor and Area Director.~~

~~After basic needs are met, purchases may be made for items or services that will enrich the child's life. Examples of this include, but are not limited to items such as, including without limitation tutoring, music lessons, and dance lessons.~~

~~Purchases utilizing the funds of trust accounts must be approved by the child's FSW. In some instances, approvals must also be approved by the FSW's Supervisor, Area Director, and/or DCFS Executive Staff. Only DCFS staff is permitted to make purchases from the accounts. To maintain a child's eligibility for some Medicaid Programs, the balances in Regular Accounts must remain within limits set by the State and Federal Governments. For example, if a child is receiving SSI, then the countable value of the Regular Trust Account must be under two thousand dollars (\$2,000.00) at the end of each month. A report is available to DCFS staff that lists children in foster care with Regular Account balances of one thousand dollars (\$1,000.00) or more.~~

~~Foster parents are encouraged to assist DCFS in identifying children's needs that can be met using foster care trust funds. Recommendations for purchases that meet the criteria discussed in this document should be made to the FSW so DCFS may decide if money is available for the purchase from a trust account and so that DCFS may secure the necessary approvals to make the purchase.~~

Incidental Expenses

~~An Incidental Expense Fund is established for the purpose of providing items and activities that which serve to normalize a child's life experience while in care. For example, camp fees, music lessons, field trips, school uniforms and other items not specifically covered by other means can be met by this fund. The Incidental Expense Fund is intended for items or activities which that cost twenty five dollars (\$25.00) or more. U and use of the funds does not require prior approval. Items covered by the board payment are not eligible for reimbursement from this fund. In addition, these funds shall not be used for Holiday gifts. The Family Service Worker will assist the foster parent in accessing these funds when the money is needed for a situation that meets the policy guidelines.~~

MEDICAL SERVICES

Medical Passport

~~In order to To comply with health care standards in the interest of good clinical practice and effective service to children in foster care, an abbreviated health record ("Medical Passport") shall be completed by the Family Service Worker or Health Services Specialist for each child. The Medical Passport will include initial health screening, timely comprehensive health assessments, and a descriptive health plan for each child.~~

~~The Family Service Worker or Health Service Unit shall request medical records on the child for the time prior to entry in foster care. The medical history information gathered shall be given to the physician who will do the comprehensive health assessment. The medical history is used to supplement and correct the child's Medical Passport. Requests for medical records are documented on the Requested Medical Records Log, CFS-353.~~

~~The Medical Passport forms are to be completed during initial placement into foster care. The Family Service Worker shall complete CFS-362: Medi Alert to Foster Care Provider and CFS-6007: Placement Plan Placement Provider Information. The Family Service Worker and the foster parent are to complete CFS-365: Receipt for~~

~~Medical Passport, optional together. The CFS 352 is used for Initial Dental Exam, Medical, Vision, Hearing, & Psychological Episodic. The CFS 366 is used for the Initial Physical.~~

~~After each health care visit, the Family Service Worker, Health Service Unit, or Health Care Specialist shall collect records of the child's health care, keep the child's Medical Passport up to date, and shall provide the revised Passport to the child's foster parent.~~

Initial Health Screening

~~A child who enters the custody of DHS shall receive an initial health screening:~~

- ~~• Not more than twenty four (24) hours after removal from home, if the reason for removal is an allegation of severe maltreatment or there is evidence of acute illness or injury; and~~
- ~~• Not more than seventy two (72) hours after removal from the home for all other children.~~

~~The foster parent should accompany the child to the initial screening, and to any appointments for on going health or mental health services. If this is not possible, the foster parent shall be available by telephone to the person conducting the screening. The Family Service Worker or Health Service Unit shall inform the foster parent of the results of the screening, and provide any instructions for the child's care and treatment, and shall give the foster parent the name of the person who performed the screening, and shall give the foster parent the names of the child's prior health care providers, if known.~~

~~The initial health screening should include a head-to-toe physical. If possible, the physical should be conducted by the child's Primary Care Physician (PCP). Within the first thirty (30) days, the following tests will be conducted:~~

- ~~• Complete blood count;~~
- ~~• Check for anemia and infection;~~
- ~~• Abnormalities in the urine (urinalysis);~~
- ~~• HIV, sickle cell, tuberculosis, and other communicable diseases, shall be considered (for children in high high-risk groups); and~~
- ~~• Immunizations, and lead poisoning levels are (usually completed at the local County Health Office).~~

~~Upon completion of the initial health screening, the Family Service Worker or Health Service Unit shall complete the CFS 362: Medi Alert and give a copy to the child's foster parent.~~

~~All health screening requirements conform to the Child Welfare League of America's 2004 Standards for Health Care Services for Children in Out of Home Care.~~

Assessing Health Needs

~~If the initial health screening indicates that treatment or further evaluation is needed within thirty (30) days, the Family Service Worker or Health Service Unit shall ensure that the need is promptly met.~~

~~The foster parent should accompany the child to receive treatment, and shall consult with the health care provider about the child's health care needs. DCFS shall provide assistance with transportation, child care for other children in the foster home, and other necessary support to enable the foster parent to accompany the child to this and any subsequent health care visits. This assistance may either be provided through the use of DCFS staff, including paid or volunteer aides, or through agreements to reimburse the foster parent for such supportive services.~~

~~If a foster parent cannot accompany the child, the Family Service Worker or Health Service Unit shall accompany the child, and convey the health care provider's diagnosis and instructions to the foster parent. The Medical Passport shall be revised and this revision provided to the foster parent.~~

Comprehensive Health Assessment

~~A comprehensive health assessment should be completed within sixty (60) days of placement. The comprehensive health assessment includes assessments of cognition and /achievement, speech and /language development, hearing, vision, medical, emotional, and behavioral development. The University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation (UAMS PACE) Program program is responsible for conducting the comprehensive health assessments. Medications should be provided as necessary.~~

~~Within the first sixty (60) days, a dental examination should be completed for signs of infection, gross abnormalities, malocclusion, painful areas, inflammation of the gums, plaque deposits, decayed or missing teeth, and an assessment of the continuing dental hygiene practices for the child. All follow-up dental work that is recommended by the provider shall be completed in thirty (30) days.~~

~~Birth/legal pParents (birth, legal, or both) or relevant members of the extended family should be encouraged, when appropriate, to participate in the Comprehensive Health Assessment.~~

~~After the Comprehensive Health Assessment, there will be a written summary of the medical, mental health, educational, dental, and social status, and needs of the child. The Child's Health Services Plan should be completed at the Comprehensive Assessment. The Family Service Worker or Health Service Unit shall provide copies of the health plan and updates to the child's birth/legal parents (birth, legal, or both), foster parents, and the child within seven (7) days, if the child is tenage (10) years of age or older within seven (7) days.~~

Continuing Health Services

~~After the initial physical, dental, visual, and hearing examinations are completed during the Comprehensive Health Assessment, all subsequent examinations shall be accomplished as part of the ongoing Early Periodic Screening Diagnosis Treatment (EPSDT) screening program, based on the respective periodicity schedules. The medical provider will complete CFS-352 at each examination. A physical examination control schedule shall be maintained so that examinations are conducted according to the Division of Medical Services' EPSDT periodicity schedule. The Family Service Worker or Health Service Unit shall update the CFS-362, CFS-6007, and CFS-368 as necessary, after each physical examination.~~

~~The initial screening can be received at any age. The Family Service Worker shall schedule all subsequent screenings according to the 2005 American Academy of Pediatrics periodicity schedule on the next page. If a child needs a screening outside the periodicity schedule, the Family Service Worker may issue an EMS-694 marked, "Child in foster care—Unscheduled EPSDT Screening authorized by the Division of Children and Family Services", thirty (30) days before the appointment.~~

Mandatory Immunizations

~~State law requires that certain immunizations are obtained before a child enters school. Foster parents should assist in maintaining current immunizations. (See Recommended Immunizations Timetable).~~

Physicians' Guide to Preventive Health Screening

KEY: ✓ = to be performed
R = to be performed for patients at risk
0 = objective, by a standard testing method
S = subjective, by history
↔ = range during which a service may be provided, with the dot indicating the preferred age

TYPE OF EXAMINATION	AGE OF PATIENT																													
	Prenatal	Newborn	2-4 days	By 1 month	2 months	4 months	6 months	9 months	12 months	15 months	18 months	24 months	3 years	4 years	5 years	6 years	8 years	10 years	11 years	12 years	13 years	14 years	15 years	16 years	17 years	18 years	19 years	20 years	21 years	
HISTORY																														
Initial/Interval	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
MEASUREMENTS																														
Height & Weight	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Blood Pressure																														
Head Circumference	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
SENSORY SCREENING																														
Vision		S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	
Hearing		0	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	
DEVELOPMENTAL/BEHAVIORAL ASSESSMENT		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
PHYSICAL EXAMINATION	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
PROCEDURES—GENERAL																														
Head/Neck/Metabolic Screening		↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	
Immunization		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Hemoglobin or Hemoglobin Urinalysis								●	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	
PROCEDURES—PATIENT AT RISK																														
Lead Screening								●	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	
Tuberculin Test												✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Onderskin Screening												✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
STD Screening													✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Public Exam																														
ANTICIPATORY GUIDANCE																														
Injury Prevention	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Violence Prevention																														
Sleep Positioning Counseling	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Nutritional Counseling	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
DENTAL REFERRAL																														

*If not performed at 12 or 24 months
Based on AAP recommendations, as of 2005.

This material was prepared by Arkansas Foundation for Medical Care (AFMC) under contracts with the Arkansas Department of Human Services. The contents presented do not necessarily reflect their policies. The Arkansas Department of Human Services is in compliance with Titles III and VIII of the Civil Rights Act. MP2-040415.0211, 1-2006

Recommended Immunization Schedule for Persons Aged 0 Through 6 Years—United States • 2009

For those who fall behind or start late, see the catch-up schedule

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years
Hepatitis B ¹		HepB	HepB	^{see footnote 1}		HepB						
Rotavirus ²			RV	RV	RV ²							
Diphtheria, Tetanus, Pertussis ³			DTaP	DTaP	DTaP	^{see footnote 3}	DTaP					DTaP
Haemophilus influenzae type b ⁴			Hib	Hib	Hib ⁴		Hib					
Pneumococcal ⁵			PCV	PCV	PCV		PCV				PPSV	
Inactivated Poliovirus			IPV	IPV			IPV					IPV
Influenza ⁶							Influenza (Yearly)					
Measles, Mumps, Rubella ⁷							MMR		see footnote 7			MMR
Varicella ⁸							Varicella		see footnote 8			Varicella
Hepatitis A ⁹							HepA (2 doses)				HepA Series	
Meningococcal ¹⁰											MCV	

Range of recommended ages

Certain high-risk groups

This schedule indicates the recommended ages for routine administration of currently licensed vaccines, as of December 1, 2008, for children aged 0 through 6 years. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. Licensed combination vaccines may be used whenever any component of the combination is indicated and other components are not contraindicated and if approved by the Food and Drug Administration for that dose of

the series. Providers should consult the relevant Advisory Committee on Immunization Practices statement for detailed recommendations, including high-risk conditions: <http://www.cdc.gov/vaccines/pubs/acip-list.htm>. Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System (VAERS). Guidance about how to obtain and complete a VAERS form is available at <http://www.vaers.hhs.gov> or by telephone, 800-822-7967.

1. Hepatitis B vaccine (HepB). (Minimum age: birth)

At birth:

- Administer monovalent HepB to all newborns before hospital discharge.
- If mother is hepatitis B surface antigen (HBsAg)-positive, administer HepB and 0.5 mL of hepatitis B immune globulin (HBIG) within 12 hours of birth.
- If mother's HBsAg status is unknown, administer HepB within 12 hours of birth. Determine mother's HBsAg status as soon as possible and, if HBsAg-positive, administer HBIG (no later than age 1 week).

After the birth dose:

- The HepB series should be completed with either monovalent HepB or a combination vaccine containing HepB. The second dose should be administered at age 1 or 2 months. The final dose should be administered no earlier than age 24 weeks.
- Infants born to HBsAg-positive mothers should be tested for HBsAg and antibody to HBsAg (anti-HBs) after completion of at least 3 doses of the HepB series, at age 9 through 18 months (generally at the next well-child visit).

4-month dose:

- Administration of 4 doses of HepB to infants is permissible when combination vaccines containing HepB are administered after the birth dose.

2. Rotavirus vaccine (RV). (Minimum age: 6 weeks)

- Administer the first dose at age 6 through 14 weeks (maximum age: 14 weeks 6 days). Vaccination should not be initiated for infants aged 15 weeks or older (i.e., 15 weeks 0 days or older).
- Administer the final dose in the series by age 8 months 0 days.
- If Rotarix[®] is administered at ages 2 and 4 months, a dose at 6 months is not indicated.

3. Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP). (Minimum age: 6 weeks)

- The fourth dose may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.
- Administer the final dose in the series at age 4 through 6 years.

4. Haemophilus influenzae type b conjugate vaccine (Hib). (Minimum age: 6 weeks)

- If PRP-OMP (PedvaxHIB[®] or Comvax[®] [HepB-Hib]) is administered at ages 2 and 4 months, a dose at age 6 months is not indicated.
- TriHibit[®] (DTaP/Hib) should not be used for doses at ages 2, 4, or 6 months but can be used as the final dose in children aged 12 months or older.

5. Pneumococcal vaccine. (Minimum age: 6 weeks for pneumococcal conjugate vaccine [PCV]; 2 years for pneumococcal polysaccharide vaccine [PPSV])

- PCV is recommended for all children aged younger than 6 years. Administer 1 dose of PCV to all healthy children aged 24 through 59 months who are not completely vaccinated for their age.

- Administer PPSV to children aged 2 years or older with certain underlying medical conditions (see MMWR 2000;49[No. RR-9]), including a cochlear implant.

6. Influenza vaccine. (Minimum age: 6 months for trivalent inactivated influenza vaccine [TIV]; 2 years for live, attenuated influenza vaccine [LAIV])

- Administer annually to children aged 6 months through 18 years.
- For healthy nonpregnant persons (i.e., those who do not have underlying medical conditions that predispose them to influenza complications) aged 2 through 49 years, either LAIV or TIV may be used.
- Children receiving TIV should receive 0.25 mL if aged 6 through 35 months or 0.5 mL if aged 3 years or older.
- Administer 2 doses (separated by at least 4 weeks) to children aged younger than 9 years who are receiving influenza vaccine for the first time or who were vaccinated for the first time during the previous influenza season but only received 1 dose.

7. Measles, mumps, and rubella vaccine (MMR). (Minimum age: 12 months)

- Administer the second dose at age 4 through 6 years. However, the second dose may be administered before age 4, provided at least 28 days have elapsed since the first dose.

8. Varicella vaccine. (Minimum age: 12 months)

- Administer the second dose at age 4 through 6 years. However, the second dose may be administered before age 4, provided at least 3 months have elapsed since the first dose.
- For children aged 12 months through 12 years the minimum interval between doses is 3 months. However, if the second dose was administered at least 28 days after the first dose, it can be accepted as valid.

9. Hepatitis A vaccine (HepA). (Minimum age: 12 months)

- Administer to all children aged 1 year (i.e., aged 12 through 23 months). Administer 2 doses at least 6 months apart.
- Children not fully vaccinated by age 2 years can be vaccinated at subsequent visits.
- HepA also is recommended for children older than 1 year who live in areas where vaccination programs target older children or who are at increased risk of infection. See MMWR 2006;55[No. RR-7].

10. Meningococcal vaccine. (Minimum age: 2 years for meningococcal conjugate vaccine [MCV] and for meningococcal polysaccharide vaccine [MPSV])

- Administer MCV to children aged 2 through 10 years with terminal complement component deficiency, anatomic or functional asplenia, and certain other high-risk groups. See MMWR 2005;54[No. RR-7].
- Persons who received MPSV 3 or more years previously and who remain at increased risk for meningococcal disease should be revaccinated with MCV.

The Recommended Immunization Schedules for Persons Aged 0 Through 18 Years are approved by the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/imz/acip/), the American Academy of Pediatrics (<http://www.aap.org/>), and the American Academy of Family Physicians (<http://www.aafp.org/>).

DEPARTMENT OF HEALTH AND HUMAN SERVICES • CENTERS FOR DISEASE CONTROL AND PREVENTION

Recommended Immunization Schedule for Persons Aged 7 Through 18 Years—United States • 2009
 For those who fall behind or start late, see the schedule below and the catch-up schedule

Vaccine ▼	Age ►	7–10 years	11–12 years	13–18 years
Tetanus, Diphtheria, Pertussis ¹	see footnote 1		Tdap	Tdap
Human Papillomavirus ²	see footnote 2		HPV (3 doses)	HPV Series
Meningococcal ³		MCV	MCV	MCV
Influenza ⁴		Influenza (Yearly)		
Pneumococcal ⁵			PPSV	
Hepatitis A ⁶		HepA Series		
Hepatitis B ⁷			HepB Series	
Inactivated Poliovirus ⁸			IPV Series	
Measles, Mumps, Rubella ⁹			MMR Series	
Varicella ¹⁰			Varicella Series	

Range of recommended ages

Catch-up immunization

Certain high-risk groups

This schedule indicates the recommended ages for routine administration of currently licensed vaccines, as of December 1, 2008, for children aged 7 through 18 years. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. Licensed combination vaccines may be used whenever any component of the combination is indicated and other components are not contraindicated and if approved by the Food and Drug Administration for that dose of

the series. Providers should consult the relevant Advisory Committee on Immunization Practices statement for detailed recommendations, including high-risk conditions: <http://www.cdc.gov/vaccines/pubs/acip-list.htm>. Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System (VAERS). Guidance about how to obtain and complete a VAERS form is available at <http://www.vaers.hhs.gov> or by telephone, 800-822-7967.

1. Tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap). (Minimum age: 10 years for BOOSTRIX® and 11 years for ADACEL®)

- Administer at age 11 or 12 years for those who have completed the recommended childhood DTP/DTaP vaccination series and have not received a tetanus and diphtheria toxoid (Td) booster dose.
- Persons aged 13 through 18 years who have not received Tdap should receive a dose.
- A 5-year interval from the last Td dose is encouraged when Tdap is used as a booster dose; however, a shorter interval may be used if pertussis immunity is needed.

2. Human papillomavirus vaccine (HPV). (Minimum age: 9 years)

- Administer the first dose to females at age 11 or 12 years.
- Administer the second dose 2 months after the first dose and the third dose 6 months after the first dose (at least 24 weeks after the first dose).
- Administer the series to females at age 13 through 18 years if not previously vaccinated.

3. Meningococcal conjugate vaccine (MCV).

- Administer at age 11 or 12 years, or at age 13 through 18 years if not previously vaccinated.
- Administer to previously unvaccinated college freshmen living in a dormitory.
- MCV is recommended for children aged 2 through 10 years with terminal complement component deficiency, anatomic or functional asplenia, and certain other groups at high risk. See *MMWR* 2005;54(No. RR-7).
- Persons who received MPSV 5 or more years previously and remain at increased risk for meningococcal disease should be revaccinated with MCV.

4. Influenza vaccine.

- Administer annually to children aged 6 months through 18 years.
- For healthy nonpregnant persons (i.e., those who do not have underlying medical conditions that predispose them to influenza complications) aged 2 through 49 years, either LAIV or TIV may be used.
- Administer 2 doses (separated by at least 4 weeks) to children aged younger than 9 years who are receiving influenza vaccine for the first time or who were vaccinated for the first time during the previous influenza season but only received 1 dose.

5. Pneumococcal polysaccharide vaccine (PPSV).

- Administer to children with certain underlying medical conditions (see *MMWR* 1997;46(No. RR-8)), including a cochlear implant.
- A single revaccination should be administered to children with functional or anatomic asplenia or other immunocompromising condition after 5 years.

6. Hepatitis A vaccine (HepA).

- Administer 2 doses at least 6 months apart.
- HepA is recommended for children older than 1 year who live in areas where vaccination programs target older children or who are at increased risk of infection. See *MMWR* 2006;55(No. RR-7).

7. Hepatitis B vaccine (HepB).

- Administer the 3-dose series to those not previously vaccinated.
- A 2-dose series (separated by at least 4 months) of adult formulation Recombivax HB® is licensed for children aged 11 through 15 years.

8. Inactivated poliovirus vaccine (IPV).

- For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if the third dose was administered at age 4 years or older.
- If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age.

9. Measles, mumps, and rubella vaccine (MMR).

- If not previously vaccinated, administer 2 doses or the second dose for those who have received only 1 dose, with at least 28 days between doses.

10. Varicella vaccine.

- For persons aged 7 through 18 years without evidence of immunity (see *MMWR* 2007;56(No. RR-4)), administer 2 doses if not previously vaccinated or the second dose if they have received only 1 dose.
- For persons aged 7 through 12 years, the minimum interval between doses is 3 months. However, if the second dose was administered at least 28 days after the first dose, it can be accepted as valid.
- For persons aged 13 years and older, the minimum interval between doses is 28 days.

The Recommended Immunization Schedules for Persons Aged 0 Through 18 Years are approved by the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/recs/acip), the American Academy of Pediatrics (<http://www.aap.org>), and the American Academy of Family Physicians (<http://www.aafp.org>).

DEPARTMENT OF HEALTH AND HUMAN SERVICES • CENTERS FOR DISEASE CONTROL AND PREVENTION

Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years Who Start Late or Who Are More Than 1 Month Behind—United States • 2009

The table below provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age.

CATCH-UP SCHEDULE FOR PERSONS AGED 4 MONTHS THROUGH 6 YEARS					
Vaccine	Minimum Age for Dose 1	Minimum Interval Between Doses			
		Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4	Dose 4 to Dose 5
Hepatitis B ¹	Birth	4 weeks	8 weeks (and at least 16 weeks after first dose)		
Rotavirus ²	6 wks	4 weeks	4 weeks ²		
Diphtheria, Tetanus, Pertussis ³	6 wks	4 weeks	4 weeks	6 months	6 months ³
<i>Haemophilus influenzae</i> type b ⁴	6 wks	4 weeks If first dose administered at younger than age 12 months 8 weeks (as final dose) If first dose administered at age 12–14 months No further doses needed If first dose administered at age 15 months or older	4 weeks ⁴ If current age is younger than 12 months 8 weeks (as final dose) ⁴ If current age is 12 months or older and second dose administered at younger than age 15 months No further doses needed If previous dose administered at age 15 months or older	8 weeks (as final dose) This dose only necessary for children aged 12 months through 59 months who received 3 doses before age 12 months	
Pneumococcal ⁵	6 wks	4 weeks If first dose administered at younger than age 12 months 8 weeks (as final dose for healthy children) If first dose administered at age 12 months or older or current age 24 through 59 months No further doses needed for healthy children if first dose administered at age 24 months or older	4 weeks If current age is younger than 12 months 8 weeks (as final dose for healthy children) If current age is 12 months or older No further doses needed for healthy children if previous dose administered at age 24 months or older	8 weeks (as final dose) This dose only necessary for children aged 12 months through 59 months who received 3 doses before age 12 months or for high-risk children who received 3 doses at any age	
Inactivated Poliovirus ⁶	6 wks	4 weeks	4 weeks	4 weeks ⁶	
Measles, Mumps, Rubella ⁷	12 mos	4 weeks			
Varicella ⁸	12 mos	3 months			
Hepatitis A ⁹	12 mos	6 months			
CATCH-UP SCHEDULE FOR PERSONS AGED 7 THROUGH 18 YEARS					
Tetanus, Diphtheria/ Tetanus, Diphtheria, Pertussis ¹⁰	7 yrs ¹⁰	4 weeks	4 weeks If first dose administered at younger than age 12 months 6 months If first dose administered at age 12 months or older	6 months If first dose administered at younger than age 12 months	
Human Papillomavirus ¹¹	9 yrs	Routine dosing intervals are recommended ¹¹			
Hepatitis A ⁹	12 mos	6 months			
Hepatitis B ¹	Birth	4 weeks	8 weeks (and at least 16 weeks after first dose)		
Inactivated Poliovirus ⁶	6 wks	4 weeks	4 weeks	4 weeks ⁶	
Measles, Mumps, Rubella ⁷	12 mos	4 weeks			
Varicella ⁸	12 mos	3 months If the person is younger than age 13 years 4 weeks If the person is aged 13 years or older			

1. Hepatitis B vaccine (HepB).

- Administer the 3-dose series to those not previously vaccinated.
- A 2-dose series (separated by at least 4 months) of adult formulation Recombivax HB[®] is licensed for children aged 11 through 15 years.

2. Rotavirus vaccine (RV).

- The maximum age for the first dose is 14 weeks 6 days. Vaccination should not be initiated for infants aged 15 weeks or older (i.e., 15 weeks 0 days or older).
- Administer the final dose in the series by age 8 months 0 days.
- If Rotarix[®] was administered for the first and second doses, a third dose is not indicated.

3. Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP).

- The fifth dose is not necessary if the fourth dose was administered at age 4 years or older.

4. *Haemophilus influenzae* type b conjugate vaccine (Hib).

- Hib vaccine is not generally recommended for persons aged 5 years or older. No efficacy data are available on which to base a recommendation concerning use of Hib vaccine for older children and adults. However, studies suggest good immunogenicity in persons who have sickle cell disease, leukemia, or HIV infection, or who have had a splenectomy; administering 1 dose of Hib vaccine to these persons is not contraindicated.
- If the first 2 doses were PRP-OMP (PedvaxHib[®] or Comvax[®]), and administered at age 11 months or younger, the third (and final) dose should be administered at age 12 through 15 months and at least 8 weeks after the second dose.
- If the first dose was administered at age 7 through 11 months, administer 2 doses separated by 4 weeks and a final dose at age 12 through 15 months.

5. Pneumococcal vaccine.

- Administer 1 dose of pneumococcal conjugate vaccine (PCV) to all healthy children aged 24 through 59 months who have not received at least 1 dose of PCV on or after age 12 months.
- For children aged 24 through 59 months with underlying medical conditions, administer 1 dose of PCV if 3 doses were received previously or administer 2 doses of PCV at least 8 weeks apart if fewer than 3 doses were received previously.
- Administer pneumococcal polysaccharide vaccine (PPSV) to children aged 2 years or older with certain underlying medical conditions (see *MMWR* 2000;49[No. RR-9]), including a cochlear implant, at least 8 weeks after the last dose of PCV.

6. Inactivated poliovirus vaccine (IPV).

- For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if the third dose was administered at age 4 years or older.
- If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age.

7. Measles, mumps, and rubella vaccine (MMR).

- Administer the second dose at age 4 through 6 years. However, the second dose may be administered before age 4, provided at least 28 days have elapsed since the first dose.
- If not previously vaccinated, administer 2 doses with at least 28 days between doses.

8. Varicella vaccine.

- Administer the second dose at age 4 through 6 years. However, the second dose may be administered before age 4, provided at least 3 months have elapsed since the first dose.
- For persons aged 12 months through 12 years, the minimum interval between doses is 3 months. However, if the second dose was administered at least 28 days after the first dose, it can be accepted as valid.
- For persons aged 13 years and older, the minimum interval between doses is 28 days.

9. Hepatitis A vaccine (HepA).

- HepA is recommended for children older than 1 year who live in areas where vaccination programs target older children or who are at increased risk of infection. See *MMWR* 2008;55[No. RR-7].

10. Tetanus and diphtheria toxoids vaccine (Td) and tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap).

- Doses of DTaP are counted as part of the Td/Tdap series.
- Tdap should be substituted for a single dose of Td in the catch-up series or as a booster for children aged 10 through 18 years; use Td for other doses.

11. Human papillomavirus vaccine (HPV).

- Administer the series to females at age 13 through 18 years if not previously vaccinated.
- Use recommended routine dosing intervals for series catch-up (i.e., the second and third doses should be administered at 2 and 6 months after the first dose). However, the minimum interval between the first and second doses is 4 weeks. The minimum interval between the second and third doses is 12 weeks, and the third dose should be given at least 24 weeks after the first dose.

Information about reporting reactions after immunization is available online at <http://www.vaers.hhs.gov> or by telephone, 800-822-7967. Suspected cases of vaccine-preventable diseases should be reported to the state or local health department. Additional information, including precautions and contraindications for immunization, is available from the National Center for Immunization and Respiratory Diseases at <http://www.cdc.gov/vaccines> or telephone, 800-CDC-INFO (800-232-4636).

DEPARTMENT OF HEALTH AND HUMAN SERVICES • CENTERS FOR DISEASE CONTROL AND PREVENTION

The immunization schedules shown above should serve as a guideline only; acceptable alternate schedules do exist, and consultation may be required in some cases.

Hospitalization

- ~~When a child in foster care is hospitalized, the Family Service Worker, working with the child, must provide the hospital with the child's Medicaid number, (if applicable), vital statistics, previous medical history, and other identifying information as indicated.~~
- ~~The Family Service Worker signs both the admission forms and the required consent for surgery, if indicated. A second opinion by a medical specialist will be obtained before major surgery, whenever possible.~~
- ~~The Family Service Worker who completes the admission forms must leave the name and telephone number of the FSW who is to be contacted regarding the child receiving care (whether themselves or another FSW).~~
- ~~The Family Service Worker completing admission forms must leave with the hospital the name and telephone number of the Worker to be contacted regarding the child. [JH17]~~
- ~~Foster parents shall not sign a child in foster care into the hospital or sign other medical or surgical consent. Physicians and hospitals may determine that an emergency exists and waive the usual required consent, or they may take consents on the telephone with a second party at the hospital listening to and verifying the consent. The Foster Parents should notify the FSW immediately when a child in foster care is hospitalized. As soon as possible, the FSW shall visit the hospital and sign the required consents.~~

Prescription Drugs

~~Children in foster care are eligible for prescription drugs through the State Prescription Drug Program.~~

~~When there are no Medicaid providers available in cases of emergency, the FSW (with the approval of the County Supervisor) will authorize and bill for medication and medical services using a DHS 1914.~~

ADDITIONAL INFORMATION

Educational Services

~~It is the responsibility of DCFS to provide educational opportunities to help each child meet their full potential. To ensure that children in the custody of DHS receive a quality education, it is the Division's DCFS' policy to enroll children in foster care only in schools accredited by the Arkansas Department of Education.~~

~~Children in foster care shall attend public schools. However, the DCFS Director may grant an educational waiver allowing a child to be placed in a non-public school, including a private, parochial, or home school, if it is in the best interest of the child. No state or federal funding may be used for such placement. For a child in foster care to be enrolled in a non-public school or be home schooled, a certified mental health professional must present documentation stating that the non-public schooling is in the child's best interests.~~

~~Tutoring can be purchased for a child in need of additional educational assistance. Consult the Family Service Worker regarding tutoring. Educational testing and counseling should be available to a child in foster care when they begin to make career or curriculum decisions. If a child desires to pursue college or vocational training after high school, the Family Service Worker will assist the child in the exploration of resources to pursue this plan.~~

Foster Care Staffings

~~A staffing is a meeting of key persons who are responsible directly or indirectly for problem solving and decision-making in regard to regarding a child's case plan.~~

~~An initial staffing for the child is held within the first thirty (30) days of the child's stay in foster care. Another staffing is held two (2) months after the first staffing and every three (3) months thereafter.~~

~~Foster parents will be invited to all staffing meetings on children currently in their care, in accordance with the Foster Home Agreement Addendum, CFS 462A. However, it may not be necessary for them to attend the entire staffing.~~

~~The Family Service Worker will inform the foster parent in advance of the purpose of the staffing, and what information, if any, that the foster parent may be called upon to present. Information presented may include the following:~~

- ~~• Observations about the child;~~
- ~~• If visits have occurred between the birth/legal family (birth, legal, or both) and the child, as well as the child's reactions as perceived by the foster parent;~~
- ~~• The child's adjustment in one's the foster home and community;~~
- ~~• Any problems the child is currently experiencing and difficulties this may be causing the family; and,~~
- ~~• Input regarding development of the case plan and the foster parent's assessment of progress in those areas.~~

~~**Visits between the Child and Birth/Legalthe Parents, /Siblings, or /Relatives (Birth, Legal, or Both)**~~

~~In order to achieve reunification of families, DCFS shall strive to ensure visitation be made available within the first five (5) days of placement. Visits will be based on the families' needs and reasons for the home placement.~~

~~The foster parent plays a very important role in the visitation of the child with parents and siblings. This role includes acceptance of the visits, emotional preparation of the child, and supportive follow up with both the child and the child's worker. The foster parent can help the child by preparing the child for changes in the family circumstances or anything that might be unexpected and difficult for the child to accept. The same supportive attitude is needed after the visit.~~

~~The foster parent's help is vital to the success of the child's visitation with family members (birth, legal, or both). However, a foster parent may find visitation difficult in some situations. For example, a child may be return from the family visited upset, with lost clothing, or with uncombed hair, etc. These issues may cause the foster parent to question the value of the visits. At such times, it will help to discuss these feelings with the FSW to be reminded of the reasons for visitation. Frequently, with supportive understanding, such problems can be worked out satisfactorily for all concerned.~~

~~In any case, the foster parent should always report to the child's FSW the reaction of the child to the visit and the foster parent's perceived observation to the child's FSW.~~

~~**Parent/Child Visits**~~

- ~~1. Children in foster care shall have at least weekly visits with their parents. However, in the exercise of professional judgment, if such visits are contrary to the health and welfare of the child, an exception may be made to omit the visits. This provision shall not be construed to compel a child to visit with his/hertheir parents over the child's objection. Visits shall be subject to the orders of the presiding court.~~
- ~~2. A visitation schedule shall be established within three (3) days of initial placement. Visits shall begin no later than five (5) days from the date DHS assumes custody of the child, unless, (in the exercise of professional judgment), such visits are contrary to the health and welfare of the child or are impossible due to circumstances outside DCFS' control. Visitation shall be subject to the orders of the presiding court.~~
- ~~3. Visits shall, if possible, take place in the parents' home, or in the most homelike setting available, or in some appropriate educational or recreational setting. The DHS office is the most restrictive setting for visits and should be avoided if possible.~~
- ~~4. For those children in foster care whose parents or legal guardians are incarcerated, the Arkansas Department of Correction (ADC) social worker will be contacted to arrange visitation between the child placed in an out-of-home setting and his incarcerated parent(s), unless such visitation, for example, is prohibited by the court, or not recommended by a physician, etc.~~
- ~~5. Visits are to increase in frequency and duration. This will include weekend visits leading up to the child's return home, unless specific documented harm is caused by the visits.~~

- ~~6. Children in foster care shall have reasonable opportunities to communicate in writing or by telephone with their parents unless prohibited by court order.~~

Siblings Visits

- ~~1. If a child has a sibling, the Family Service Worker shall arrange sibling visits. Sibling visits shall take place at least once every two (2) weeks, unless, (in the exercise of professional judgment), the children's best interests require less frequent visitation.~~
- ~~2. If it is in the child's best interest, visits between siblings and with relatives may continue after Termination of Parental Rights (TPR), if visitation was established prior to TPR. Visitation after TPR will continue until an adoption placement is made or the out-of-home placement case is closed. Continuation of visits with parents who have had their parental rights terminated does not continue. Relative visits after TPR must have court approval and cannot continue without the court's approval.~~
- ~~3. Sibling visits shall, if possible, take place in the parents' home, in the home of one of the siblings, a sibling, in the most homelike setting available, or in some appropriate setting such as an educational or recreational setting.~~

~~**Relative Visits** Children shall have an opportunity to visit with grandparents, great grandparents, or other relatives as determined by the Family Service Worker. Relatives should be allowed supervised visitation. These visits can help explore alternate placement options.~~

Publication of Information about Children in Foster Care

~~There are occasions when questions may be asked or pictures may be requested for purposes of newspaper, television, or radio publicity. All publicity must be approved through the FSW and the County Office Supervisor. Some situations may require the involvement of the DHS Director of Communication.~~

Youth in Foster Care Application for an Arkansas Driver's License and Insurance Reimbursement Programs

~~The Director of DCFS may authorize an employee or any foster parent to sign an application for a youth in foster care to obtain an Arkansas Learner's Permit or Intermediate Driver's License. The youth in foster care must meet requirements set by the Division DCFS and the State of Arkansas, and be approved by the Director. The foster parent may apply for reimbursement for the additional cost to add the child to their automobile insurance. Participation in both of these both programs is voluntary. For more information, the foster parent should consult with their FSW.~~

Runaways

~~If a child runs away from the foster home, the foster parent should immediately notify the child's Family Service Worker, On Call Worker, and/or County Office Supervisor. The Foster Parent should be able to provide information regarding the clothes the child was wearing, etc., and as well as any other relevant information to aid the worker in making a report to the police.~~

When a Youth in Foster Care is Arrested

~~When a youth in foster care is arrested, a foster parent should notify the FSW or On Call Worker (if after hours). The FSW will talk to law enforcement officials to find out where the youth is being held, the alleged offense, times of the hearings, and possible repercussions. The FSW will also determine if the youth understands his or her their legal rights and has not unknowingly waived the rights to silence or and to the presence of an attorney during any questioning.~~

~~The FSW will attempt to have the youth released into the custody of the foster parent if they are willing to sign a statement that the youth will be returned on the day of the detention hearing and/or the adjudication hearing. The youth's birth/legal parents (birth, legal, or both) will be notified. The DHS Attorney will be notified, and will contact the Prosecuting Attorney to assure that both the rights of DCFS and the youth are protected and that the youth has an attorney. The DHS Attorney will represent DHS, when appropriate, in the court hearing. The FSW will attend court with the youth.~~

Foster Parent Adoption

~~Once After parental rights have been terminated, children may be adopted. A foster parent may apply to DCFS to adopt a child. A distinction is made between foster parents who apply through the regular adoption program and foster parents who apply to adopt a particular child.~~

~~Foster parents applying through the regular adoption program must meet the same requirements as all other adoption applicants. The FSW will refer any interested foster parent to an Adoption Specialist.~~

~~When foster parents are interested in adopting a child in foster care in their home, DCFS will consider the benefits provided by them for that child and other certain conditions. The child's desires will be especially considered. The FSW will speak with the child alone regarding this major decision in his or her their life and help the child consider all the facts.~~

~~If a foster parent wishes to adopt a child in their home, the foster parent should make the request known by requesting and completing CFS 489: Foster Parent Request for Consideration to Adopt, if the foster parent meets the basic qualifications outlined on the form. Discuss the desire to adopt with the FSW to determine eligibility.~~

~~ANOTHER PLANNED PERMANENT LIVING ARRANGEMENT (APPLA)~~

~~This goal addresses the quality of services the youth will receive, including transitional services, and a plan for supervision and nurturing. Another planned permanent living arrangement (APPLA) can only be selected if the youth cannot be reunited with his or her their family, another permanent plan is not available, and:~~

- ~~• a compelling reason exists why termination of parental rights (TPR) is not in the youth's best interest; or~~
- ~~• the youth is being cared for by a relative and TPR is not in the best interests of the youth.~~

~~This category applies only to those youth who are secure in their setting, who have been with a foster home for a number of years, and for whom this is the most suitable plan that can be made. The following criteria must be met:~~

- ~~• The youth is secure and, has demonstrated good adjustment in the foster home, and is firm in the decision, after consideration, that he or she they does not wish to be adopted;~~
- ~~• The foster parents have revealed their love and affection for the youth but cannot adopt;~~
- ~~• The youth has resided in the foster home sufficiently long enough to develop close ties;~~
- ~~• It is apparent that the youth should not be placed with birth/legal the parents (birth, legal, or both) or, relatives, or adopted; and~~
- ~~• The youth is fourteen (14) years of age old or older.~~

~~Transitional Youth Services (TYS)~~

~~Transitional Youth Services assists youth from fourteen (14) through twenty one age (14-21) years of age, who are interested in furthering their educational or /vocational goals, and who voluntarily participate in the program's services. The program coordinates and provides life skills training and educational assistance to current and former youth in foster care in preparation for the transition into adulthood and mainstream society. Training is provided in various formats and in accordance with case plans. All training is coordinated through the Family Service Workers and TYS Coordinators. Each County Office can provide more information about this program. The foster family may be reimbursed for transporting youth to life skills training classes and other TYS activities.~~

~~Be Your Own Advocate!~~

~~Be Your Own Advocate!, DCFS PUB-50, is a resource for youth in foster care age from fourteen (14) through twenty one (14-21) years of age and was developed along with the Youth Advisory Board to provide youth with information they will need while in foster care. This book is only a reference guide. The youth may contact their FSW or TYS Coordinator for any questions or further explanations.~~

~~Extended Foster Care~~

~~Youth may choose to remain in foster care past the age of eighteen (18), as determined appropriate by the youth and his/her their Transitional Team, and if:~~

- ~~• The child is completing secondary education or a program leading to an equivalent credential; or,~~
- ~~• The child is enrolled in an institution which provides post-secondary or vocational education; or,~~

- ~~The child is participating in a program or activity designed to promote, or remove barriers to, employment; or;~~
- ~~The child is employed for at least eighty (80) hours per month; or;~~
- ~~The child is incapable of doing any of the above-described Extended Foster Care activities due to a medical condition.~~

Liability of Foster Parents

~~Foster parents must carry homeowner's or renter's JUL18 insurance and general liability insurance, which may be included in the homeowners insurance policy.~~

~~Any claims for damages or destruction to a foster parent's personal property, not covered by homeowner's or insurance, car insurance, or damage to the property of others due to the actions of a child placed in a foster home, should be filed with the Arkansas Claims Commission. Foster parents or the individual may request the appropriate application to submit their claim by contacting the Arkansas Claims Commission, 101 East Capitol Ave., Suite 410, Little Rock, AR 72201-3823, Telephone: 501-682-1619, www.claimscommission.ar.gov.~~

~~The foster parents or the individual should contact their County Office and provide information needed to complete an incident report. (This is which is a different document from the claim form mentioned above.) This incident report will be submitted to Central Office and will be used to assist the Claims Commission in processing the claim.~~

~~Foster parents approved by the Division DCFS shall not be liable for damages caused by children in foster care, nor shall they be liable to the children in foster care or to the parents or guardians of the children in foster care for injuries to the children in foster care caused by acts or omissions of the family foster parents unless the acts or omissions constitute malicious, willful, wanton, or grossly negligent conduct. (Act 941 of 1989)~~

~~The information contained within this handbook is a guideline for the DCFS Foster Care Program. If any information contained herein should be in disagreement with official DCFS policy as written in the DCFS Family Services Policy and Procedure Manual or with state/federal law; then the policy or law shall take precedence. DCFS urges the foster parent to discuss with the Family Service Worker, any concerns related to foster children in their home. discussion of any concerns related to children in foster care in one's home with a Family Service Worker.~~

In the event one needs to contact the Division of Children and Family Services for any reason, please call the persons listed below in the order they are listed. For example, if one cannot reach the Family Service Worker or feel they need to speak to a supervisor, then one should call the second name listed.

DCFS CONTACT INFORMATION

CHILD'S NAME _____

FAMILY SERVICE WORKER _____

Work Phone _____

Emergency Phone _____

FAMILY SERVICE WORKER'S SUPERVISOR _____

Work Phone _____

Emergency Phone _____

DCFS COUNTY OFFICE SUPERVISOR _____

Work Phone _____

Emergency Phone _____

FOSTER PARENT RESOURCE WORKER _____

Work Phone _____

Emergency Phone _____

DCFS AREA DIRECTOR _____

Work Phone _____

Emergency Phone _____

~~CHILD MEDICATION FLOW SHEET~~

Patient Name _____ Age _____

~~Allergies~~

Date _____

Medication

Refills

~~Start~~

~~Dosage/Direction/Amount~~~~Date/Amount/Initials~~

~~Stop~~

NATIONAL FOSTER PARENT ASSOCIATION CODE OF ETHICS FOR FOSTER PARENTS

Preamble

Foster family care for children is based on the theory that no unit in our society, other than the family, has ever been able to provide the special qualities needed to nurture children to their fullest mental, emotional, and spiritual development. If, for a certain period, a family ceases to provide these special qualities, substitute care must be used. It is recognized that, ideally, foster care is temporary in nature. Persons who provide foster family care must have commitment, compassion, and faith in the dignity and worth of children, recognize and respect the rights of natural parents, and be willing to work with the child-placing agency to develop and carry out a plan of care for the child.

Foster care is a public trust that requires that the practitioners be dedicated to service for the welfare of children, that they utilize a recognized body of knowledge about human beings and their interactions, that they be committed to gaining knowledge about human beings and their interactions, and that they be committed to gaining knowledge of community resources which promote the well-being of all without discrimination.

Each foster parent has an obligation to maintain and improve the practice of fostering, constantly to examine, use and increase the knowledge upon which fostering is based, and to perform the service of fostering with integrity and competence.

Principles

In order to provide quality foster care services, foster parents subscribe to the following principles:

I regard as my primary obligation the welfare of the child I care for.

I shall work objectively with the agency in effecting the permanent plan for the child in my care.

I hold myself responsible for the quality and extent of the services I perform.

I accept the reluctance of the child to discuss his past.

I shall keep confidential from unauthorized persons information pertaining to any child placed in my home.

I shall treat with respect the findings, views and actions of fellow foster parents, and use appropriate channels, such as a foster parent organization, to express my opinions.

I shall take advantage of available opportunities for education and training designed to upgrade my performance as a foster parent.

I respect the worth of all individuals regardless of race, religion, sex or national ancestry in my capacity as a foster parent.

I accept the responsibility to work toward assuring that ethical standards are adhered to by any individual or organization providing foster care services.

I shall distinguish clearly in public between my statements and actions as an individual, and as a representative of a foster parent organization.

I accept responsibility for working toward the creation and maintenance of conditions within the field of foster family care which enable foster parents to uphold the principles of this code.



RESOURCE PARENT HANDBOOK



ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES

PUB-30 • Revised June 2022

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WELCOME

The Arkansas Department of Human Services (DHS), Division of Children and Family Services (DCFS) welcomes you as either a prospective or current resource family for Arkansas's children. Thank you for joining DCFS to ensure that every child has a safe and stable family every day.

DHS, acting through DCFS, serves as the court-appointed legal custodian for children in foster care. DCFS has the ultimate responsibility for ensuring that each child has the best possible foster care experience and that appropriate long-term plans are made.

Foster care is founded on the premise that all children have a right to a safe and supportive environment in which to grow. Foster care is a program designed to provide a safe, stable, family-like placement for a child who needs care temporarily, because their birth or legal family is unable to ensure the child's health and safety. Placement types may include a DCFS-approved resource home, a provisional resource home, or a licensed facility.

The purpose of foster care is two-fold:

1. To provide a healthy, temporary home and community experience for the child, while the conditions that caused the placement away from the birth or legal family are being resolved; and
2. To serve as a model and a resource to the child's birth or legal family while the family remedies the issues that resulted in the removal of their child.

Children in foster care must be placed in approved traditional resource homes or licensed shelters or facilities. The exception is when children are placed in a provisional relative or fictive kin home; or the court grants custody to the relative, fictive kin, or other person. For custody to be granted, a written and approved home study is presented to the court. These terms will be explained later in this handbook.

The intent of this handbook is to outline the resource home approval process and, if your home is approved, provide you with basic information about caring for a child placed in your home. You will find general information about what is expected of resource families, the care

of children in out-of-home placements (such as foster care, financial matters, the roles of DCFS staff, and more. We encourage you to use this handbook as an ongoing reference to obtain answers to your questions about being a resource family. At the same time, please understand that this handbook is only an introduction as to what it means to be a resource family.

Never hesitate to reach out to DCFS staff with questions or concerns that may not be addressed in this handbook. We want to support you as much as possible in your role as a resource parent. We value the time and care you give to the children in our state every day.

Thank you for your interest and service to the children and families of Arkansas!

DHS Mission Statement

Together we improve the quality of life of all Arkansans by protecting the vulnerable, fostering independence, and promoting better health.

DCFS Mission Statement

Our mission is to keep children safe and help families. DCFS will respectfully engage families and youth and use community-based services and supports to assist parents in successfully caring for their children. We will focus on the safety, permanency, and well-being of all children and youth.

WHAT IS A RESOURCE HOME?

Overview

The Department of Human Services (DHS), Division of Children and Family Services (DCFS) is licensed by the Child Welfare Agency Review Board as a child placement agency to approve foster and adoptive homes for DCFS. DCFS utilizes the term “resource home” to refer to both foster and adoptive homes. “Resource parent” and “resource family” are used to refer to an individual or family, respectively, in those homes that provide a family-like setting on a twenty-four-hour basis for children in the custody of and placed there by the DHS.

The term resource home is used because these homes are designed to serve as resources to children in the custody of DHS. The DCFS-approved homes serve as resources to the child’s biological family as they work toward reunification. All resource homes must meet the same approval and maintenance requirements, except for some non-safety standards for relatives and fictive kin that are described later in this handbook.

The primary, initial goal of almost every foster care case is reunification with the biological parent(s). As such, resource parents must be able to support reunification efforts. The length of a child’s stay in foster care will depend on the conditions that caused the placement as well as the time and the resources available to resolve them. The resource home placement should be the least restrictive and most family-like setting consistent with the child’s needs. It should also be as close in geographic proximity to the child’s parent or legal guardian as possible.

DCFS, the resource parents, and all other involved parties will work toward achieving permanency for the child, preferably by reunifying the child with the birth or legal parents. Arkansas law requires DCFS to diligently search for relatives throughout the life of an open foster care case, and to make efforts to place children with relatives during all stages of a case. This includes for adoptive purposes even after termination of parental rights has occurred.

DCFS follows a hierarchy of preferred placements for children in foster care with reunification with the biological or legal parent generally being the most preferred, followed by other permanency options with relatives, then adoption of guardianship by fictive kin, and ending in adoption of the entire sibling group (as applicable) with someone who is not a relative or fictive kin. For these reasons, serving as a resource home does not guarantee that the resource parent will be able to adopt a specific child placed in their home.

Resource parents with questions about DCFS policy can research it by visiting the Arkansas Department of Human Services [website](#).

Types of Resource Homes

There are two (2) types of resource homes: traditional resource homes and relative or fictive kin resource homes. Relative or fictive kin homes may be opened on a provisional basis (see “Relative or Fictive Kin Homes” subsection below for more information about provisional status).

Traditional Resource Homes

Traditional resource homes are recruited for a child in foster care to whom they are neither related nor have other prior connections. DCFS signs an agreement with resource parents that the family will care for the child as a family member until a permanent plan can be developed and implemented for that child. The resource parents are given pertinent information about the child in foster care, including without limitation reasons for placement, circumstances for removal from the parent's home, where siblings are placed, a copy of the case plan, and a copy of the family visit or family time plan. The resource family will be kept informed of plans for the child's future. In many instances, it will be appropriate for resource parents to communicate with, or otherwise support, the birth or legal parents.

DCFS will evaluate applicants based on their personal qualifications as well as the physical characteristics of their home. Points considered and evaluated include any special training, expertise, or experience that the traditional resource applicant may have. Other considerations include preferences that the resource parent applicants may have regarding characteristics of children who may be placed in the home (, such as age, gender, or special needs).

Traditional resource homes may also elect to serve as informal respite homes. An informal respite home is an approved DCFS resource home that can provide temporary care for no more than seven (7) continuous days at a time for children in out-of-home placements when a child's full-time resource family is unable to do so, and a member of the resource family's designated Resource Family Support System cannot assist. (See the "Babysitting or Other Alternate Care Arrangements" information under "Daily Living" subsection for details regarding the Resource Family Support System.)

Relative or Fictive Kin Homes

In an effort to preserve family connections and reduce the trauma a child experiences when entering foster care, DCFS may place a child in foster care with a safe and appropriate relative or fictive kin. A relative is a person within the fifth degree of kinship to the child by virtue of blood or adoption. Fictive kin is a person not related to the child by blood or marriage but who has a strong, positive emotional tie to the child and has a positive role in the child's life, such as a godparent, neighbor, or family friend. Infants may have fictive kin too. Fictive kin for infants must be identified by the infant's parent(s) as persons who would have a positive emotional tie to the child.

Provisional relative and fictive kin resource homes are referred to as provisional because not all requirements for a traditional resource home must be met by the relative or fictive kin at the initial placement of the child. For the initial, provisional placement with a relative or fictive kin, only background checks and a visual inspection of the home must be conducted in an effort to make an expedited placement for a child with a relative or fictive kin.

The specific background checks required for provisional placement include an expedited Arkansas Child Maltreatment Central Registry check, an expedited State Police Criminal Record check, and a Traffic Violations Record check (that being, a driving record check through the Arkansas State Vehicle Safety Program). A fingerprint-based criminal background check performed by the Federal Bureau of Investigations (FBI) must also be submitted within five (5) business days of a child being placed in a provisional home (results of the FBI criminal background check do not have to be received before placing a child in the provisional home). The visual inspection of the home is conducted to verify that the relative or fictive kin and the home of the relative or fictive kin meet basic safety standards. Photos may be taken during the visual inspection of the home.

All provisional homes will be evaluated to determine the nature of the relationship between the provisional resource applicant, the parents of the children in foster care, and the children in foster care. The DCFS resource worker (the DCFS staff person who opens and maintains DCFS resource homes) will make efforts to determine if the applicant is able to provide for the physical safety and emotional well-being of the child in foster care while considering the nature of the relationship with and geographic proximity to the child's biological or legal parents.

Once opened as a provisional resource home, DCFS works with the provisional resource parents to bring them into full compliance with all requirements of a traditional resource home within six (6) months from the date the child is placed in the provisional home. Relative and fictive kin resource parents do not always have to meet all traditional resource home requirements by the six-month timeframe. There is no guarantee, but waivers or alternative compliances may be given for certain non-safety requirements (see Appendix 1: Alternative Compliance and Policy Waiver Requests for more information). Once a provisional resource home comes into compliance with traditional resource home requirements or has waivers or alternative compliances in place for non-safety requirements, it is then considered approved as a relative or fictive kin resource home and is reclassified as such at that point in time.

Provisional resource homes that are not in full compliance by the end of six (6) months must be closed and the children removed, or the relative or fictive kin must have been granted custody by the court. DCFS staff is responsible for helping the provisional resource parents come into compliance with all requirements within six (6) months. However, if at any point the health and safety of the children placed in the provisional resource home is at risk, DCFS will take appropriate action to ensure the health and safety of the children, including removal of the children from the provisional resource home (if necessary). DCFS will develop transition plans to the best of its ability in an effort to lessen trauma to the children in the event a child must be removed from a provisional resource home.

Provisional resource homes do not receive a board payment until the relative meets all requirements of a traditional resource home (or until all requirements are met or appropriate

waivers put in place for non-safety requirements). However, the child will have medical insurance. DCFS may also provide daycare assistance, if appropriate. The family may also qualify for other benefits such as the Supplemental Nutrition Assistance Program (SNAP, formerly called “food stamps”). If at all possible, DCFS will strive to move a provisional home to fully approved relative or fictive kin status home sooner than six (6) months so that a board payment can begin to better support the children in that home.



HOW DO I BECOME A RESOURCE HOME?

There are many steps to becoming an approved resource home, and DCFS is committed to helping you through the process while making it as seamless as possible. This section is designed to provide an overview of the DCFS resource assessment and approval process.

Overview

DCFS is responsible for selecting an appropriate resource home placement for each child who enters foster care. The home must meet resource home approval requirements and the individual child's needs for the duration of the placement. Resource families are selected after careful assessment. A thorough assessment is needed to minimize the risks involved in placement of a child in foster care and to ensure that a child's first placement in foster care is the best (and hopefully only) placement for that child during their time in foster care. The purpose of the assessment process is to:

- Evaluate the applicants' personal qualifications, as well as resource home approval requirements. Examples include without limitation physical requirements of the home, sleeping, and transportation arrangements, etc.;
- Educate prospective resource parents on the characteristics and needs of children in foster care; and
- Evaluate the resource parent's ability to meet those needs.

Before beginning the assessment process, prospective resource parents (except for provisional resource parents) are highly encouraged to attend an information meeting in their local area.

The assessment process is a mutual selection process. Components include without limitation:

- Background checks;
- In-home consultation visit;

- Physical exam for each household member of the resource family within twelve (12) months of initial approval (biological and adopted children of relative and fictive kin resource home applicants are excluded from this requirement);
- Thirty (30) hours of pre-service training for traditional resource parents or fifteen (15) hours of pre-service training for relative and fictive kin providers (including the DCFS orientation);
- CPR (infant, child, and adult) and First Aid training;
- DCFS approved home study, to include at least three (3) positive personal references with at least one (1) from a relative and one (1) from a non-relative who is familiar with the applicant's child caring experiences (references may be contacted by DCFS or home study evaluator for further information);
- Ongoing consultation with the prospective resource parents to ensure that all approval requirements and other applicable criteria related to both compliance and quality are met; and,
- Final home walk-through.

Additional details about each of the components listed above begin on the following page. Throughout this mutual selection process, the families evaluate whether they believe they can provide the physical and emotional care that is necessary to support children during their time in foster care.

A DCFS resource home may not be approved by any other agency to provide foster care services. If a resource home switches placement agencies, all requirements for opening a new resource home will be met.

DCFS does allow for a resource home approved by DCFS to adopt children from private adoption agencies and serve as a resource parent for DCFS. However, if an adoption occurs, the DCFS home will be re-evaluated (see the "How Do I Continue Serving as a Resource

Home?” section) at that time to determine if the number of beds for which the resource home is approved needs to be altered or if any other changes or additional training will be required.

A resource home may not operate as a Child Care Family Home that being, an in-home daycare or provide babysitting or childcare services for other children on a regular basis in their home. However, DCFS may consider adopt-only service applicant homes to also serve as a licensed childcare facility. Such requests will be evaluated and approved on a case-by-case basis.

In addition, a resource parent may not provide compensated care for any non-related adults in the resource home, unless providing transitional care for a person placed in care prior to eighteen (18) years of age.

Translation services are available to applicants who do not speak English as a primary language. Resource parents whose primary language is not English must be able to attend to the daily needs of children placed in their home, if approved as resource parents. At least one (1) parent in the resource home must be able to communicate effectively in the language of the child, DCFS, health care providers, and other service providers.

Assessment and Approval Component Details

Background Check Overview

Any household member who resides in the home for more than three (3) cumulative months in a calendar year must clear the following background checks (as applicable by age): Arkansas Child Maltreatment Central Registry Check, Arkansas State Police Criminal Record Check, and FBI Criminal Background Check. For household members who have lived or worked outside of Arkansas within the past five (5) years, a Child Maltreatment Central Registry check will also be conducted in the state(s) in which the household member lived or worked. Traffic Violations Record checks (that being, a driving record check) will be

completed if a household member is a licensed driver who is expected to transport children in foster care.

Child Maltreatment Central Registry Check

Applicants and all household members fourteen (14) years of age or older, excluding children in foster care, must consent to a Child Maltreatment Central Registry Check in every state in which they have lived in the past five (5) years, as well as in their state of employment, if different. For example, if a family member lives in Arkansas but works in Missouri, a Child Maltreatment Registry Check will be completed in both states. Household members must have no history of substantiated abuse or neglect. Payment for registry checks in another state must be made by traditional resource home applicants. Applicants are encouraged to keep receipts for payment and, if approved and opened as a resource home, reimbursement may be requested if all required documentation is provided (including the receipt). DCFS may pay directly for the cost of child maltreatment registry checks from other states for relative and fictive kin on an as needed basis. DCFS will repeat the Arkansas Child Maltreatment Central Registry Check every two (2) years on any person required to have the check.

State Police Criminal Record Check

Applicants and all household members eighteen and one-half (18.5) years of age or older, excluding children in foster care, must consent to an Arkansas State Police Criminal Record Check. Checks will be initiated within thirty (30) days of the household member's eighteenth birthday. DCFS will repeat an Arkansas State Police Criminal Record Check every two (2) years on any person required to have the check.

Household members with criminal convictions may, under some circumstances, request an Alternative Compliance. (See section on Alternative Compliance & Policy Waiver Requests.)

FBI Fingerprint-based Criminal Background Check

Federal Bureau of Investigation (FBI) checks will be conducted on applicants and all household members eighteen and one-half (18.5) years of age or older, excluding children in foster care. This check need not be repeated unless a home closes and later wishes to

reopen. FBI Harvester numbers expire after one (1) year, and another number must be issued if a closed home chooses to reopen.

Certification of Absence of Criminal Record

Resource parent applicants will complete a form provided by DCFS to certify in writing that household members ten (10) through seventeen (17) years of age do not have criminal records. This certification will be completed annually for any household member ten (10) through seventeen (17) years of age.

Traffic Violations Record Check

DCFS will check the Traffic Violations Record from the Office of Driver Services for each applicant and other applicable members of the household. This record returns the number of traffic offenses and other violations incurred by the resource applicant, to include the number of points assessed by the Office of Driver Services for convictions of moving traffic violations as per the Arkansas State Vehicle Safety Program (ASVSP). DCFS will complete the Traffic Violations Record Check every two (2) years for active resource parents. To ensure child safety, DCFS will carefully assess what, if any, safety concerns exist for any applicant or current resource parent accumulating ten (10) or more points on their Traffic Violations Record.

A family member with no current valid Arkansas driver's license will be given twenty (20) days to apply for and receive an Arkansas driver's license. If the resource family member does not wish to obtain an Arkansas license, a written explanation from the applicant is required and a driving record check must be completed in the state of issuance for the currently held license. Accessing and providing driving records from another state is the responsibility of the applicant.

The requirement for a driver's license may be waived for provisional applicants if an acceptable plan to transport the children placed in their home to school, court dates, medical appointments, and other engagements is approved. Similarly, the driving record check from the state of issuance for the currently held license does not have to occur to provisionally

place a child with a relative or fictive kin if an acceptable plan to transport the children is approved.

In-Home Consultation Visit

The In-Home Consultation Visit will most likely be the first visit that DCFS staff will make to your home. For traditional resource applicants, the primary purpose of this visit is to gather additional information about your family that was not provided in your online application as well as to complete an initial assessment of your home. For relatives and fictive kin being considered for a provisional placement, this in-home consultation visit meets the requirement for the previously referenced visual inspection of the home.

This initial assessment of the home will determine if it meets resource home approval requirements. Resource home approval requirements include both Minimum Licensing Standards for Child Welfare Agencies and DCFS policy requirements for resource homes. Even if your home does not meet all of the resource home approval requirements during the In-Home Consultation Visit, DCFS staff will let you know the requirements with which you must come into compliance before being approved. Specific resource home approval requirements are described in the following section: “I Understand the Process, But What Are You Assessing?”.

Pre-Service Training

Traditional resource parent applicants must complete DCFS’ pre-service training curriculum for this population (which includes twenty-seven (27) hours of classroom pre-service training and three (3) hours of DCFS orientation) prior to placement of a child in their home. Relative and fictive kin resource parents must complete the DCFS’ classroom pre-service training curriculum for the kinship population, which is twelve (12) hours of pre-service classroom training as well as the three (3) hours of DCFS orientation. For two-parent households, both parents must complete the applicable pre-service training. Central Registry and State Police Criminal Background checks must be cleared, and the FBI Criminal Background Check must have been submitted before a prospective resource parent can begin pre-service training.

If an applicant moves to Arkansas from another state after completing pre-service training in the former state, Arkansas may accept the pre-service certificate showing that the applicant completed training. The DCFS Foster Care Manager or designee is responsible for reviewing the other state's pre-service training curriculum to ensure it is comparable to Arkansas's pre-service training curriculum. The applicant must complete a DCFS approved home study conducted by a contract provider or a DCFS staff who is trained in the DCFS approved home study tool.

If a family that has been previously approved as a resource home in Arkansas moves to another state and wishes to serve as a resource parent in the new state of residence where they are required to submit their Arkansas resource provider file, the family must request their file and provide it to the other state themselves. DCFS may provide the entire resource provider file to the family, except for the background check results. If the family signs a waiver and the other state's child welfare agency or resource home licensing entity makes the request for the family's Arkansas resource provider file, DCFS may provide the file upon receipt of the waiver on a case-by-case basis, except for the background check results.

CPR/First Aid Training

No child will be placed in a traditional resource home until each resource parent has obtained CPR certification (to include infant, child, and adult CPR) and completed First Aid training. Relative and fictive kin applicants must obtain CPR and First Aid certification within six (6) months of being opened on provisional status.

First Aid and CPR training and certification will only be accepted from a certified trainer associated with the American Heart Association, the American Red Cross, the National Safety Council, the Health and Safety Institute, or EMS Safety Services.

Resource parents are responsible for obtaining certification in CPR and First Aid. DCFS will assist resource parents in locating classes for the family, as appropriate. Traditional resource parents may work with their local resource worker to request reimbursement of CPR and First Aid fees once the home has become opened and approved. However, for resource families opening only for adoption, those applicants must attend a class arranged by DCFS. To be

reimbursed, resource parents will need a receipt and copy of their CPR certification card to request reimbursement and will need to sign and submit an original Agency Generated Invoice (AGI). Copies of a signed AGI will not be accepted as an original signature is required. For provisional resource applicants, DCFS may pay for the cost of the First Aid and CPR Training directly to the First Aid or CPR Training vendor.

Online CPR and First Aid training is acceptable, provided the online course is offered through American Heart Association, American Red Cross, the National Safety Council, the Health and Safety Institute, or EMS Safety Services. In addition, the online curriculum must also require hands-on, skill-based instruction, as well as written and practical testing. As such, participants will demonstrate the skills learned through the online portion of the curriculum in the presence of a certified trainer to complete certification (training and certification that is provided solely online will not be accepted). Prospective resource parents must obtain a certification card from the trainer representing the certifying national organization.

New CPR and First Aid Training is not required for individuals certified as paramedics and Emergency Medical Technicians (EMTs) if proof of current certification is provided to DCFS staff. Current certification in Basic Life Support (BLS) and Advanced Cardiovascular Life Support (ACLS) also meet the Minimum Licensing Standard for CPR if proof of current certification is provided to DCFS staff. All other medical professionals, including nurses, must have current CPR certification as outlined above and provide a copy of their current certification to DCFS staff.

Additional First Aid training for nurses and other medical professionals (to include those with ACLS certification) is not required. If an applicant with a current BLS certification is a paramedic, EMT, or firefighter, additional First Aid Training is not required. However, a lay person with BLS certification may have to take a First Aid class if current certification in First Aid cannot be provided.

Physical Exam

A physical exam is required for each household member of the resource family within twelve (12) months of initial approval. There is an exception to this requirement for biological and

adopted children of relative and fictive kin resource home applicants. DCFS staff will ask you to have your physician complete a specific form to document this exam. Findings of the physical examination must verify that all household members are free of any physical or emotional health conditions that would adversely affect the welfare of a child in foster care. Depending on the results of the physical exam, DCFS staff may request additional information from household members, including a psychological examination.

As part of the assessment regarding physical health, DCFS will also require documentation related to immunizations for all children in your home. It is recommended that all children who are household members of a resource home be up to date on immunizations consistent with the recommendations of the American Academy of Pediatrics (AAP), the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (ACIP), and the American Academy of Family Physicians (AAFP). All family members under eighteen (18) years of age in the household shall have proof of current health immunizations, or an exemption (medical, religious, or philosophical) in accordance with the Arkansas Department of Health. Immunizations against COVID-19 are encouraged for all applicable household members in a resource home but are not required.

All household members who will have contact with infants (children under twelve (12) months of age) are also encouraged to have an up to date Tdap vaccination to protect against pertussis (whooping cough) consistent with the recommendations of the ACIP. Finally, all household members who will be caregivers of infants (children under twelve (12) months of age) and medically vulnerable children are encouraged to have an up to date annual influenza vaccine consistent with the recommendations of the ACIP. To determine if a child is considered medically vulnerable to influenza if placed in a resource home whose household members have not received an annual influenza vaccine, DCFS staff will consult with the child's PCP to make sure the child can safely be placed with that family.

Home Study

The home study assists DCFS in determining if a family is ready, willing, and able to become a suitable and safe placement resource for a child. A home study evaluator will conduct at least two (2) home study visits to interview resource home applicants. The preference is for both visits to take place in the resource applicant home, but, as needed, it is permissible for one (1) visit to be in the resource applicant home while the other is conducted over a virtual

conference platform, such as Zoom, or Facetime. These interviews will include the evaluator speaking with each age-appropriate member of the household. The interviews with the children in the home are not meant to be invasive or scary. Rather, it provides the chance for these children to participate in the process and share basic information about daily life in their home, as well as give them an opportunity to provide their understanding of what it means to be part of a resource home for children in foster care. DCFS wants the other children in your home to be supportive of your decision to become resource parents. Their support will be reevaluated annually.

The home study is designed to evaluate a family's dynamics, including without limitation:

- Motivation for wanting to foster or adopt (or both);
- Household composition;
- Family history;
- Safety hazards;
- Income and expenses;
- Health;
- Education;
- Childcare arrangements or plans;
- Child rearing practices;
- Daily schedules and family activities; and
- Support systems.

The home study evaluator will also review the letters of reference submitted on your behalf. The home study evaluator may also ask you about connecting with other people who know you to learn more about you. By learning more about these areas, the home study assists DCFS in learning how members of a family function individually and as a unit. This information helps inform the conclusions and recommendation as to whether a family may serve as a successful and engaged resource family. All adult and minor household members

will be assessed regarding how they may be affected by the presence of a child in foster care and the effect they may have on the child in care.

Final Walk-Through of Home and Orientation

Prior to being approved as an open resource home, DCFS staff will conduct a final walk-through of your home to ensure all resource home requirements have been met, and to go over what to expect in the immediate future regarding a first placement. This will include DCFS and the resource parents signing the Initial Resource Home Agreement, which provides a summary of the following information:

- Expectations and responsibilities of DCFS, the staff, and the resource parents;
- Services to be provided;
- Financial arrangements for the children placed in the home;
- Authority that the resource parents can exercise for the children placed in their home;
- Actions that require DCFS authorization;
- Legal responsibility for damage or risk resulting from children in their home;
- DCFS' process and procedures for investigating complaints; and
- DCFS' procedure for giving advance notice of termination of a placement except for documented emergencies.

I UNDERSTAND THE PROCESS, BUT WHAT IS DCFS ASSESSING?

Specific approval requirements for resource homes include Minimum Licensing Standards developed by the Child Welfare Agency Review Board, which are then monitored by the DHS Division of Child Care and Early Childhood Education's (DCCECE) Placement and Residential Licensing Unit (PRLU). Other approval requirements for resource homes are specific to DCFS policy and procedure. Resource home requirements include personal qualifications of applicants and household members as well as the physical aspects of their homes. Families and their homes must continue to meet the resource home approval requirements for the duration of their service as a resource home that accepts and cares for children in DHS custody.

The lists of requirements on the following pages are organized by noting a primary requirement as a lettered item. Additional details related to the primary requirement are provided next to the arrow symbol.

Basic Resource Parent and Household Member Applicant Qualifications

- A. Be at least twenty-one (21) years of age.
 - An applicant home will not be approved as a resource home if even one (1) applicant is under twenty-one (21) years of age unless a policy waiver is obtained. A policy waiver may only be approved in rare circumstances for provisional homes.
- B. Be a United States citizen or a legal permanent resident.
 - Persons who are undocumented may be considered as resource home applicants only for their relatives or fictive kin.
- C. May be single or part of a couple.

- In a two-parent home, the couple will be joint applicants. Each person will actively participate in the approval process. This joint family commitment will be re-evaluated annually.

D. Be physically, mentally, and emotionally capable of caring for children.

- To help DCFS make this assessment, the resource parent applicant must provide DCFS with the health history of each household member, in addition to the physical exam required for approval (with an exception to the physical exam for biological and adopted children of relative and fictive kin resource home applicants). This history will include physical and mental health services, treatment received, a list of currently prescribed medications, and any other medications or other substances currently taken.
- A physical disability in either applicant that does not interfere with the ability to give adequate care to a child will not be a barrier to being approved as a resource parent. The impact of the disability on the individual will be evaluated, to include whether it may have significance to a specific child in foster care.
- Resource parents are not permitted to smoke or allow anyone else to smoke in the presence of any child in foster care. This includes the use of E-cigarettes and vaping. Exceptions may be made on a case-by-case basis, if it is in the child's best interest to be placed in or remain in that resource home.
- Resource parents will not engage in the use of illegal substances, abuse alcohol by consuming in excessive amounts, or abuse legal prescription drugs or non-prescription drugs by consuming them in excessive amounts or using them other than as indicated or prescribed.

E. Demonstrate stability and have adequate support.

- In assessing relationship stability and other support systems, considerations may include major life changes like:
 - Death or serious illness among family members;
 - Marriage, separation, divorce, or other significant changes in the couple's relationship;
 - Addition of household members (or example, birth, adoption, or an aging relative moving in); and

- Loss of or change in employment.
 - All resource parents will need a strong support system to assist them in their role as resource parents, so that they may better serve children in foster care. Please see information regarding the Resource Family Support System and other types of alternate care under the “Daily Living” subsection of “What Can I Expect Beyond the Initial Placement?”
- F. Have an employment or work schedule conducive to caring for children.
- Both parents may be employed outside the home.
 - If employment is seasonal, the applicant must have compensatory income or savings in the off seasons.
 - Demands made on resource parents’ time (due to reasons such as having to work overtime or having revolving shifts) are considered pertinent to the ability to provide adequate care for a child in foster care.
 - Children will be placed based on careful evaluation of what is best for each child, to include consideration of plans for the care and supervision of children in foster care before and after school, during school holidays and vacations, and when children are ill and absent from school.
- G. Respect the religious preferences of children in foster care and their birth or legal family.
- A resource parent applicant’s lack of religious affiliation or religious faith will not be a barrier to approval.
 - A resource parent must be able to present their own religious beliefs to children in foster care in such a way as to take into consideration the child's own religious background.
 - A resource parent must never attempt to convert or force their own religious beliefs on a child in foster care whose religious background differs from their own.
- H. Value education and have a sufficient education that provides the ability to care for children placed in the home.

- A resource parent must have a positive attitude toward both academic and vocational education and be aware of local education facilities and resources.
- A resource parent must be willing to meet the child's individual educational needs, including participating in the development and implementation of any special education plans or behavioral accommodations (as needed).
- At least one (1) resource parent in the home must have functional literacy, such as having the ability to read medication labels, follow doctor's instructions, and administer proper dosages of medication.

I. Demonstrate financial stability and supply documentation of sufficient financial resources.

- The applicant must have sufficient and reliable income without a board payment to ensure the family's stability and security.
- An applicant must provide documentation of sufficient financial resources to meet the needs of the child in foster care. This documentation will include a copy of the applicant's tax return and recent paycheck stubs.
- Management of income will be considered more important than amount of income.
- The applicant must have sufficient resources to meet the financial, medical, physical, educational, emotional, and shelter needs of the child without relying solely on state or federal financial assistance (for example, Supplemental Nutrition Assistance Program (SNAP) or Social Security Income (SSI) benefits) to meet those needs. DCFS may make some exceptions for applicants depending on the totality of their financial and other circumstances.

J. Provide documentation of homeowner's or renter's insurance and general liability insurance (which may be included in the homeowner's policy).

K. If a resource parent applicant does not own the home in which they live, the person who owns the home must verify in writing (DCFS will supply this form as needed) that they have no objections to the applicant caring for children in foster care in the home.

Resource Parent Personal Characteristics

Applicants must have personal characteristics that will enable them to assume the responsibility of caring for children in foster care who have been traumatized. This includes the ability to provide a nurturing family life experience for the child including guidance, intellectual stimulation, affection, and appropriate discipline. Personal characteristics include:

- A. Capacity to give love, affection, and care to the child and respond to the child's needs without expecting the child to return love and affection.
- B. A working knowledge of child growth and development, including knowledge of childcare, milestones in development, and nutrition.
- C. Equal attention to the physical and emotional needs of children.
- D. Willingness to allow the child in foster care to socialize with their peers.
- E. Flexibility in expectations, attitudes, and behavior, in relation to meeting the needs of each child and recognizing the trauma caused by maltreatment and removal from the home.
- F. Ethical standards and values conducive to the well-being of children.
- G. Ability to accept a child's background, without passing moral judgment on the child or the child's birth family.
- H. Ability to accept and strengthen a child's relationship with their birth family.
- I. Maintenance of absolute confidentiality of private information about each child in foster care and their family (birth, legal, or both).
- J. Ability and willingness to accept, understand, and utilize training, guidance and supervision from the child-placing agency or other professionals to meet the needs of children in care and their families of origin.
- K. Emotional stability, including a satisfactory method of handling anger and other challenging feelings.
- L. Acceptance of your own childhood experiences.
- M. Absence of any qualities that indicate potential to abuse or neglect children in your care.

- N. Capacity to absorb the presence of a child in care without undue disruption to your own family life.
- O. Ability to cope with the departure of the child in foster care.
- P. Maturity to exercise good judgment and appropriate use of authority, balanced with a degree of playfulness and flexibility necessary to care for children.

Physical Requirements of the Home

Home Exterior and Community

- A. Must be a house, mobile home, housing unit, or apartment that is occupied by an individual or a family and that is the primary residence of the individual or family. The location will be zoned for single family use and will have an individual address for emergency response purposes (such as 911).
- B. Grounds, and all structures on the property, will be maintained in a clean, safe, and sanitary condition and in a reasonable state of repair within community standards.
- C. Must be clean and free from hazardous materials, dangerous objects, and dangerous conditions.
- D. Must be accessible to community resources needed by children in foster care, to ensure access to available education, religious or spiritual opportunities, recreation, visits with parents, supervision by DCFS, and medical care.
- E. Must have at least one (1) exterior door that exits directly to the outside or have an alternate fire escape route.
- F. Must be free from physical hazards (such as debris, trash, or uncovered cisterns, that would endanger the safety of children).
 - 1. This includes the yard, garage, carport, any storage areas, basement, and attic (if applicable and accessible).
- G. Must be large enough to provide ample outdoor play space for children.
- H. Must have a fence or barrier to prevent a child's access to a busy street, highway, or other dangerous area.
- I. Must ensure any outdoor play equipment is safe, hazard-free, and properly anchored.

- J. Must not have signage or advertising related to a supporting recruitment agency, to include signage on vehicles used to transport children in foster care.
- K. If the applicant resides in a manufactured home, the home must be properly installed and stabilized. If the manufactured home is in a mobile home park, there must be sufficient fenced play space outside.
- L. Manufactured homes, used as resource homes, will have an agency-approved plan for tornado safety. The safety plan will be signed by all caregivers in the home and an agency representative.
- M. Must include a water safety plan for supervision of children during water activities, which is to be signed by all caregivers in the home and an agency representative. This plan will include the agreement that resource parents shall not permit a child to enter a pool area unless accompanied by an adult.
- N. Must enclose or must have an approved manually or power-operated child safety cover for all in ground pools that meets the standards of the American Society for Testing and Materials adopted by the Consumer Product Safety Commission.
 - 1. An “approved safety pool cover” means a manually or power-operated safety pool cover that meets the standards of the American Society for Testing and Materials (ASTM) adopted by the Consumer Product Safety Commission, in compliance with standard F1346-91. Please note that solar pool covers and winter pool covers are not safety covers. The ASTM (1996) requires that a pool cover be able to hold a minimum of four hundred and eighty-five (485) pounds per five square feet (5’²) to qualify as a safety cover.
- O. In-ground pools without an approved child safety cover will be protected by an enclosure, such as wall, fence, or similar barrier, that surrounds the pool area.
- P. Unless local code provides otherwise a pool enclosure will meet the following:
 - 1. Entirely enclose the pool area;
 - 2. Be at least four (4) feet high; and,
 - 3. Must have the method(s) of access through the enclosure equipped with a safety device, such as a bolt lock.

- Q. The wall of a house or other building will not be used in lieu of a barrier to the pool, except for a solid wall that does not contain any doors. When a wall is used as a barrier, the remaining three (3) sides will be protected by an enclosure such as wall, fence, or similar barrier, that surrounds the pool area (see item P above) or have an approved child safety cover. The enclosure will meet the following:
1. Entirely enclose the pool area;
 2. Be at least four (4) feet high; and
 3. Must have the method(s) of access through enclosure equipped with a safety device, such as a bolt lock.
- R. All above ground pools will have the following:
1. Non-climbable exterior side walls with a minimum height of four (4) feet; and
 2. Access ladders or steps that are removable and able to be secured when the pool is not in use.
- S. All portable pools (inflatable and wading pools) will be either fenced or emptied after every use.
- T. Swimming pools will be equipped with a life saving device such as a ring buoy.
- U. Swimming pools that cannot be emptied after each use will have a working pump and filtering system.
- V. Hot tubs and spas will have locking safety covers that are locked when not in use.

Home Interior

- A. Must allow resource parents to reside in the same single-family unit with children in foster care (that being, no separate living quarters for resource parents).
- B. Must be clean and free from hazardous materials, dangerous objects, and dangerous conditions. This applies to interior halls and doors which must not be blocked or cluttered to prevent easy passage or exit.
- C. Must be free of rodent and insect infestation.
- D. Must be a smoke-free environment. Resource parents must sign a certification indicating that the home is smoke free and that there is no vaping or use of or e-cigarettes in the home.

E. Shall have a continuous supply of sanitary drinking water.

1. If the source is not a municipal water system, the water will be tested and approved by the Arkansas Department of Health annually.

- a. The Arkansas Department of Health will only conduct the initial inspection for the approval of the resource home. The annual check must be conducted by the homeowner. The sample cups can be obtained from the local Department of Health along with procedures for collection and submission. The Department of Health provides training for homeowners on using the cups for completion of the annual check. DCFS will not reimburse the cost of water testing.

2. If a water supply does not pass inspection, a CFS-455: Consent for Health Department Services, Alternate Compliance of Water Supply Agreement, must be established with the family.

3. If the family will use bottled water and purified water for bathing (if infants or children under five (5) years of age are placed in the home), this must be noted on the CFS-455, signed by the resource parents, and updated annually.

F. Must be equipped with a properly operating kitchen that includes a sink with hot and cold running water, a refrigerator, a stove, and an oven.

G. Must have at least one (1) toilet that flushes, one (1) sink with running water, and one (1) bathtub or shower with hot and cold running water.

H. Must have adequate lighting, ventilation, and plumbing for safe and comfortable living.

1. This applies to bedrooms, which must have windows that provide natural light and ventilation.

I. Must have a heating, ventilating, and air conditioning source maintained in safe operating condition that keeps the temperature a minimum of sixty-five degrees (65°) and a maximum of eighty-five degrees (85°).

J. Must have adequate space for privacy, play, and study for all household members.

K. Must have sufficient seating for the family to eat together.

L. Must provide adequate space for storing clothing and personal belongings for each child, in or near their bedroom.

- M. Must have adequate toys that are safe and developmentally appropriate for children who will be placed in the home.
- N. Must be free of obvious fire hazards (for example, defective electrical appliances or electrical cords, excessive use of extension cords, or defective heating equipment) or improperly stored flammable materials.
 - 1. This includes the requirement that all heating units (such as radiators, fireplaces, wood stoves, gas heaters, electric heaters, steam pipes, and hot water pipes) with hot external areas within reach of children, are screened or otherwise shielded.
- O. Must have an operational smoke detector on each level of occupancy of the resource home to include an operational smoke detector in each bedroom.
- P. Must have an operational chemical fire extinguisher, readily accessible, near the cooking area of the home.
- Q. Must have a carbon monoxide detector on each level of occupancy of the foster home and near all sleeping areas.
- R. Must have a safe operating water heater that has a recommended temperature at or below one hundred and twenty degrees (120°) Fahrenheit, as tested at the plumbing fixture nearest the water heater.
- S. Must maintain adequate first aid supplies for emergencies.
- T. Must have proper trash and recycling disposal (if recycling is available where the home is located) in such a way as not to constitute a health or safety hazard and keep all garbage and other waste in a suitable covered receptacle.
- U. Must store all poisonous materials, cleaning supplies, other hazardous materials (for example, insecticides, gasoline, hazardous tools, and knives), and alcoholic beverages, in an area not readily accessible to children, as appropriate for the age and development of each child.
- V. Must have an operational telephone.
 - 1. Working cell phones kept on the premises are acceptable, but the phone will need to be accessible for children.

- W. Must post emergency phone numbers (such as 911, fire, ambulance, poison control, and a responsible adult to contact in case of emergency) in a prominent place.
- X. Must maintain all firearms in a secure, locked location or secured by a trigger lock. Securing of firearms extends to any weapon that could reasonably be a threat to a child.
- Y. Must secure and lock all ammunition separately from firearms unless they are stored in a safe, handgun safe, or a long gun safe.
- Z. Ensure there is an agency-approved safety plan for any noted hazards. The safety plan will be signed by all caregivers in the resource home and an agency representative.
- AA. Must provide proof of current rabies vaccinations as required by Arkansas law for all household pets.
- BB. Must provide information about the use and location of any methods of surveillance in the resource home to DCFS and to each child in foster care (as age and developmentally appropriate).
 - 1. This includes the use of baby monitors or other forms of surveillance.
 - 2. Formal written notification detailing use of the surveillance and location of all devices will be provided to DCFS via CFS-448.
- CC. Must provide satisfactory living space for all persons in the home.
 - 1. The number of children in foster care placed in a resource home will be limited by the number of persons who can satisfactorily live within the physical limits of the home.
 - 2. Space requirements may be waived on a case by case basis for provisional resource homes.
- DD. The agency will ensure a current floor plan of the home with room dimensions for all rooms used for sleeping is kept in the resource home record.

Sleeping Arrangement Requirements

- A. Each household occupant will have a bedroom that provides privacy.
- B. Children in foster care must sleep in a bedroom, not in a living room, dining room, or any other room where others may pass through.
- C. Each bedroom, including the master bedroom, must have at least fifty square feet (50'²) of floor space per occupant.
- D. Each bedroom that is used for children in foster care will have a window to the outside, which can serve as an emergency escape.
- E. Bars, grilles, grates, or other items that block access to the window are permitted only if they can be removed from the inside without the use of a key, tool, or force greater than that required for normal operation of the window.
- F. No more than four (4) children will share a bedroom.
- G. Each child in foster care will be provided with a safe bedroom as appropriate for the child's needs and age, that includes a bed with a mattress, sheets, pillow, pillowcase, and adequate cover, all in good condition, and similar to those provided to other household members.
- H. Bedding will be changed at least weekly (or more often, if needed).
- I. Children of the opposite sex will not share the same bedroom if either child is four (4) years of age or older, except for a parent in foster care with their child.
- J. No children will share a bed if either child is four (4) years of age or older.
- K. No child under six (6) years of age will occupy a top bunk.
- L. Children in foster care, except infants under two (2) years of age, will not share a sleeping room with adults.
 - 1. For a grandparent to the child, or a teen parent in foster care with their child, this age would increase through four (4) years of age.
- M. All cribs used for children will have current certification of compliance with Consumer Product Safety guidelines.

- N. Children twelve (12) months of age and below will be placed flat on their backs to sleep, in accordance with American Academy of Pediatrics guidelines, to lessen the risk of suffocation and Sudden Infant Death Syndrome (SIDS).
 - 1. If a child rolls over on their own, there is no requirement to reposition the child.
 - 2. If there is a medical reason a child cannot sleep on their back, a signed statement from the child's physician will be in the file stating the reason, the sleep position indicated, and the timeframe required.
- O. Resource parents will not co-sleep or bed share with a child in foster care of any age, including infants.
- P. "Rock and plays," and similar devices are prohibited.

Transportation

- A. A resource parent applicant must have their own mode of transportation available for children in their care to participate in necessary school, recreation, and medical activities.
- B. A resource parent applicant must provide documentation demonstrating that all vehicles owned by the applicant have liability insurance.
- C. Any vehicle used to transport children in foster care must be maintained in compliance with Arkansas motor vehicle laws and must be insured.
- D. A resource parent applicant, and anyone else who would transport children in foster care, must have a valid driver's license.
 - 1. The requirement for a driver's license may be waived for provisional applicants on a case-by-case basis if an acceptable plan to transport the children placed in their home places (including without limitation to school, court dates, and medical appointments, is approved.
- E. Children must be transported in a manner that is in accordance with Arkansas law, including without limitation use of safety belts, use of child safety seats, and adherence to smoking restrictions.

WHAT LIABILITY WILL I HAVE AS A RESOURCE PARENT?

According to Act 941 of 1989: Resource parents approved by a child welfare agency licensed by the Department of Human Services will not be liable for damages caused by their children in foster care, nor will they be liable to the children in care nor to the parents or guardians of the children placed in their home for injuries to the children in foster care caused by acts or omissions of the family resource parents unless the acts or omissions constitute malicious, willful, wanton or grossly negligent conduct. If a child placed with you causes damage to your home or other property, please see the “Damages to Your Home or Other Property” section of this handbook.

WHAT IS EXPECTED OF ME AS A RESOURCE PARENT?

Being a resource parent is not an easy task, but it is a rewarding one! While every responsibility of a resource parent cannot be captured on paper, below are lists of basic expectations to consider when determining if you want to become a resource parent. For several of the sub-sections below, more detail is provided in the “Daily Living” subsection under “What Happens Beyond the Initial Placement?” section. You may also want to review Appendix 2: National Foster Parent Association Code of Ethics for more information.

Daily Activities

- A. Provide structure and daily activities designed to promote the individual physical, social, intellectual, spiritual, and emotional development of the children in your home.
- B. Cooperate with DCFS to help the children in foster care maintain an awareness of their past, a record of the present, and a plan for their future.

- C. Keep a life book for each foster in the resource home that includes periodic photographs of the child and a record of the child's memberships, activities, and participation in extracurricular, school, or church activities. This may include ribbons, trophies, or other awards.
- D. Teach children in your care to perform age and developmentally appropriate self-care and home maintenance tasks, such as doing dishes (these should also be similar to the tasks expected of your own children of similar chronological and developmental age, if applicable).
- E. Instruct each child in good grooming and personal hygiene habits.
- F. Ensure each child is provided with opportunities for regular recreational activities and exercise.
- G. Ensure each child is provided with age-appropriate activities and equipment.
- H. Monitor and limit the use of television, videos, computer games, and other screen time activities.
- I. Be responsible for meal planning that ensures adequate and nutritious food.
- J. Speak positively of the child's birth or legal family and support reunification when reunification is the goal.

Clothing and Personal Belongings

- A. Provide each child with their own clean, well-fitting, attractive, seasonal clothing that is appropriate to age, sex, and individual needs and that is comparable to the community standards (with assistance from DCFS).
- B. Include children in the selection of their own clothing, whenever possible and appropriate.
- C. Allow children to bring their personal belongings to the resource home and acquire additional belongings.
- D. Send all personal clothing and belongings with the children when they leave the resource home.

Discipline

The following constitutes DCFS' discipline policy:

- A. The primary goal of discipline will be to teach the child acceptable behavior and self-control, rather than punishment.
- B. Discipline will be administered with kindness and understanding and be appropriately based on the child's age, development, and history (including trauma history).
- C. Discipline will focus on teaching the child acceptable behavior and self-control. Appropriate forms of discipline may include time-outs, redirection, denial of privileges, and explanation of expectations on that particular child.
- D. Resource parents will teach and train each child with techniques that stress praise and encouragement.
- E. Resource parents will establish well-defined rules that set the expectations and limits of behavior that are relevant to the child's level of growth, development, and trauma history, and will apply those rules in a consistent manner.
- F. Resource parents are **prohibited** from using corporal punishment on children in foster care. Other methods of discipline that are unacceptable for use by resource parents with children in foster care include without limitation:
 - 1. Physical punishment threatened or inflicted in any manner. Examples include without limitation spanking, hitting, pinching, pulling hair, slapping, kicking, twisting arms, and forcing fixed body positions;
 - 2. Denial of meals, sleep, shelter, essential clothing, case plan activities, or any denial of basic rights;
 - 3. Denial of parental, sibling, or other family visits or denial of any type of other contact with family members (unless there are established safety concerns);
 - 4. Use of lewd or obscene language;
 - 5. Use of derogatory comments about the child, the child's family or friends, race, gender, gender identity, or sexual orientation;
 - 6. Restriction to a room for more than a short period of time without periodic observation;

7. Restriction to a dark room or area;
 8. Locked isolation of any kind;
 9. Physical injury or threat of bodily harm;
 10. Cruel, severe, or humiliating actions, such as washing mouth with soap, taping or obstructing child's mouth, placing painful or unpleasant tasting substances in the child's mouth or on their lips, or any type of public humiliation;
 11. Extremely strenuous work or exercise;
 12. Mechanical or chemical restraints; and
 13. Punishment of any kind for poor toilet habits.
- G. Neither a resource parent nor DCFS can give permission to the school to spank a child in foster care.
- H. Physical restraint will be initiated only by a trained person and only to prevent injury to the child, other people or property and will not be initiated solely as a form of discipline.
- I. A child will not be allowed to administer discipline, with exception to teen parents disciplining their own children under the supervision and guidance of the resource parent.
- J. Searches of a child or a child's personal property will be limited to ensuring the safety and security of children and their foster family, or in cases of suspected theft.

Health Care

- A. Cooperate with DCFS in medical and dental care planning for foster children in the resource home.
- B. Make medical and dental appointments as needed while also encouraging and assisting teenagers placed in the home to make their own medical and dental appointments, as developmentally appropriate.
- C. Accompany the child to the initial health screening, comprehensive health screening, and any on-going physical or mental health services provided whenever possible. If this is not possible, the resource parent will be available by telephone to the person conducting the screening.

- D. Welcome the child's biological or legal parent to also attend medical and dental appointments as appropriate and per any applicable court orders.
- E. Consult with the health care provider about the child's health care needs.
- F. Report any corrective or follow-up medical or dental care the child needs to DCFS.
- G. Have transportation available to transport the child in foster care to medical, dental, and other health-care-related appointments or, if that is not possible, be responsible for arranging transportation for children in foster care to all necessary medical, dental, and health-care appointments. Area Directors may grant a waiver in situations where provisional resource families have been recruited specifically for a child.
- H. Ensure that each child has sufficient sleep for their age and physical condition.

Medication

- A. Administer medications only in accordance with directions on the label and be aware of possible side effects of all medications.
- B. Store all over-the-counter medications in an area not readily accessible to children, according to the age and development of each child in the home.
- C. Store medication in accordance with pharmaceutical recommendations.
- D. Lock all prescription medications, excluding Epi-pens, inhalers, and Glucagon kits.
 - 1. Acceptable methods of locking prescription medications include safes, cabinets fastened by magnetic cabinet locks or similar devices, or containers secured with a padlock.
 - 2. An age-appropriate and developmentally capable child may be provided or have access to non-narcotic prescriptions with an approved safety plan. Examples include without limitation birth control, acne cream, and topical creams.
- E. Log all medication at the time the medication is administered (see "What Happens Beyond the Initial Placement?" section in the "Health and Medical Services" subsection for more information).

Education

- A. Work with the child's assigned FSW (or other DCFS staff) to enroll each school-age child in an accredited school immediately upon placement or the next school day.
- B. Cooperate with DCFS and take part in the selection and arrangement for educational programs appropriate for the child's age, abilities, and case plan.
- C. Attend school conferences concerning children in your care and plan with school personnel when there are school problems.
- D. Welcome the child's biological or legal parent to also attend any school conferences or other school-related activities as appropriate and per any applicable court orders.
- E. Cooperate with DCFS in ensuring that children remain in their school of origin, to the extent reasonable and practical.
- F. Report serious situations that may require DCFS involvement to DCFS (for example, any situation that may affect the case plan or a situation that puts the child in jeopardy of suspension or expulsion).
- G. Be aware that any deviation from public education (use of private education or home schooling) must have prior authorization from the DCFS Director.

Religious and Ethnic Heritage

- A. Recognize, encourage, and support the religious beliefs, ethnic heritage, and language of children in your care.
- B. Arrange transportation to religious services or ethnic events for a child whose beliefs and practices are different from your own and who wishes to attend such events.
- C. Do not coerce children into participation in religious activities or ethnic events against their will.

Acceptance of DCFS Regulations

- A. Abide by DCFS policy and procedures to include compliance with the roles and responsibilities set forth in this publication and in the Resource Home Agreement and Addendum.

- B. Accept supervision by DCFS.
- C. Strive to provide continuous care of each child placed in your home, until such time as a permanent plan is implemented for each child.
- D. Discuss with DCFS any issues related to the placement of children in your home and determine what adjustments are needed to provide more suitable placement.

Emergency Planning

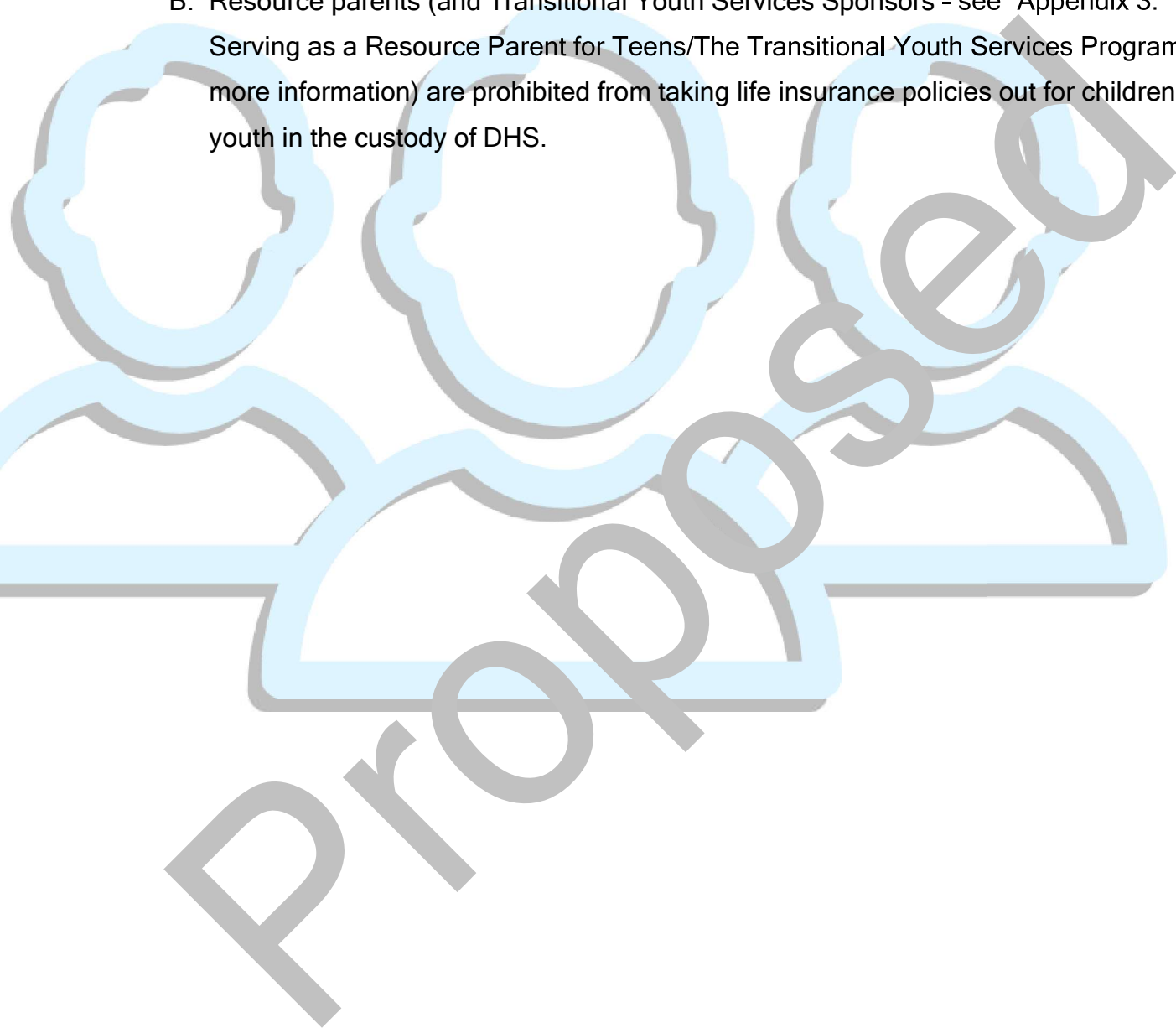
- A. Develop a plan for evacuating the house in the event of a fire and develop a plan for seeking shelter during a storm or tornado. Plan must:
 - 1. Outline the exits in the home;
 - 2. Be posted within the home; and
 - 3. Be approved by DCFS.
- B. Share the evacuation plan with each child and make sure each child understands the procedures at the time they are placed in the home.
- C. Conduct emergency evacuation drills when each new child enters the home and at least quarterly thereafter.
 - 1. Document all drills via CFS-369: Tornado and Fire Drill Log. This documentation will reflect:
 - a. Date and time of drill;
 - b. Persons participating in drill; and
 - c. Length of time needed to clear the home.

Miscellaneous

- A. Resource parents are mandated reporters of child abuse and neglect. If you see abuse or neglect or have cause to suspect abuse or neglect, you are required by law to report it to the Child Abuse Hotline at 1-800-482-5964 or 1-844-SAVE-A-CHILD (both numbers will connect you to the Child Abuse Hotline). You have the right to make

reports to the hotline anonymously. If you would like more information about mandated reporting, there is a free online training ([Arkansas Mandated Reporter Training](#)) through the Arkansas Commission of Child Abuse, Rape, and Domestic Violence. It is a self-paced training, and a certificate will be provided when completed.

- B. Resource parents (and Transitional Youth Services Sponsors - see “Appendix 3: Serving as a Resource Parent for Teens/The Transitional Youth Services Program” for more information) are prohibited from taking life insurance policies out for children and youth in the custody of DHS.



WHAT RESPONSIBILITIES DO OTHER TEAM MEMBERS HAVE?

For a child's entire team to function well, it is important that everyone understands each other's role on that team and their responsibilities to each other. We also want to ensure you have a summary of the responsibilities that the other team members have as you are making the decision to become a resource parent. There may be some repetition of these responsibilities throughout this handbook, but that repetition is intentional. DCFS wants to clearly communicate critical points to help manage expectations and ensure that everyone works together to support the child and, in most cases, helps the child's birth or legal family work toward reunification.

Responsibilities of DCFS to Resource Parents

- A. Evaluate the specific strengths, needs, preferences, and experience of each resource home to determine the number, ages, sex, and characteristics of children who may be placed in the home. No child may be placed in a resource home in violation of the limitations established in this publication (see "How Many Children May Be Placed in My Home?" for more information).
- B. Delegate the responsibility for the day-to-day care of the child in foster care to the resource parents.
- C. Ensure regular visits to the resource home (visits may be announced or unannounced).
- D. Provide support services, such as respite care, childcare, crisis and after-hours intervention, and counseling as needed.
- E. Make training available to resource parents and prohibit placement of children in foster care with any resource parent who has not satisfied the annual in-service training requirement of fifteen (15) hours that is due at the end of the second year.
- F. Actively work the concurrent permanency goals for a child.

- G. Notify resource parents of all staffing and judicial case reviews for foster children who are placed in their home.
- H. Investigate all child maltreatment allegations concerning any person in a resource home in accordance with the Child Maltreatment Act.
- I. Continually monitor the appropriateness of a placement.

Responsibilities of DCFS to Children in Foster Care

- A. Provide the child the basic rights inherent to all children.
- B. Prefer relatives and fictive kin as placement resources for the child at all stages of a case, including after termination of parental rights.
- C. Place the child in the most family-like setting possible that can best serve the child's needs and is the least restrictive environment.
- D. Place the child with siblings, whenever possible.
- E. Place the child near birth or legal parents to allow frequent contact.
- F. Ensure the child has regular family-time visits with birth or legal parents, siblings, and others with whom there is a significant relationship, unless restricted by court order.
- G. Give the child honest information regarding all decisions (in a manner suitable to the child's chronological and developmental age).
- H. Allow the child to participate in case planning, conferences, staffing, court hearings, and similar proceedings, whenever possible and age appropriate.
- I. Keep a record for each child that includes legal documents (example include without limitation birth certificate, social security card, and court orders).
- J. Help the family to address the safety issues that caused the removal of their child in order to safely and swiftly return the child to the birth or legal parents or move the child safely and swiftly to another form of permanency if reunification is no longer the goal.
- K. Prepare youth for successful transition to adulthood.

Responsibilities of DCFS to Birth or Legal Parents

- A. Offer and provide services and supports that will help keep the family together and work toward reunification, as applicable.
- B. Let them know they may seek the assistance of an attorney any time a legal action involves their child.
- C. Let the family know why it was necessary to temporarily remove their child and place them with a resource family.
- D. Do not judge or criticize the family and acknowledge that they share in their children's lives.
- E. Let the family know how they can still be involved in their child's life while the child is in foster care.
- F. Let them know what they must do to have their children return home.
- G. Include the family when creating and revising the case plan.
- H. Reunify the child with their family when the safety concerns that caused removal are corrected.

Responsibilities of Birth or Legal Parents

Birth or legal parents are the key to long-range planning for the child in foster care. They are central members of the foster care team. The child began with them, identifies with them, and in most instances has a longing to return to them. The return home of the child is dependent on their birth or legal parents' ability to correct the safety issues that caused the child to come into foster care. Otherwise, the birth or legal parents face the possibility of long-range plans being made that may include termination of parental rights.

Birth or legal parents have the responsibility to:

- A. Provide all important information about their child and family to DCFS.
- B. Provide a list of relatives and fictive kin for the child.

- C. Tell the FSW about any special needs their child has, including health conditions, school information, and important family customs or cultural practices.
- D. Participate in staffing meetings and court hearings.
- E. Work with the FSW to create a case plan and revise it as needed.
- F. Participate in the services to support the case plan goals offered to the family and work on achieving the goals of the case plan.
- G. Be involved in their children's medical appointments and school, social, or religious activities.
- H. Keep in contact with the FSW and keep them updated on progress in achieving the goals of the case plan.
- I. Maintain contact and communication with their child(ren) by keeping appointments to visit with or otherwise see their child.

WILL I HAVE SUPPORT IN MY ROLE AS A RESOURCE PARENT?

Yes! In addition to your own natural support system, as a resource parent you will be a member of a professional team for each child placed in your home and their family. What follows is a summary of typical members of a child's team that you will meet as you go through the application process and once you are approved as a resource home.

Resource Worker

Your DCFS Resource Worker will most likely be the first DCFS representative that you meet. The Resource Worker will be the person primarily responsible for helping you through the approval and assessment process. Once you are approved and opened as a resource home, the Resource Worker will continue to serve as an advocate for you. The Resource Worker will make at least quarterly visits to your home to see what questions or needs you may have. During the quarterly visits, the Resource Worker will also ensure your home continues to stay in compliance with resource home standards and continues to otherwise be an appropriate resource home. At least one (1) of these visits will be unannounced. The Resource Worker will also be a great source of information to you regarding ongoing training to help you in your role as a resource parent and meeting continuing education requirements (see the "Continuing Education" subsection under "How Do I Continue Serving as a Resource Parent?" for more information). The role of the Resource Worker is designed to help make a child's placement in your home successful and prevent the potential harm that can come to a child through placement changes. The Resource Worker will also connect resource parents to the local Resource Parent Association, when applicable.

Other Resource Worker duties include without limitation:

- Conducting interviews for the purpose of gathering social histories or other needed information to assess the eligibility or appropriateness of a referral;
- Administering background checks;

- Visiting resource homes to complete quarterly assessments and annual evaluations of each resource home and additional visits as needed;
- Following up with corrective actions for homes that are out of compliance;
- Responding to requests from resource parents;
- Providing an explanation of common procedures for hearings in the resource parent's judicial division;
- Maintaining resource family training records for continuing education and conducting make-up training as needed;
- Assisting in the development of resource parent support groups or associations and participating in the annual resource parent conference;
- Providing information on training and other resources; and,
- Performing any other duties identified by the Area Director that will promote the success of the resource home.

Never hesitate to contact your Resource Worker if you have questions or need support!

Caseworker (a.k.a. Family Service Worker)

Each child placed in your home will have at least one (1) Family Service Worker (FSW), sometimes referred to as the child's caseworker but referenced throughout the remainder of this publication as the FSW. While the Resource Worker will primarily help to make sure your needs as a resource parent are met, the child's FSW is mainly responsible for ensuring that the child's needs are met. The FSW will also work with the child's biological parents to help them accomplish the goals set out in their case plan. The FSW strives to empower biological parents to correct the issues that resulted in the child's removal and work toward a safe reunification.

Meeting the child's needs includes actively working with all team members, including you and the child's biological parents, in meeting case plan goals and helping the child achieve permanency as quickly and safely as possible. The FSW will visit the child in your home

weekly during the child's first month in the placement and at least monthly thereafter. In addition, you can reach out to the FSW at any point in time by phone, email, or text. The FSW will also maintain regular contact with medical personnel, teachers, childcare personnel, service providers, and attorneys involved with the case.

When the FSW visits the home, the main objective is to discuss the case plan, any changes in the plan, or specific problems with the placement. The FSW is neither a "best friend" nor a negative authority figure. For example, telling the child, "if you don't behave, I'll call your FSW," or portraying the FSW as someone who will solve all the problems by saying, "we'll call the FSW. They'll take care of everything," is not productive. Resource parents and the FSW are partners working together. This partnership works best when each person presents the other to the child as a positive influence in that child's life. Each member of the child's support team (including you) contributes to the effort taking place on behalf of the child.

If a child placed in your home was removed from a county that is different from the county in which you live, then that child will have a county of origin FSW from the child's removal county (also referred to as primary FSW), as well as a resident county FSW in the county in which you live (also referred to as the secondary FSW). The county of origin FSW is the team member who is responsible for ensuring everyone collaborates on the development of the family's needs assessment and family case plan, organizing and notifying all team members about staffing, and providing notification regarding upcoming court hearings. The resident county FSW will assist by making sure more routine needs of the child are met. This includes helping with the delivery of services and visits outlined in the child's case plan and making any needed purchases.

Supervisor

Every Resource Worker and FSW has a supervisor. The direct supervisor provides guidance and support to their staff and can also be a support to you if there are questions the FSW cannot answer (or when the FSW is on leave or otherwise unavailable).

Area Director

DCFS has ten (10) geographic service areas throughout the state (see Appendix 4: DCFS Geographic Service Areas for a map). Each of these service areas has an Area Director who supervises all county supervisors for their area and helps to ensure all operations and services for DCFS clients are successfully delivered.

Program Assistant

Program Assistants (PAs) are DCFS staff who provide an enormous amount of support to FSWs and biological families. PAs often help provide transportation for children in foster care and their families to various services and visits and, supervise family time visits, when necessary, among many other duties.

Health Service Worker

For children placed in your home, the DCFS Health Service Worker will help coordinate your child's initial health screening and comprehensive health screen (frequently referred to as the PACE exam, which stands for Project for Adolescent and Child Evaluations), and they will help you follow up on the recommendations outlined in the Child Comprehensive Health Exam. Health Service Workers help coordinate a variety of medical services for all children, but do not provide medical advice to resource parents.

Health Service Workers also provide additional support to resource parents who care for medically fragile children. When assigned to a medically fragile child placed in a resource home, the Health Service Worker will initially have weekly contact with the resource parents to assist with service referrals and other supports. The Health Service Worker can also assist the resource parents with scheduling medical appointments, if requested by the resource parents. Over time, the frequency with which the Health Service Worker contacts the resource parents for a medically fragile child may be reduced based on the child and resource family's specific needs.

Transitional Youth Services Coordinator

If you have a youth who is fourteen (14) years of age or older placed in your home, that youth may have a Transitional Youth Services (TYS) Coordinator assigned. TYS Coordinators provide support to FSWs who have teenagers on their caseloads by helping older youth prepare for adulthood. TYS Coordinators provide Life Skills classes (examples of topics include without limitation budgeting, meal preparation, completing a resume, and job interview skills) to teenagers and may also help teens apply for jobs or post-secondary education and training and help connect teens to other resources as they approach adulthood. If you have a teen placed in your home, be sure to ask whether a TYS Coordinator is assigned and inquire about Life Skills classes that may occur in your vicinity.

Attorney Ad Litem

The Attorney *ad litem* (AAL) represents the child's best interest. The AAL gathers information from professionals, caregivers, and the child (depending on age and maturity) to make a recommendation to the judge as to what the AAL believes is in the child's best interest. The AAL should attend staffing and all court hearings. The AAL may come to the home where the child is placed to meet with the child and caregivers and to ensure that the placement meets the child's needs.

Court Appointed Special Advocate

A Court Appointed Special Advocate (CASA) is a volunteer who may be appointed to a child in foster care if a CASA Program exists in your county or jurisdiction and if a CASA volunteer is available. CASAs serve as an extra set of eyes and ears for these vulnerable children. If your child has a CASA, the CASA will make visits to your home to speak privately with the child in foster care.

HOW DO I PREPARE FOR A PLACEMENT?

Congratulations! If you have been approved as a resource home and are awaiting your first placement, this section covers some of the things to know about how DCFS places children in foster care as well as how you can be involved in those placement decisions.

Locating a Placement for Children

All children entering foster care do so under authorization by the Court. Legal custody constitutes authorization by the court for DCFS to assume physical control of a child. A child will never be placed in foster care without legal custody. However, DHS does have the authority to take emergency seventy-two-hour legal custody of any child who is in immediate danger when there is not enough time to petition for and obtain a court order.

A successful match between the child and the resource family will make all the difference in a child's life during an extremely difficult period. The law requires that a child be placed in the least restrictive, most family-like environment possible. To that end, relatives and fictive kin are always considered as the first placement option for a child. Children do best when in surroundings that are familiar to them. Relative and fictive kin caregivers often provide the best chance for children to stay with their family in familiar surroundings and routines. When relative or fictive kin caregivers are not available to care for a child, a child will then be placed in a traditional resource home.

Based on information gathered during the resource parent approval and assessment process, DCFS will consider the preferences, skills, and experience of traditional resource parents and a child's individual needs when seeking a placement for a child in foster care. Factors taken into consideration include the child's age, sex, religion, disabilities, interests, challenges, existence as part of a sibling group, case plan, and proximity to family and current school. DCFS will also consider the number of beds the resource home currently has available. To help with this process, DCFS uses the Resource Home Matching Tool to make a determination.

Two (2) of the most important considerations for placements are: whether a placement will allow a child to be relatively close to where their biological or legal parents live and whether a placement will allow a sibling group to stay together. When a child is placed close to their birth or legal parents, it helps facilitate visits with parents and other people with whom the child has established bonds and supportive relationships. Placing siblings together lessens separation trauma, eases the stress on their parents, and reinforces the importance of family relationships. When considering placement for siblings, priority is given to families who will take all children in a sibling group.

DCFS uses a text application for seeking placement for a child in foster care. This application allows resource parents to opt-in so they can participate in the selection of the placement location via text. Resource parents will receive a group text message with basic, approved information about a child in need of placement. If interested, resource parents can then call the phone number provided in the text to ask further questions about a potential placement and to notify DCFS staff of their intent to accept or decline placement. If you are interested in participating in the texting system, please let your DCFS Resource Worker know.

Information about a Possible Placement

It is important that both the child and the resource parent feel that the selected placement is a good fit. When you are contacted about taking a child into your home, the DCFS staff member should provide you with the information listed below about the child. The DCFS staff person who contacts you may not initially have all information but may be able to get it after the placement. For example, the full extent of a child's medical needs may not be known at the time of placement. However, DCFS is responsible to provide you with all the information the agency has at that point in time for you to provide appropriate care for the child, such as:

- Age;
- Education and school information;
- Health of child and special health needs;
- Disabilities, special equipment, facilities, or help needed;

- Behavior, both positive and negative, that can be expected;
- Siblings and where they live, if not placed together;
- Reasons the child is in foster care;
- A general indication of the case plan, including the plan for visitation and family time of both parents and any siblings; and
- Child's interests.

This information is confidential and will not be redisclosed by the resource parents.

You have the option not to take a child if you feel the child would not be compatible with your family. If not all the information listed above is immediately provided, you may want to ask some of the following questions to help you decide if a child will be a good match in your home and if you will be able to meet the child's needs. Once again, DCFS may not have all the information at that point in time, but they are responsible for answering the questions to the best of their ability:

- What school does the child attend?
- What grade is the child in at school?
- What kind of maltreatment has the child experienced? (Physical, sexual, or emotional abuse? Neglect?)
- What medical information is known about the child?
- Is the child on medication? If so, what is the medication and where is it?
- Does the child have any allergies? If so, what are their reactions?
- If you have pets, how does the child react to animals?
- Are there any known behaviors that pose a risk to other children or pets in the home?
- Is there anyone with whom the child is not allowed contact?

- Is the child coming with any clothes, toys, or other belongings? Are any of these items of special significance to the child?
- Are there any special dietary restrictions or needs?
- What activities, sports, or hobbies does the child enjoy?
- What should be said to the child when the child asks about their parent?
- Is there any reason to suspect that the child might have had prenatal exposure to alcohol or drugs?

Sometimes children are removed from their homes quickly and may not have many personal items with them. Here are some basic items to have on hand in your home:

- Basic toiletries;
- Bath towels;
- Bedding (if you have multiple options, consider allowing the child to choose the ones they'd like to use);
- Night light;
- Toys;
- T-shirts (oversized for sleeping); and
- Simple household rules and routines.

WHAT CAN I EXPECT AND WHAT IS EXPECTED OF ME AT THE TIME OF PLACEMENT?

Placement Packet

At the time of placement in the resource home, you will receive the following documents in the Placement Packet:

- Resource Home Agreement Addendum (to be signed by DCFS representative and the resource parent);
- Medical Passport;
- Copy of the child's birth certificate (may not be available at the time of initial placement);
- Family Assessment (If the child was just removed from their family, and this is the child's first placement, the first family assessment is not required to be completed until thirty (30) days after the child enters care); and
- Case Plan (if the child was just removed from their family, and this is the child's first placement, the first case plan is not required to be completed until thirty (30) days after the child enters care).

If you do not get a packet, please ask for it. The purpose of the Placement Packet is to provide information on the child that will accompany the child during their time in foster care. The packet helps workers and resource parents in the placement and record keeping process. With every move (which will hopefully be few), the caregiver and the child's FSW have the responsibility to replace needed forms and update information on the child. When the child leaves a resource home, the Placement Packet is to be given to the child's FSW.

The FSW will discuss the contents of the Placement Packet with you and the child (if applicable) to address:

- The reason for placement;
- Medical and mental health information (DCFS will ensure all known and currently prescribed medication for a child, if known, is provided at placement);
- Educational information such as any Individual Education Plan (IEPs) for special education;
- Upcoming appointments and court dates; and
- Other information that you need to provide appropriate care for the child, to protect the safety of the child, and to protect the safety and property of you and your family members.

Please also note that resource parents are entitled to the foster care record for children in foster care currently placed in their home. This includes the family assessment, case plans, court reports, and medical records for the child. However, information about the parents or guardians and any siblings not in the resource home, will not be redisclosed by the resource parent.

Welcoming a Child into Your Home

When a child first comes to your home, fear, anger, and confusion may just be a few of the emotions the child is having. Regardless of the reason a child comes into foster care, it is still hard for a child to leave their home and come into new surroundings. The child needs understanding, support, and patience, when settling into your home.

A few ideas when welcoming a new child include:

- Ask the child if they want something to eat.
- Introduce the child to all household members, including family pets (if children are unfamiliar with or frightened by animals, introduce them gradually and teach proper pet handling and care).

- Show the child where everything is in the house, including the bathroom.
- Show the child the bedroom where they will be sleeping and where to put their belongings.
- Let the child unpack in their own time. Offer to help or just let them know where to put their things whenever they are ready to unpack.
- Give permission for the child to put a picture of their mom, dad, siblings, or others in their bedroom.
- Talk about your family's daily routine and basic house rules, but in the simplest and most age-appropriate terms possible.
- Ask the child if there are any special events (such as birthdays or school events) coming up.
- Take time to help a child feel comfortable in your home. Make yourself available to talk with or reassure the child.
- Respect the child's right to privacy.
- Be respectful of the child's relationship with their parents and extended family members.
- Do not expect the child to show thankfulness for the home or the support you are providing.

Helping the Child Understand Your Family Routine

Children do best when they have predictability; have a routine; know what to expect in a typical day; and have regular mealtimes, bedtimes, chores, and expectations. Most children will need some time to watch and become comfortable with the family's routine and their space. Remember to have patience and understanding.

Bedtime and morning routines may be difficult times for a child placed in foster care. Having a consistent routine for morning and bedtimes will help children through these transitions. For many children, a night light, stuffed animal, and an open door may make them feel more

comfortable. It is also important to give children permission to get up and use the bathroom in the middle of the night.

Sleep problems are common for children in foster care. Some children may have sleep disorders or disruptions as a result of trauma stemming from the abuse or neglect that they have experienced and the trauma of being separated from family. Notify the child's FSW if you see the child experiencing chronic sleep difficulties.

Helping the Child Understand House Rules

Children who have experienced abuse or neglect and are placed in foster care need limits and boundaries, just as all children do. A child in your care will need to know the rules in your home. House rules that are simple and openly discussed as a family are helpful. There may be a fine line between routines and rules, especially some routines that may have developed into informal rules in your home. You may want to think ahead of time about some of these routines that have become informal rules in order to avoid potential conflict or confusion. For example, who sits where at the dinner table? This may be a routine that has developed into an informal rule in your home, especially for biological children or children in foster care who have already been placed with you for a period of time. Another example of a common routine that has turned into an informal rule that some resource parents may not think of right away: Making sure children placed in your home know to tell you when they are out of something, such as toothpaste or toilet paper. Before receiving your first placement, you may want to reflect on some other routines that have become informal rules for your family so that you can share those when a new child is placed in your home.

When making and enforcing rules, please remember to:

- Make the rule clear and repeat it often;
- Base rules upon what can be reasonably expected from the child's age and emotional development; and
- Be consistent and stay calm.

HOW MANY CHILDREN MAY BE PLACED WITH ME?

During your approval process, your Resource Worker will discuss with you the maximum number of children that may be placed with you at any given time. This decision is based on several factors, including physical space available for children, your parenting capacities and skills based on your prior parenting experience and any specialized training or education, and your ability to meet the needs of each individual child present in the home. Given these considerations, DCFS reserves the right to determine the number of children that may be placed in a resource home, regardless of the amount of physical space that may be available for children in the home.

Minimum Licensing Standards for resource homes establish the guidelines for maximum capacity of children placed in each individual resource home. A resource home will have no more than five (5) children in care placed in the home at one time. A resource home may care for up to eight (8) children, including biological, adopted, or other legal children who are in the home. This includes placement and respite care. Further, including a resource parents' biological children, a resource home may have no more than two (2) children under two (2) years of age and no more than three (3) children under six (6) years of age. The exceptions to the above limits will be in those instances in which the placement of a sibling group or a minor parent and their child together in a resource home would exceed the limits.

Resource parents must have legal custody or guardianship of any children (other than children in foster care) in the home who are not their birth children or relatives.

WHAT HAPPENS BEYOND THE INITIAL PLACEMENT?

Overview

As you and your family work to integrate the child placed in your home into your family, hopefully daily life will still look familiar in terms of taking the children to school and extracurricular activities, helping the children with homework, attending doctor visits, and celebrating holidays. On the other hand, having a child in foster care placed in your home also means many new commitments for you and your family, such as staffing meetings, court hearings, and working to ensure that the child has adequate family time with their birth or legal parents and siblings, as applicable. As a resource parent, you and your family will also need to be prepared to have different people from the child welfare system visit your home. To outline what some of these activities and requirements may look like when a child in foster care is placed in your home, this section is divided into two primary parts:

- Daily Living; and
- Foster Care Case Activities and Requirements.

Some of the information provided below has already been referenced in the “What is Expected of Me as a Resource Parent?” section. But, once again, there is so much for which resource parents are responsible. DCFS wants to ensure you have a clear understanding of your role and what to expect. So, much of this information bears repeating.

Daily Living

Decision Making

As the resource parent, you will provide the direct care and have decision-making authority concerning the child's daily living. That said, you may not independently make major decisions that have far-reaching effects on the child's life, such as consents for surgery, military service, or marriage. Likewise, you may not make decisions that have long-term effects for the child's personal appearance, such as allowing the child to obtain piercings or tattoos or changes to a their hair style (particularly for infants and toddlers who have never

had a haircut before, given some cultural traditions around a child's first haircut) without consulting the FSW Regular, ongoing haircuts that keep a child's basic style are left to the resource family's discretion. The FSW will obtain permission from the child's parent prior to authorizing any changes in appearance for the child. Such changes cannot be made without parental consent.

Communication with the Child's Assigned FSW

As a resource parent, you have a valuable window into how a child is adapting and adjusting. Often a resource family will see problems before the child's FSW will. It is important that you notify the assigned FSW when you see any problems. Concerning or unusual behaviors may be indicative of a larger problem. This is especially important if you are seeing behaviors such as:

- Sexual acting out;
- Depression or other mental health concerns;
- Physical aggressiveness; or
- Other extreme behaviors.

Keep the child's FSW informed through telephone calls, confidential email, voice mail messages, or written documentation. If you need to talk to the FSW immediately or have not received communication back within forty-eight (48) hours, contact the assigned FSW's supervisor for assistance.

Use of Child's Legal Name

For legal purposes and for the child's sense of identity, a child in care will use their own name. Resource families will use the child's legal name and not give the child a different name. However, a child may have a nickname they prefer to be called. A child in care will not assume the name of the resource family while the child remains in the custody of DHS.

Health and Medical Services

As the child's day-to-day caregiver, if possible, you will need to go with the child to doctor visits, or to otherwise receive treatment and consult with the health care provider about the

child's health care needs. DCFS may assist with transportation and other necessary support to enable the resource parent to accompany the child to health care visits. This assistance may be provided either through DCFS staff, including paid or volunteer aides, or through agreements to reimburse the resource parent for such supportive services related to the child's case plan.

If you cannot accompany the child, the FSW or Health Service Unit will accompany the child and convey the health care provider's diagnosis and instructions to you. The Medical Passport (see below) will be revised, and the updated version will be provided to you.

Medical Passport

To equip you to care for a child placed in your home, DCFS staff will provide you with an abbreviated health record, typically referred to as the "Medical Passport," at the time of placement. The Medical Passport will include (depending on when the child entered foster care), the initial health screening, timely comprehensive health assessments, and a descriptive health plan for each child. The medical passport will also include a copy of any assessment or case plan that has been developed for the child's family, and the names of the child's prior health care providers, if known. If a child's placement with you is their first placement in foster care, please understand that health and medical information available for that child may be limited, particularly if a removal was done after-hours or on the weekend.

The Medical Passport forms are to be completed during initial placement into foster care. The FSW will complete CFS-362: Medi-Alert to Resource Care Provider. You and the FSW are to complete CFS-365: Receipt for Medical Passport together. The child's FSW or Health Service Worker will also request medical records on the child for the time prior to their entry into foster care. The medical history information gathered will be given to the physician who will do the comprehensive health assessment. The medical history is used to supplement and correct the child's Medical Passport. Requests for medical records are documented on the CFS-353: Requested Medical Records Log. The CFS-366: Initial Physical is used for the initial physical the child receives upon entry into foster care. Finally, the CFS-352: Medical, Dental, Vision, Hearing, and Psychological form will be completed each time the child has one (1) of these ongoing health care appointments.

Initial Health Screening

A child who enters the custody of DHS will receive an initial health screening:

- Not more than twenty-four (24) hours after removal from home, if the reason for removal is an allegation of severe maltreatment or there is evidence of acute illness or injury; and
- Not more than seventy-two (72) hours after removal from the home for all other children.

The initial health screening will include a head-to-toe physical. If possible, the physical should be conducted by the child's Primary Care Physician (PCP). You are encouraged to accompany the child to the initial health screening (and to any appointments for on-going health or mental health services). If this is not possible, you will need to be available by telephone to the person conducting the screening.

As with educational services and activities, if the goal of the case is reunification, then the child's biological parents are also encouraged to attend medical appointments, if allowed by court orders. This allows them to take part in the care of their children and provide valuable health history regarding both the child and extended biological family. Talk with your child's FSW on how best to proceed and discuss issues like participation in medical appointments and other health services at the regular staffing meetings that will occur.

The FSW or Health Service Unit will share the results of the screening with you along with any instructions for the child's care and treatment. You will also receive the name of the person who performed the screening. Upon completion of the initial health screening, the FSW or Health Service Unit will complete the CFS-362: Medi-Alert and give a copy to you. If the initial health screening indicates that treatment or further evaluation is needed within thirty (30) days, the FSW or Health Service Unit will ensure that the need is promptly met.

Comprehensive Health Assessment

A Comprehensive Health Assessment will be completed within sixty (60) days of a child's entry into foster care. The Comprehensive Health Assessment includes: cognition and achievement; speech and language development; and hearing, vision, medical, emotional, and behavioral development. Medications will be provided as necessary.

The University of Arkansas for Medical Sciences (UAMS) Project for Adolescent and Child Evaluation (PACE) Program is responsible for conducting Comprehensive Health Assessments. Once again, the resource parent, as well as the birth or legal parents or relevant members of the extended family, are encouraged to participate in the Comprehensive Health Assessment (when appropriate).

After the Comprehensive Health Assessment, there will be a written summary of the medical, mental health, educational, dental, social status, and needs of the child. The Child's Health Services Plan should be completed at the Comprehensive Assessment. The FSW or Health Service Unit will provide copies of the health plan and updates within seven (7) days to the resource parents, the child's legal parents, and the child (if ten (10) years of age or older).

If Medicaid records indicate that a child has not had recent dental examinations within the approved Division of Medical Services (DMS) timeframes, then a dental examination will be completed within the first sixty (60) days. All follow-up dental work that is recommended by the provider will be completed within the recommended timeframes set forth by the dental provider.

Continuing Health Services

After the Comprehensive Health Assessment is conducted, all subsequent examinations will take place (as part of the ongoing Early Periodic Screening Diagnosis Treatment (EPSDT) program) based on the respective periodicity schedules. The medical provider will complete CFS-352 at each examination and the Medical Passport will be updated and provided to you. A physical examination control schedule will be maintained so that examinations are conducted according to the DMS EPSDT periodicity schedule.

Prescription Drugs

Children in foster care are eligible for prescription drugs through the State Prescription Drug Program. When there are no Medicaid providers available in cases of emergency, the FSW (with the approval of the County Supervisor or designee) will authorize and bill for medication and medical services, as applicable.

Mandatory Immunizations

State law requires that certain immunizations be obtained before a child enters school. As the resource parents you will assist in maintaining current immunizations (See Recommended Immunizations Timetable under “Useful Links” in this manual.)

Medication

As stated in the “What is Expected of Me as a Resource Parent?” section, you will need to administer medications only in accordance with directions on the label and be aware of possible side effects of all medications. All over-the-counter medications will be stored in an area not readily accessible to children, according to the age and development of each child in the home. Medication will also be stored in accordance with pharmaceutical recommendations.

All prescription medications (excluding Epi-pens, inhalers, and Glucagon kits) will be locked. An age-appropriate and developmentally capable child may be provided or have access to non-narcotic prescriptions with an approved safety plan (examples include without limitation birth control, acne cream, or topical creams).

You are required to log all medications at the time the medication is administered, using CFS-364: Medication Log. The logs must include the following:

- Child’s name;
- Time and date;

- Medication and dosage; and
- Initials of the person administering the medication.

You will provide age-appropriate (considering both chronological and developmental age) children with a daily supply of medication (over-the-counter or prescription) for use when the child is away from the home during the times the dose is needed. Examples include pain relievers, fever reducers, anti-inflammatory (and other related medications), or prescribed antibiotics or inhalers. However, these medications must be logged at the time they are given to the child.

Hospitalization

When a child in foster care is hospitalized, the FSW working with the child must provide the hospital with the child's Medicaid number (if applicable), vital statistics, previous medical history, and other identifying information as indicated.

The FSW signs both the admission forms and the required consent for surgery, if indicated and will include the name and cell phone number of the FSW to be contacted regarding the child on the admission forms. A second opinion by a medical specialist will be obtained before major surgery, whenever possible.

As a resource parent, you may not sign a child in foster care into the hospital for planned visits or sign other medical or surgical consent. However, never delay calling 911 or otherwise taking a child to the emergency room if needed. Physicians and hospitals may determine that an emergency exists and waive the usual required consent, or they may take consents from DHS on the telephone with a second party at the hospital listening and verifying the consent. The most important thing to remember after arranging for any emergency medical care is to notify the FSW immediately when a child in foster care is hospitalized. As soon as possible, the FSW will visit the hospital and sign the required consents.

Payment for Medical Services

Medicaid is the primary source of medical payment for children in foster care. If a child in the home does not receive a Medicaid card, contact the FSW. A child's Medicaid number should be accessible through the Resource Parent Portal within three (3) business days of the child coming into care, and the actual Medicaid card should be available within ten (10) business days of the child entering care. For a child who has been in foster care for more than three (3) weeks but is moving to a new placement, a copy of the child's Medicaid card will be provided to the resource parents at placement. Although the FSW may provide a copy of the Medicaid Card (for the resource parent to keep in the Medical Passport, and so that they may obtain medical services for the child), the actual Medicaid Card will be kept in the child's case record in the county office. When there are no Medicaid providers available in cases of emergency, the FSW (with the approval of the County Supervisor or designee) will authorize and bill medical services. In the event medical services are denied by Medicaid, the child's medical needs will be met with foster care funds. A child will not be denied medical services because the child is not Medicaid eligible.

Educational Services

It is the responsibility of DCFS to provide educational opportunities to help each child meet their full potential. To ensure that children in the custody of DHS receive a quality education, it is DCFS policy to enroll children in foster care only in schools accredited by the Arkansas Department of Education. Federal law requires child welfare and education agencies to collaborate to guarantee school stability and school attendance for all children in foster care. It specifically mandates that, in making decisions regarding a child's placement, child welfare agencies consider the location of the child's school and the appropriateness of the child's current educational placement. Children entering foster care or experiencing a placement change must continue to attend their school of origin (school in which the child was enrolled at the time of entry into foster care or time of placement change), unless remaining in the school of origin is not in the child's best interest. Best interest determinations will be made collaboratively between the Local Education Agency (LEA) and local DCFS staff. Factors to be considered in making a best interest determination include:

- Child's preference;
- Age of the child or youth;
- Preference of the child's parents or education decision makers;

- Child's attachment to the school, including meaningful relationship with staff and peers;
- Placement of the child's siblings;
- Distance of the commute to and from the school of origin and its impact on the child's education and well-being;
- Personal safety issues;
- History of school transfers and how they have impacted the child;
- Availability and quality of services in the current and potential schools, and their ability to meet the child's educational, social, and emotional needs;
- Child's need for special instruction (such as special education and related services);
- Anticipated length of stay in the placement;
- Child's permanency plan;
- Time remaining in the school year; and
- Other factors that may impact the child's academic success.

To the extent reasonable and practical, local DCFS and LEA will ensure the child remains in the school of origin while the best-interest decision is being made.

Children in foster care will attend public schools. However, the DCFS Director may grant an educational waiver allowing a child to be placed in a non-public school, including a private, parochial, or home school, if it is in the best interest of the child. No state or federal funding may be used for such placement. For a child in foster care to be enrolled in a non-public school or be home schooled, a certified mental health professional must present documentation stating that the non-public schooling is in the child's best interests.

If a child placed in your home is struggling in school, the first step for assessing their needs (examples include without limitation tutoring needs, any special accommodations (such as a 504 Plan), or special education assessment or services) is to speak with the appropriate

representatives in a child's school district. Tutoring can be purchased for a child in need of additional educational assistance. However, please consult with the child's FSW since purchasing tutoring services requires pre-authorization and there are often alternate services or supports that may better meet a child's educational needs. The DCFS Education Specialist is also available for consultation regarding educational services and needs. Please ask your child's FSW for that person's contact information, as needed. In addition, each school district has a Foster Care Liaison who may be able to help in this area of concern. You are encouraged to learn who your child's Foster Care Liaison is in the school district. Educational testing and counseling should be available to a child in foster care when they begin to make career or curriculum decisions. If a child desires to pursue college or vocational training after high school, the FSW and TYS Coordinator will assist the child in the exploration of resources to pursue this plan.

As a resource parent, you will often know the child placed in your home better than the FSW, since you are with the child every day. As such, you have a wealth of knowledge about that child and are encouraged to attend parent-teacher conferences, any special education meetings (such as Individualized Education Plan (IEP)), as applicable, and other school events.

If the goal of the case is reunification, then the child's biological parents are also encouraged to attend these events, in most instances. In general, there is nothing that prevents resource parents and biological parents from attending educational meetings and events together. In fact, in many cases this is encouraged as it helps the child view the resource and biological parents as a team that is working to ensure the child's well-being, and can be a wonderful way to support biological parents as they work to reunify with their child. However, since every foster care case is different, be sure to speak to your child's FSW on how best to proceed and discuss issues like attendance at educational meetings and events at the regular staffing that will occur.

Daily Child Care for Non-School Age Children

Many resource parents work outside the home and require assistance with childcare for children who are not yet enrolled in grade school. Childcare may be authorized and routinely provided for a child in foster care if both resource parents work outside of the home, if it is

determined to be appropriate as part of the case plan, or if it is court-ordered. Appropriate reasons include: 1) socialization, kindergarten readiness, or therapeutic benefits for the child; or, 2) to ensure the child may be placed in a resource home in their county or near their home. The service may be authorized for up to three (3) months at a time. It will only be provided by DCFS when resources are available.

Resource parents are required to seek enrollment in an Arkansas Better Chance (ABC) or Head Start program as the childcare provider for all children in foster care. DCFS must document all attempts to place the child in an ABC or Head Start childcare program prior to authorizing use of a childcare voucher program for any childcare needs. If an ABC or Head Start program cannot be located for the child, then resource parents and DCFS staff will collaborate on identifying a childcare program that accepts daycare vouchers and also participates in the Division of Child Care and Early Childhood Education (DCCECE) Better Beginnings Program.

Childcare providers must be on the voucher system and licensed by DCCECE or on the Voluntary Child Care Registry. If the child was enrolled in childcare prior to coming into care, the child should remain in that childcare facility, if at all possible (provided it is licensed by DCCECE or on the Voluntary Child Care Registry). This is an effort to provide the child with consistency in their daily caregivers and reduce the amount of trauma a child experiences when coming into foster care.

If a child was not enrolled in childcare, prior to coming into care, or if a new childcare facility must be used, DCFS and the resource parents will make every effort to place the child in a high-quality childcare center. For more information on high-quality childcare centers, visit the Better Beginnings website at <http://www.arbetterbeginnings.com/>.

Enrollment in overnight daycares is not allowed. Likewise, late night pick-ups (after 8:00 p.m.) from childcare centers that have extended hours are also unacceptable.

Transportation and Travel

As discussed in the approval requirements, you will need to have your own transportation available to transport the child to school, appointments, and activities. When the resource parent needs assistance with transportation, the resource parent should contact the FSW as soon as possible. The FSW, Program Assistant, or a volunteer transporter may be assigned to assist with travel as those resources are available.

Transportation of children in foster care must be conducted by a driver with a valid driver's license who cleared all motor vehicle background checks. As such, resource parents will not allow children in foster care to ride in a vehicle with a youth who drives with only a learner's permit. A minor who has met all requirements to drive alone, under an intermediate license, may transport children in foster care if you believe that minor is otherwise mature enough to handle that responsibility, if both the minor driver and the child in foster care agree to the arrangement, and if other reasonable and prudent parent considerations have been made. Minors driving independently with an intermediate license are not allowed to transport more than one (1) unrelated minor in the vehicle, they may not use any interactive wireless device while driving (including a cellular phone), and they may not operate a motor vehicle between the hours of 11:00 p.m. and 4:00 a.m., unless:

- Accompanied by a person twenty-one (21) years of age or older;
- Driving to or from a school activity, church-related activity, or job; or
- Driving because of an emergency.

Arkansas state law also requires that:

- Children who are less than six (6) years of age and children who weigh less than sixty (60) pounds require a child safety seat; and
- All other children must be restrained by safety belts.

In addition, DCFS policy prohibits smoking in any motor vehicle transporting a child in foster care. DCFS also strongly endorses and promotes the American Academy of Pediatrics

recommendation that all children younger than thirteen (13) ride in the backseat of the vehicles.

Resource parents must have prior written authorization to transport children in foster care for an overnight stay outside the State of Arkansas. Such requests will be made to the FSW as soon as travel planning begins, and at a minimum of two (2) weeks prior to scheduled travel dates, if possible. The child's FSW or other designated staff will complete a DHS-1010: Request for Out-of-State Travel and must have an approval from the Area Director or designee prior to travel occurring. Resource parents residing in counties that border on state lines will not have to submit a request for out-of-state travel in order to cross the state border, as long as travel plans do not require an overnight stay outside the State of Arkansas (such as, shopping or visiting with a relative in a nearby town).

For information on reimbursement for transportation, please see the "Transportation Reimbursement" subsection under "What Financial Support Will I Receive as a Resource Parent?".

Vacations

When vacationing as a family, resource parents are encouraged to take any children placed in their home with them. However, DCFS will not pay for vacation expenses. As noted above, travel out of state involving an overnight stay or more requires prior written authorization via a DHS-1010. Travel out of the country, with a child placed in your home, requires the approval of the DCFS Director or designee. For any planned vacations, or other travel out-of-state with a child placed in your home, the more advance notice you can provide to the child's FSW, the better (in terms of ensuring sufficient time to plan, provide appropriate notice to other parties as needed, and work out trip details).

Need for Babysitting or other Alternate Care Arrangements

DCFS recognizes the importance of allowing, and even encouraging, resource parents to take a break from the duties of providing a home to children in foster care. There are different levels of what DCFS refers to as "alternate care," which refers to any time a resource parent requests another appropriate adult to supervise the children who have been placed in the

resource parent's home. DCFS promotes the use of alternate care to foster a degree of normalcy in the lives of children in foster care. Below is a description of the different kinds of alternate care.

Extracurricular Activities and Other Normal Age-Appropriate Activities

Children in resource homes are encouraged to participate in normal age-appropriate activities, such as overnight visits with friends, extra-curricular activities, church activities, and short-term summer camps. As a resource parent who knows about the children placed in your home, you will need to apply the reasonable and prudent parent standard. This means exercising careful and sensible consideration when determining whether an activity for a particular child will not only encourage the emotional and developmental growth of the child, but also maintain the health, safety, and best interests of the child. When applying the reasonable and prudent parent standard, resource parents will make the following considerations:

- The child's chronological age, maturity level, physical and behavioral capacities, and cognitive and emotional developmental levels;
- The potential risk factors and the appropriateness of the activity;
- The best interest of the child, based on information known by the caregiver;
- The importance of encouraging the child's emotional and developmental growth;
- The importance of providing the child with the most family-like living experience possible; and
- The behavioral history of the child and the child's ability to safely participate in the proposed activity.

As the resource parent you are responsible for monitoring extra-curriculars to ensure a foster child does not become overwhelmed with too many activities. Children need ample time in the resource home for relaxation, participation in daily household activities, completion of homework, and bonding with your family. You will need to notify the child's FSW if the child will spend more than twenty-four (24) hours outside of your resource home.

Babysitting

Babysitters may be used to provide occasional care for children in the resource home for no more than eight (8) continuous hours at a time. As a resource parent, you must exercise careful consideration when evaluating the character and competence of any individual asked to babysit. You may reimburse the babysitter if you choose to do so. However, DCFS will not reimburse for babysitting services (except for when funding is available to defray the cost when resource parents attend approved continuing education trainings or events). Babysitters will not transport children. Background checks are not required for babysitters as described in this section.

Resource Family Support System

The Resource Family Support System (RFSS) may be comprised of up to three (3) other households identified by the resource family. RFSS households will be part of the resource family's existing, natural support system. RFSS members may provide care for children when a resource parent is unable to do so.

Once again, resource parents will exercise careful consideration when evaluating the character and competence of any household asked to serve as an RFSS member. RFSS members must be at least twenty-one (21) years of age. There is not a standard maximum age limit for RFSS members, but they must be physically, mentally, and emotionally capable of caring for children for up to seventy-two (72) hours. You may reimburse an RFSS member if you choose to do so, but DCFS will not reimburse for the use of RFSS members.

Members of a Resource Family Support System may transport children and care for children in the resource home or in the home of the RFSS member. Anytime you plan for a child placed in your home to be cared for by an RFSS member for more than twenty-four (24) hours, you must notify your child's FSW. An RFSS member will not provide care for more than seventy-two (72) continuous hours at a time, regardless of the location in which care is provided and regardless of which RFSS member is providing care. It is prohibited for RFSS members to take children in foster care out-of-state for overnight trips.

However, for extenuating circumstances only, the Area Director may approve for a child to stay with an RFSS member for more than seventy-two (72) hours but no more than seven (7) days. To go beyond the seventy-two (72) hour timeframe requirement, a written request must be submitted to the Area Director explaining the reasons for the extension request. The Area Director or designee must approve or deny the request in writing.

The number of children placed in an RFSS member household must meet all Minimum Licensing and DCFS Policy requirements.

All prospective RFSS members must be cleared through the Child Maltreatment Central Registry, Vehicle Safety Program, and State Police Criminal Record Check. DCFS will request any other state where the prospective RFSS member has resided in the preceding five (5) years to check its child abuse and neglect registry. DCFS will provide documentation in the case record that the Child Maltreatment Central Registry and State Criminal Record Checks were conducted on the prospective RFSS member.

Documentation of at least one (1) visual inspection of the home for evaluation purposes is required of all prospective RFSS members.

Respite Care

When a Resource Family Support System member is not available to provide needed care on a short-term basis, respite care may be utilized to temporarily relieve the resource family of the ongoing responsibilities and stresses of care. Respite care must occur in an agency-approved resource home and cannot exceed fourteen (14) consecutive days. There are two (2) types of respite care:

- **Informal Respite Home:** An approved DCFS resource home that can provide temporary care when the Resource Family Support System is unable to assist, or for situations in which children will be outside of the resource home for more than seventy-two (72) continuous hours. An Informal Respite Home may provide care for no more than seven (7) continuous days at a time. Periods of respite care in an Informal

Respite Home lasting longer than seven (7) consecutive days require approval from the Area Director or designee.

If an Area Director approved extension exceeds fourteen (14) continuous days, the regular resource parents' board payment will be affected. If the child has stayed in any combination of RFSS or informal respite homes (meaning, outside of the regular resource home placement), the total amount of days within those alternate care types cannot exceed fourteen (14) consecutive days as board payment may be affected.

Resource parents may reimburse an informal respite provider if they choose to do so. DCFS will not reimburse an informal respite provider. The number of children placed in an Informal Respite Home must meet all Minimum Licensing and DCFS Policy requirements.

- **Formal Respite Care:** A DCFS contract provider who supplies short-term respite care, particularly when a child's current placement is at risk of disruption or respite, is needed to prevent a residential, acute psychiatric, or similar placement. Formal Respite Care should be provided in accordance with a family-driven, youth-guided respite plan and in coordination with a child's behavioral health treatment plan (if applicable).

Formal Respite Care will be provided for no more than seven (7) days per three (3) month period. Longer periods of Formal Respite Care require approval from the Prevention and Supports Manager. If an approved extension exceeds fourteen (14) consecutive days, the regular resource parents' board payment will be affected. If the child has stayed in any combination of RFSS or informal respite homes before a formal respite stay, the total amount of days within those alternate care types (meaning, outside the regular resource home placement) cannot exceed fourteen (14) consecutive days, as board payment may be affected.

Social Media and Sharing Information about Children in Foster Care

There are occasions when questions may be asked of a child in foster care or pictures requested of a child in foster care for purposes of newspaper, television, or radio publicity. All publicity of this nature must be approved through the FSW and the County Office Supervisor or designee. Typically, these are approved, as long as the youth is not identified as being in foster care and as long as the youth's last name is not used. Some situations may require the involvement of the DHS Director of Communication.

However, youth in foster care may appear in school yearbooks, school newspapers, church youth group bulletins, and similar age-appropriate publications without consulting DCFS as long as the child is not identified as being in foster care.

As a resource parent, you are prohibited from posting pictures of foster children placed in your home (even if the face is blocked or blurred when posted) online or on any type of social media platform. In addition, any information about the circumstances of the child in foster care, their family, or the progression of the foster care case is prohibited from being posted online. Arkansas law (Arkansas Code § 9-28-407(h)) prohibits resource parents from redisclosing any information they obtain about a foster child, the child's parents, or siblings not placed in the resource home, which includes to posting information on social media platforms.

For older youth in foster care who have social media accounts and choose to post "selfies" or other information, resource parents must monitor their use of social media (to some extent). Resource parents will assess how appropriate and safe a post may be for the youth and for the resource family as well.

Many youths in foster care contact siblings or other family members using social media. Please be aware of such communication and conference with the youth's FSW if there are questions regarding whether contact between the youth and their families is safe and appropriate. Actions may need to be taken, if there is a conflict with a court order or if there are other issues.

Screen Time

The monitoring of social media also extends to other forms of screen time. The American Academy of Pediatrics (AAP) recommends "screen-free" zones at home by making sure there are no televisions, computers, or video games in children's bedrooms and by turning off the tv during dinner. Children and youth should engage with entertainment media for no more than one (1) or two (2) hours per day. It is important for children to spend time on outdoor play, reading, hobbies, and using their imagination in free play.

Television and other entertainment media should be avoided for infants and children under two (2) years of age. A child's brain develops rapidly during these first years, and young children learn best by interacting with people, not screens.

Cell Phones

DCFS generally does not provide cell phones to youth in foster care except for youth who elect to stay in Extended Foster Care (see Appendix 3 for more information). If a resource parent chooses to purchase or allows a child in care under eighteen (18) years of age to purchase or use a cell phone, DCFS is not responsible for any expenses related to the purchase. Likewise, DCFS is not responsible for any expenses related to the use, abuse, or loss of the phone for a child of any age. This includes youth who participate in Extended Foster Care after the allotted phone maximum has been expended.

Chores

Children in foster care placed in your home can be expected to help with reasonable and age-appropriate or developmentally appropriate chores. With support and understanding, chores can be a way for children to feel included in your family and learn how family members work together as a team. A child in care can be expected to share equally in the chores expected of other family members of the same age or developmental level. For example, younger children may help set the table. For teens, reasonable household chores are a way for them to gain important life skills that will help them transition to adulthood. For example, teens may be able to do their own laundry, help prepare for and assist with cooking a meal each week and call to schedule their own doctor appointments with coaching and other support needed

from resource parents (for more information on serving as a resource home to teens, please see Appendix 3).

A child will not be expected to perform chores that are your responsibility or that should be shared among several individuals (for example, the entire family's laundry). If you have questions about what may or may not be appropriate chores for a child placed in your home, based on their ability and history, please reach out to the child's FSW. Topics such as these also may be discussed in a staffing meeting, so that all team members can weigh in and come to a consensus.

Guidelines for chores include:

- Never assume the child knows how to do a certain chore. Rather, start by teaching the child how to do the chore.
- 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.
- Rotate chores so that the child can develop different skills and have a variety of experiences.
- Do not associate chores with discipline or punishment. Rather, they should be part of the child's participation in family life.
- Do not allow chores that need to be performed to interfere with family activities, school, regular play time, visits to the child's family, or the child's normal contacts.
- Be sensitive to the child's need for help and support in carrying out chores.
- Encourage children to take care of their own personal belongings; to make their bed; and to keep their closet, drawers, toys, and other items in order.
- Praise the child for a job well done.

Foster Care Case Activities and Requirements

Family Assessments and Case Plans

For every child in foster care, a case plan is required. This case plan must be completed within thirty (30) days from the date the child enters care. The primary FSW develops a case plan in collaboration with the child's family to include the child as age-appropriate and developmentally appropriate.

The case plan outlines the services, resources, and timeframes of what the parents, child, FSW, other DCFS staff, and resource parents need to do for the child to safely return to the parents' home permanently. The case plan is developed based on:

- An assessment of the family's strengths and needs (you may request a copy of this assessment);
- Reasons the child came into care and needed changes in the biological or legal family's home or parenting to ensure the child's safety; and
- The child's needs.

Resource parents will have the opportunity to provide input during the case planning process. Resource parents will be given a copy of the case plan but are prohibited by law from redisclosing any case information and will only use the information in the case plan and other case records to assist them in caring for the child placed in their home.

The case plan will also list the case plan goal for the child. Very generally, permanency goals may include:

- Reunification with the parent(s);
- Adoption or guardianship (with relatives and fictive kin being considered first);
- Placement with a permanent custodian, to include permanent custody with a relative or fictive kin; or
- For youth sixteen (16) years of age and older, Another Planned Permanent Living Arrangement (APPLA). APPLA means the youth will most likely age out of foster care at eighteen (18) years of age or older.

There should be at least two (2) goals listed in the case plan, typically called concurrent goals. These two (2) goals will be actively worked on at the same time. Concurrent goals help

make sure that if a goal does not work out, there is a back-up plan. Concurrent plans are designed to increase the child's chance to achieve permanency safely and swiftly.

Staffing

A staffing is a meeting of key persons who are responsible directly or indirectly for problem-solving and decision-making regarding a family's case plan. An initial staffing is held within the first thirty (30) days of the child's stay in foster care. Subsequent staffing meetings are held at least every three (3) months thereafter. Additional staffing meetings may be held on an as-needed basis. As a resource parent, you will be invited to all staffing meetings for children currently in your care. However, it may not be necessary for you to attend the entire staffing. The family's case plan will be discussed at almost every staffing.

The FSW will inform you in advance of the purpose of the staffing, and what information, if any, that you may be called upon to present. Information presented may include the following:

- Observations about the child;
- The child's reactions to visits with their birth or legal family, as perceived by the resource parent;
- The child's adjustment in a home and community;
- Any problems the child is currently experiencing and difficulties this may be causing the family; and
- Input regarding development of the case plan and the resource parent's assessment of progress in those areas.

Court Hearings

You will be provided notification of upcoming court hearings for each child currently placed in your resource home. Resource parents are encouraged to attend court hearings and will be offered the opportunity to be heard at hearings. The following is a summary of the types of court hearings that typically occur throughout the life of a foster care case:

- **Probable Cause:** The probable cause hearing must be held within five (5) working days of issuing an emergency order that allowed DHS to take custody of the child. At this hearing, the court determines if DCFS had sufficient reason to place the child in foster care and if the child should return home, stay in the temporary custody of DCFS, or live with someone else until the adjudication hearing.
- **Adjudication:** Following a probable cause hearing, an adjudication hearing is held to decide if the child is dependent/neglected (this means abused or neglected). The dependency-neglect adjudication hearing is generally held within thirty (30) days of the probable cause hearing, but it is permissible for the adjudication hearing to take place within sixty (60) days after removal.
- **Disposition:** If it is determined that the child is dependent/neglected, the judge will hold a disposition hearing to decide if it is better for the child to stay in the custody of DCFS, be placed in someone else's custody, or be returned to their parent or guardian. This hearing usually takes place immediately after the adjudication hearing, but if not, then it must take place within fourteen (14) days of the adjudication hearing.
- **Review:** Review hearings are held to make sure that everyone is following the court orders and the case plan. They are also an opportunity to see how the child is doing, to determine whether the right kind of services are being provided for the family and the child, and to assess whether the child can be returned home. The first review hearing is held no later than six (6) months from the date the child entered foster care. However, the court may require a review prior to the sixth-month review hearing. After that, the court will continue to review a foster care case no less than every six (6) months, including for those children in foster care who are placed out-of-state. Review hearings will continue to be held until the child has a permanent home. At any time during the life of a foster care case, any party to the case may request the court to review the case. The party requesting the hearing must provide reasonable notice to all parties.
- **Permanency Planning:** At the permanency planning hearing (PPH), the court must decide on a plan for permanent placement for the child. The hearing can be held at any time, following the adjudication, but must be held within twelve (12) months from the date the child was removed from the home, and not less than every twelve (12) months thereafter (during the continuation of the child's time in foster care).

Below is a summary of the hierarchy of preferred permanency plans:

- a. Placing custody of the child with a fit parent at the permanency planning hearing;
- b. Returning the child to the guardian or custodian from whom the juvenile was initially removed at the permanency planning hearing;
- c. Authorizing additional, but limited, time (not to exceed three (3) months) for parent, guardian, or custodian (under certain circumstances found by the court and as outlined in Arkansas law) to work toward reunification and authorizing a corresponding plan to place custody of the child with a parent, guardian, or custodian;
- d. Authorizing a plan to obtain a guardianship or adoption with a fit and willing relative;
- e. Authorizing a plan for adoption with DHS filing a petition for termination of parental rights (with certain exceptions outlined in Arkansas law);
- f. Authorizing a plan to obtain a guardian for the juvenile;
- g. Authorizing a plan to obtain a permanent custodian, including permanent custody with a fit and willing relative; or
- h. Authorizing a plan for another planned permanent living arrangement (APPLA). This includes introducing a permanent planned living arrangement, and addressing the quality of services, including independent living services and a plan for the supervision and nurturing that the juvenile will receive. An APPLA permanency plan means the child will most likely age out of foster care at eighteen (18) years of age or older. APPLA can only be selected if the child is sixteen (16) years of age or older and if the court makes a judicial determination explaining why, as of the date of the hearing, APPLA is the best permanency plan for the juvenile and the court finds compelling reasons why it continues to not be in the best interest of the child to have one of the other permanency plans listed above.

- **Termination of Parental Rights:** The court may consider a petition to terminate parental rights (TPR) if the court finds that returning the child to their parents is contrary to the child's health, safety, or welfare, and that returning the child to their parents cannot be accomplished in a reasonable period of time. TPR ends a parent's legal rights to their child.

Family Visits and Contact for Children in Foster Care

Among the best predictors of successful family reunification is frequent and quality visits with the family. Different types of family visits and some of the parameters around those visits are described below.

- **Parent-Child Visits and Family Time:** In order to achieve reunification of families, DCFS will strive to ensure visitation or family time with the child's biological or legal parents and ensure that it occurs within the first five (5) days of placement after the initial removal (sooner if possible). Family time will be based on a family's needs and reasons for the out of home placement. But, if the court orders supervised family time, then the parent from whom custody was removed will receive a minimum of four (4) hours of supervised family time per week. However, the court may order less than four (4) hours of supervised family time each week if it is not in the best interest of the child (or if it will impose an extreme hardship on any party).

As the family prepares for reunification, the frequency or length of family time will increase, while the level of supervision will decrease accordingly. When parents graduate from supervised to unsupervised family time, the frequency and duration of the unsupervised parent-child family time will generally be comparable to, if not more than, the frequency and duration of the supervised family time.

Generally, the preferred location for family time is in the most home-like setting possible, to include the parent's home when appropriate. Family time at the DHS office is a last resort. Visits are encouraged to include any variety of quality family time activities such as visiting a library, attending story time at a library, playing at a park, making and enjoying a meal together, or helping with a child's bedtime routine, as appropriate for an individual family.

Since resource parents can model positive parenting skills that may help the biological or legal parents to achieve reunification, you may consider hosting family time, if appropriate and acceptable to all individuals involved. If this is something in which you may be interested, please talk to your child's FSW or your Resource Worker. It is

DCFS' responsibility to ensure that, if you are willing to host family time, you thoroughly understand all court orders related to parent-child contact and any other relevant information regarding the case and family dynamics to allow you to appropriately and safely supervise family time. DCFS policy states that resource parents will not be expected to host parent-child visits during the first placement they have as a resource parent or during the first month of any open foster care case. DCFS policy also requires that the child's FSW continually assesses, on a case-by-case basis, the appropriateness of resource parent involvement for each foster care placement.

Even if you are not comfortable hosting family time, you will still play an important role in the visitation of the child with parents and siblings. This includes acceptance of family time, emotional preparation of the child, and supportive follow-up with both the child and the child's FSW. The resource parent can help the children by preparing them for changes in the family circumstances or anything that might be unexpected or difficult for the child to accept. The same supportive attitude is needed after each family time session. You will need to share the child's reaction to family time and any other relevant observations with the child's FSW.

Your help is vital to the success of the child's family time with their parents or other family members. However, you may find visits difficult in some situations. For example, a child may return with uncombed hair or become upset following family time. In fact, it is not uncommon that children show increased behavior problems before and after family time. This may include

- Difficulty sleeping;
- Behavior that is defiant;
- Tantrums;
- Crying; and
- General fussiness or moodiness.

These kinds of behaviors, following time spent with the biological or legal family, do not mean that family time should stop. When children spend time with their parents, they may be reminded of their separation or grief. They may not want family time to end or may become angry with their parent for missing a family time session. These behaviors are to be expected. If children get violent or display any other extreme behaviors, it is important that you notify the child's assigned worker immediately.

Resource parents will not make the determination to withhold parental visits from a child for any reason. In addition, family time will not be cancelled due to the results of a parent's drug screen unless there is current evidence that the parent's ability to provide for the health and safety of the child is compromised or unless otherwise ordered by the court. If you are struggling with managing a child's behavior following family time or with your own feelings regarding family time, discuss these concerns with the FSW. Frequently, concerns or other issues can be worked out satisfactorily when an open-minded, family-centered approach is taken.

For those children in foster care whose parents or legal guardians are incarcerated, the Arkansas Department of Correction (ADC) social worker will be contacted to arrange visitation between the child placed in an out-of-home setting and their incarcerated parent(s), unless such visitation is prohibited by the court, not recommended by a physician, or otherwise medically or legally not feasible.

Family time with biological or legal parents must occur on a weekly basis, barring unforeseen emergencies, unless otherwise court ordered. You will need to contact the FSW if any situations arise that might affect parent-child family time.

In addition to face-to-face family time sessions, children in foster care will have reasonable opportunities to communicate with their parents in writing, by phone, or via other forms of electronic communication (unless prohibited by court order).

Family time sessions will cease upon termination of a parent's rights.

- **Siblings Visits and Sibling Family Time:** If siblings are not placed together, the FSW will arrange sibling visits or family time. Sibling family time will take place at least once every two (2) weeks unless the children's best interests require less frequent visitation. During the weeks in which face-to-face sibling visits do not occur, children can talk with their siblings through other types of communication (such as phone conversations, FaceTime or similar video calling applications, texts, and emails), as age and developmentally appropriate for the involved siblings. Foster children should also have the opportunity to share celebrations like birthdays, holidays, and graduations with their siblings, as well as have the chance to attend their siblings' extracurricular events, such as athletic competitions or musical performances (when possible). The distance between the siblings' placements; transportation options; and each sibling's own academic, extracurricular, and health needs and commitments will be taken into consideration when planning for attendance at one-another's events.

Resource parents are encouraged to assist with transportation to or hosting of sibling family time, when appropriate, and if the resource parents are comfortable with those duties. As a resource parent, you can also be a great support in helping siblings maintain connections during weeks that they do not have face-to-face family time by assisting with the coordination of phone calls or other forms of communication. However, always remember that every placement is different. Before you assist with visits or other coordination of sibling contact, please talk to your child's FSW to make sure you understand all applicable court orders, therapist recommendations, and any other considerations specific to a sibling group.

If it is in the child's best interest and visitation was established prior to Termination of Parental Rights (TPR), family time between siblings may continue after TPR. If a child in foster care has a sibling who is adopted, family time will continue after the adoption, as long as the court has determined that it is in the best interests of the siblings to visit and has ordered family time between the siblings to occur after the adoption.

Sibling family time will take place in the most homelike setting available or in an appropriate setting (such as an educational or recreational setting).

- **Relative Visits and Family Time:** Children will have an opportunity to have family time with grandparents, great grandparents, or others as determined by the child's team. These visits can help explore alternate placement options. Relative family time after TPR must have been court approved and cannot continue without the court's approval.

Visits to the Resource Home

Serving as a resource parent means being a member of a large team whose overarching goal is to support the child and help the child's family work toward reunification. Using this team approach means that you may have several people visiting your home to assess how a child is coping.

- **FSW Visits:** The FSW who is overseeing the care of individual children in the resource home will make at least weekly visits to your home during the first month of placement. After the first month, the FSW will make regular contact with the child at school or during sibling or parental visits but must continue to visit the child privately in the resource home at least monthly. More frequent visitation may be made to the home to help solve any problems that arise. The visits will be used to relay necessary information to the child and to allow you to share your point of view about the placement and the child's adjustment and to ascertain if the needs of that child are being met. Each visit will include a private conversation with the child outside the presence of the resource parent. Visits may be scheduled or unannounced.
- **Resource Worker Visits:** The Resource Worker will visit the home at least quarterly to monitor continued compliance with licensing standards and to check in with you to make sure you are receiving the support you need as a resource parent. The Resource Worker will conduct at least one (1) unannounced quarterly visit per year. Quarterly visit means at least one (1) visit in the resource home during each of the following timeframes: January-March, April-June, July-September, and October-December.
- **Licensing Specialist:** You may also have a visit from a Licensing Specialist from the Placement and Residential Licensing Unit (PRLU) of the DHS Division of Child Care

and Early Childhood Education (DCCECE). The role of the Licensing Specialist is to ensure that DCFS is meeting its requirements as a child welfare placement agency rather than evaluating you as an individual resource home.

- **Attorney ad Litem:** All children in foster care have attorney ad litem appointed to them. The attorney ad litem represents the child's best interest. A child's appointed attorney ad litem may also visit your home to speak with the child and gain insight about how the child is doing.
- **CASA:** A volunteer Court Appointed Special Advocate (CASA) may be appointed to a child placed in your custody if a CASA Program exists in your county or jurisdiction and if a CASA volunteer is available. CASAs serve as an extra set of eyes and ears for these vulnerable children. If your child has a CASA, the CASA will make visits to your home to speak privately with the child in foster care.

WHAT FINANCIAL SUPPORT WILL I RECEIVE?

Resource parents are considered volunteers, but DCFS recognizes the costs you incur when taking a child in foster care into your home. That being said, DCFS does provide some financial support to assist you. However, serving as a resource parent must never be viewed as a way to make excess additional income. The board payments made to a resource parent is to help defray the costs of caring for that child. Other forms of financial support available to you for caring for a child placed in your home or are paid directly to the child are described below.

Standard Board Payment

DCFS makes a monthly board payment to resource parents. This monthly board payment includes payment for room and board, clothing, ongoing school and personal supplies, and a small allowance for the child. The amount listed below is included in the monthly board payment and must be used for the child. The foster care board payment that resource parents receive is strictly to meet the needs of the child placed in their home. Resource parenting is not a way to make money or earn extra income for the resource parents.

If a child in foster care is eligible for Medicaid, resource parents are required to use a Medicaid provider for meeting the medical needs of the child. Medicaid will be the primary payment source for medical and dental services, including hospitalization. If Medicaid cannot cover such expenses, state funds may be a secondary payment option. Other services or supplies needed by the child must be authorized and approved per DCFS policy (see section on additional expenses).

Resource parents may choose to have their board payment direct deposited into their checking account or issued as a paper warrant and mailed to the resource home. DCFS strongly encourages use of direct deposit to prevent payment delays when a warrant is lost in the mail or misplaced. Reissuance of a paper warrant takes thirty (30) to ninety (90) days and is not controlled by DCFS. Direct deposit can be set up on the Resource Family Portal (see “What Other Supports Are Available to Me?” section for more information). If no bank account

is set up, a check will be mailed to the provider. The Resource Family Portal can be found at: <https://dhs.arkansas.gov/dcfs/CHRISWP/Default.aspx>.

The monthly board payment is for the period starting on the first of the month and ending the last day of the month. This payment is made by the fifteenth of the subsequent month. For example, October's board payment is for the thirty-one (31) days that begin on October 1 and end on October 31. Resource parents would expect to receive the payment by no later than November 15.

DCFS will pay resource parents a monthly board rate according to the following chart:

Birth through 5 Years	\$410 Monthly
Board and Care	\$350
Clothing	\$45
Personal Needs	\$15
6 through 11 Years	\$440 Monthly
Board and Care	\$365
Clothing	\$50
School and Personal Needs	\$25
12 through 14 Years	\$470 Monthly
Board and Care	\$380
Clothing	\$60
School and Personal Needs	\$30
15 through 17 Years	\$500 Monthly
Board and Care	\$395
Clothing	\$70
School and Personal Needs	\$35
18 through 21 Years	Established by monthly budget but may be up to \$750 Monthly

Board rates are established as part of policy, and any exception must receive prior approval. See information regarding Special Board Rates below.

If a child is absent from the resource home for hospitalization or a trial placement for ten (10) days or less and is to return to the home, no change of status is necessary. However, the child's FSW must always be advised of an absence from the home.

The agency pays according to the number of nights a child is in the resource home. Payment for stays of less than twenty-four (24) hours will be based upon a daily rate determined by DCFS. If a child is in the home for part of a month, a partial board payment will be made.

Special Board Rates

Special Board Rates refer to any deviation from a standard board rate. Such deviations could be in the form of increased board payment or decreased board payment, based on the individual circumstances and resources of the child. Requests for Special Board rates must be made in writing and must be pre-approved by the Area Director. Special Board Rates become effective on the date the Area Director or designee signs the written Request for Special Board Rate.

There are occasions when the regular board rate is inadequate in caring for a child with special needs. Resource parents may identify and document those needs. The FSW can use that information to request authorization from the Area Director for an increased special board rate to cover additional expenses to meet the child's needs. This would apply to situations such as an infant with a prescription formula that is not covered by WIC or a medically fragile child who requires frequent hospitalization and tube feedings numerous times per day.

There are times when youth in foster care choose to remain in extended foster care after their eighteenth birthday. Resource parents for youth in extended foster care are eligible to apply for a special board rate for the youth based on documentation of need. Need for a special board rate in such circumstances will be documented through completion and submission of a budget for the youth. It may be appropriate for some of the increased board to go toward the youth's individual expenses, such as gasoline or a cell phone bill.

Special Board Rates can also be a decrease in the standard board. This applies to those children who are residents of a state institution (such as, the School for the Deaf or Blind or the Human Development Center) and may only reside in a resource home over weekends and holidays.

Decreasing the board payment will also occur when a resource parent becomes the payee for other sources of income for the child, such as Social Security benefits. A child's income must be monitored as a resource in the home, and the payee for the income must report how the income is used based on the requirements for the issuing source of the income. Resource parents are responsible for completing all reporting requirements to the payment source when becoming payee for a child's benefits.

Resource parents are responsible for reporting any change in payee status to DCFS. However, Resource Workers and caseworkers should still inquire about payee status during visits to the resource home. DCFS staff will conference with their direct supervisor regarding any board payment adjustments needed due to a change in a payee for a child's Social Security benefits. For example, if a resource parent has become payee for one-hundred and thirty dollars (\$130) in child support monthly, then DCFS staff should request a decrease in the child's board payment by one-hundred thirty dollars (\$130) per month. In some instances, the board payment may be adjusted to a zero (0) amount based on the child's payee status. This would occur when a child is drawing a benefit amount in excess of the established board rate. A resource parent who is payee for the benefits of a child fifteen (15) years of age or older in the amount of seven-hundred twenty dollars (\$720) would have a zero (0) board payment because the resource parent is receiving two-hundred twenty dollars (\$220) more than the standard board from Social Security. If the same child is special needs and has an established special board rate in the amount of nine-hundred and forty dollars (\$940) then the resource parent would receive a board payment in the amount of two-hundred and twenty dollars (\$220) per month.

Social Security Administration (SSA) is the sole entity in decision-making regarding SSI applications for need and SSI payee status. SSA may contact resource parents with a request

to become representative payee (for SSI payment) to a youth in foster care. If a resource parent becomes representative payee for a youth's funds, the resource parent will experience a decrease in board payment from DCFS. The resource parent will be expected to use the funds received for the child to make purchases to support the child's care.

Transportation Reimbursement

Transportation costs associated with the child's case plan, such as attending staffing, meetings, court, visits with parents or siblings, and all medical appointments, may be reimbursed. Other extraordinary costs may be approved on a case-by-case basis.

However, room and board payments include routine travel expenses. As such, transportation will not be reimbursed for shopping for clothes or groceries, for childcare (unless it is a Medicaid allowable expense), for taking a child to school, for school activities, or for church, unless prior approval has been obtained (based on special circumstances). Special circumstances might include situations in which a child may wish to attend a church other than that of a resource parent and travelling to his church would require a significant deviation from the route taken to the church attended by a resource parent. The Assistant Director of Community Services or designee will review all written requests. Approval will be made based on individual situations and will be given only for specified time periods.

Allowable transportation costs are reimbursed to resource parents at a rate determined by the DCFS. The resource parent completes a travel reimbursement form (TR-1) and submits it to the County Travel Supervisor or designee for approval and processing. When determining miles driven from city to city for mileage reimbursement, resource parents must use the DHS mileage calculator located at <https://dhs.arkansas.gov/milecalc/mileagecalculator.aspx>. Travel for provisional resource parents will be submitted to the DCFS office in their county of residence and should NOT be sent to the primary county for processing.

Requests for travel reimbursement must be submitted monthly. Requests for reimbursement for medical transportation must be submitted on a separate TR-1 form and must be accompanied by a CFS-352: Episodic Form for each medical, dental, or mental health appointment that is listed on the request for reimbursement. A copy of the CFS-352 should be maintained in the child's medical passport. Resource parents are required to attach an

approved DHS-1010 to their Medicaid travel, for all medical appointments requiring travel outside the State of Arkansas.

Incidental Expenses

An Incidental Expense Fund for children from birth to thirteen (13) years of age, exists to provide items and activities intended to help normalize a child's life experience while in care. For example, camp fees, music lessons, field trips, school uniforms, summer expenses for daycare, and other items not specifically covered by other means can all be met by this fund. The Incidental Expense Fund is intended for items or activities that cost twenty-five dollars (\$25.00) or more and must be accompanied by documentation of need for the expense. Items covered by the board payment are not eligible for reimbursement from this fund. In addition, these funds will not be used for holiday gifts. The FSW will assist the resource parent in accessing these funds when the money is needed for a situation that meets the policy guidelines. These funding requests must also be approved by the DCFS Financial Support Unit. Request for use of incidental funds must be limited to one (1) request per quarter. Resource parents must have prior approval for such purchases.

Transitional Youth Services Funded through Chafee

Youth who are fourteen (14) years of age and older in foster care are eligible for John H. Chafee Foster Care Program for Successful Transition to Adulthood funding for a variety of purposes, such as extracurricular activities, other normal age-appropriate activities, and activities designed to help the youth transition to adulthood. These include assistance with expenses related to homecoming, prom, cultural events, specialized school supplies required by the youth's school (such as a graphing calculator, or laptop), and graduation. Use of Chafee funding must be pre-approved.

Chafee includes Educational and Training Vouchers (ETV) in the amount of up to five-thousand dollars (\$5,000) per state fiscal year to go toward the cost of attendance at a post-secondary educational or vocational institution for youth who:

- Age out of foster care at eighteen (18) years of age or older and have not yet reached twenty-six (26) years of age or who enter into an adoption or guardianship from foster

care at sixteen (16) years of age and have not yet reached twenty-six (26) years of age (but ETV may not be accessed for more than five (5) years total);

- Are enrolled in an accredited higher education institution; and,
- Are a student in good standing.

For more details about transitional youth services and supports funded through Chafee, to include the maximum amount allowable for some of the activities outlined in this subsection, please ask the FSW or TYS Coordinator who is assigned to the youth in your home.

Trust Funds

When a child in foster care has income from child support or Social Security benefits, DCFS may apply to become payee. The child's funds will be deposited into a trust account for the child if payee status is awarded to DCFS. Separate accounts are maintained for each individual child in foster care, including those from the same sibling group. The funds in the account should be utilized solely for the individual child for whom the account was established, and no funds should be spent for any other child. DCFS staff must assess the availability of trust account funds and utilize those funds prior to seeking funding from other sources for purchases.

After basic needs are met, purchases may be made for items or services that will enrich the child's life. Examples of this include items such as tutoring, music lessons, and dance lessons.

Purchases utilizing the funds of trust accounts must be approved by the child's FSW. In some instances, approvals must also be approved by the FSW's Supervisor, Area Director, or DCFS Executive Staff. Only DCFS staff are permitted to make purchases from the accounts. To maintain a child's eligibility for some Medicaid Programs, the balances in Regular Accounts must remain within limits set by the state and federal governments. For example, if a child is receiving SSI, then the countable value of the Regular Trust Account must be under two-thousand dollars (\$2,000) at the end of each month. A report is available to DCFS staff

that lists children in foster care with Regular Account balances of one-thousand dollars (\$1,000) or more.

Resource parents are encouraged to assist DCFS in identifying children's needs that can be met using foster care trust funds. Recommendations for purchases that meet the criteria discussed in this document should be made to the FSW so DCFS may decide if money is available for the purchase from a trust account and so that DCFS may secure the necessary approvals to make the purchase.

Clothing

Initial Clothing Voucher

When a child first enters foster care, DCFS may issue an initial clothing order for the purchase of new clothing. Initial clothing orders will be issued on a case-by-case basis. Not all children will need to purchase new clothing, as some may come into care with ample clothing. The FSW will assess what clothing items are needed and issue the authorized amount of clothing allowance.

An initial clothing voucher purchase for children in foster care will be made using the p-card process, which requires submission to and approval by the Financial Support Unit. Upon approval, a typical scenario might involve the resource parent selecting clothing and leaving it with appropriate customer service staff of the store, where the FSW may present and pay for the merchandise. It is also possible for the resource parent and designated DCFS staff to go shopping together for the clothing.

Replacement or Supplemental Clothing Voucher

A monthly allowance for clothing replacement is included in the board payment. Money for clothing and personal needs paid monthly to resource parents is based on the age of the child. The resource parents are to spend that amount of money for the child. However, money may be spent monthly or may be saved and used for a larger purchase later. All receipts from the purchase of clothes must be retained by the resource parent and turned in to the resource worker during the quarterly visit.

With the approval of the County Office Supervisor and Area Director, it is permissible to obtain another supplemental clothing order when there is an exceptional circumstance. Examples include, without limitation when a child has a significant growth spurt and needs several items of new clothing for the upcoming season or when a child has an event at school or church that requires special attire. The resource parent must contact the FSW in the event this need should arise. The resource parent will be required to provide information about the clothing that they purchased for the child using the monthly board payment funds, to include receipts for clothing purchased, and will be required to explain the reason for the supplemental clothing voucher.

The following guidelines related to clothing apply to resource parents:

- Provide (with the assistance of DCFS) each child with their own clean, well fitting, attractive, seasonal clothing that is appropriate to age, sex, individual needs, and is comparable to the community standards;
- Include the child in the selection of their own clothing (whenever possible and age appropriate);
- Keep receipts for monthly (or quarterly, as appropriate) clothing purchases, and provide the receipts to the resource worker during quarterly visits to the resource home; and
- Send all personal clothing and belongings with the child when the child leaves the resource home.

Personal Allowance for a Child in Foster Care

The resource parent will give an allowance to the child from the board payment. The amount of the child's allowance is determined by the resource parent, based on the child's chronological and developmental age.

School Lunches

Children in foster care are eligible for free meals in all schools that participate in the National School Lunch or Breakfast Programs and in the Commodity-only schools.

WIC Programs

The Women, Infants and Children Food Program (WIC) is administered by the Health Department. The program provides nutritious foods for pregnant and nursing women, infants, and children up to age five (5) years of age on a monthly basis. Eligibility is determined by a medical assessment of nutrition risks such as iron-poor blood and improper growth. Foods provided by WIC are supplemental and are not intended to fulfill all nutritional needs for a month. Children in foster care may be eligible for WIC.

Additional Assistance with Expenses

In addition to the items already listed, the following items are allowable with the approval of the County Office Supervisor or designee:

- Emergency medical services and drugs not covered by Medicaid.
- When funding is available, childcare, or baby-sitting fees may be defrayed with financial support from DCFS, when us so that resource parents may attend required trainings or when used for a resource parent's own children while the resource parent transports a child in foster care to services. This does not include childcare for a resource parent's employment, as any regular childcare arrangements for a child in foster care will be arranged through a voucher from the Division of Child Care and Early Childhood Education (DCCECE).

Any other expenses must receive prior approval from the Area Director. This can be requested by the FSW.

WHAT OTHER FINANCIAL CONSIDERATIONS ARE THERE FOR RESOURCE PARENTS?

Income Tax Information

Board payments paid to resource parents are not considered taxable income by the Internal Revenue Services. Current tax laws may allow special treatment for resource parents.

Because IRS laws are complex and subject to change from year to year, resource parents should consult with an accountant or tax specialist for specific tax advice. Information about all placements in a resource home can be located on the Resource Family Portal:

<https://dhs.arkansas.gov/dcfs/CHRISWP/Default.aspx>.

Foster Care Payment and Eligibility for Assistance

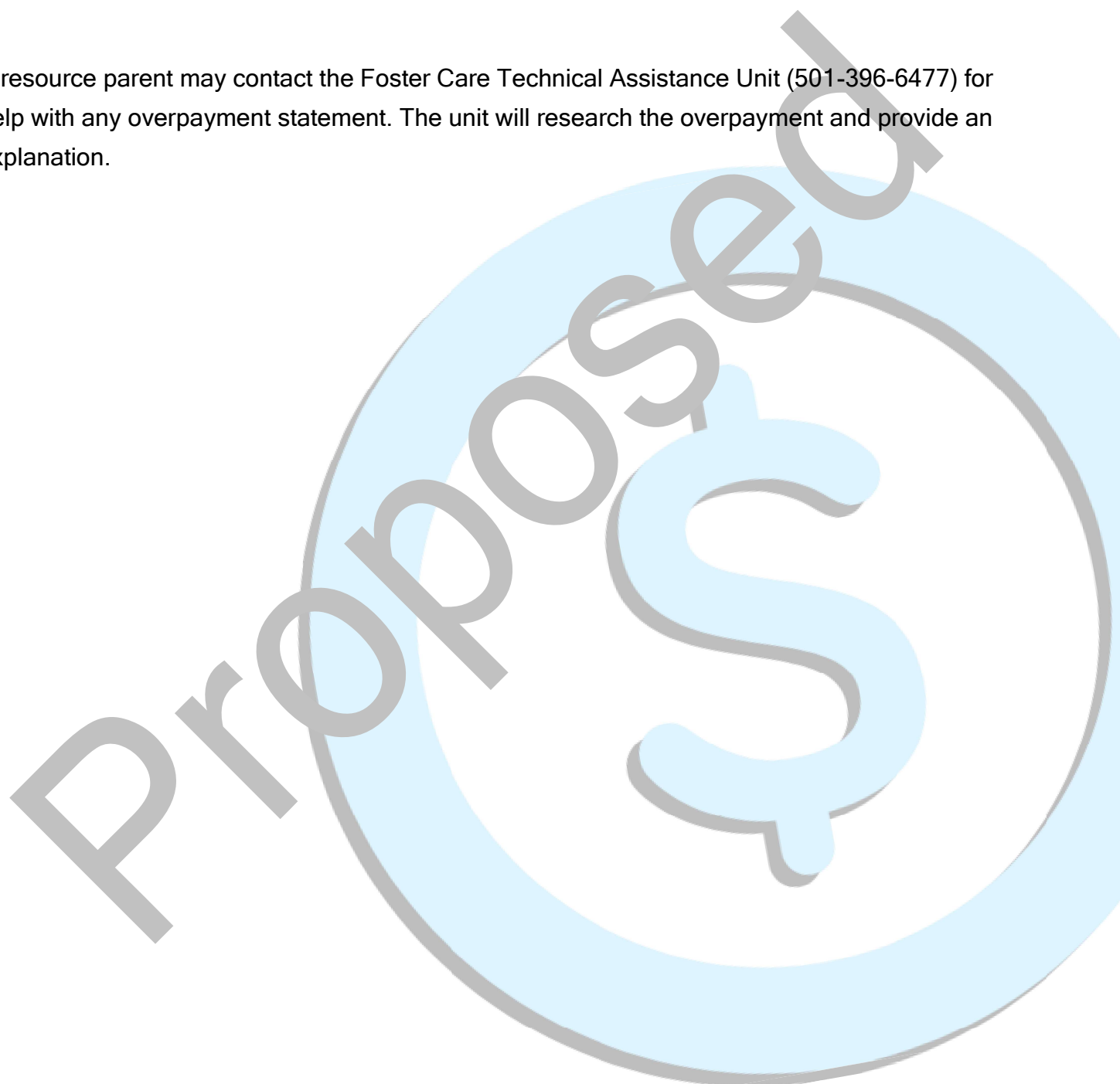
Board payments, made by DCFS for the care of children in homes of public assistance recipients are not considered to be a resource in determining eligibility for assistance or the amount of the grant. This payment is designated for certain purposes and is not available to the resource parents. For any resource parent applying for the Supplemental Nutrition Assistance Program (SNAP), a re-evaluation of stable income will take place. This may impact the approval status of the resource home.

Overpayment to Resource Parents

From time to time, resource parents may be overpaid on a board payment. If this happens, during the next month, the computer system may automatically generate a correction. The amount of the overpayment will become an account receivable and will be due from the resource parent if restitution is not made prior to the next payment cycle. Per funding source, each subsequent board payment will be offset until the amount of the overpayment is recovered. The funding source of the board payment (federal or state funds) will determine whether the overpayment is deducted from the next board payment. If funds are from the same funding source, it will be deducted from the next board payment. If it is not deducted, the Office of Finance and Administrative Services will send a notice of overpayment. Account reviews are processed monthly and overpayment statements are normally sent monthly.

DCFS may also seek correction of board, in situations where a resource parent has become the payee for a child's funds within the cycle and has received both a full board payment and payment for the child's additional benefits, within the same payment cycle, resulting in an overpayment to the resource parent for that payment cycle.

A resource parent may contact the Foster Care Technical Assistance Unit (501-396-6477) for help with any overpayment statement. The unit will research the overpayment and provide an explanation.



WHAT OTHER SUPPORTS ARE AVAILABLE TO ME IN MY ROLE AS A RESOURCE PARENT?

Availability of Family Service Worker and Resource Worker to Resource Families

For resource parenting to be a successful experience, one must have access to the FSW and Resource Worker. If either of these staff members is absent from the office when telephoned, calls will be returned promptly. If a visit is necessary, it will be scheduled.

Telephone numbers of the Resource Worker who may be contacted after hours will be furnished (See section on DCFS County Office contact persons in the back of this Handbook). After-hours contact should be used for emergencies only. Also, information that may be needed for the child in the home in an emergency will be provided, such as the child's Medicaid number and Medical Passport. At the time of placement, all information known about the child will be provided, such as expected length of stay and information regarding illnesses, chronic health problems, medication, and habits.

Crisis and After-Hours Response

Resource parents will have access to an FSW in their county twenty-four (24) hours a day, seven (7) days a week. A list of after-hours numbers (on-call cell phone numbers) and where the local on-call FSW can be reached will be provided. If the after-hours call requires a direct contact with the child's FSW, the on-call worker will contact the assigned worker and have that worker make contact.

Resource Family Portal

Open resource families have access to the Resource Family Portal. The portal allows resource parents to have twenty-four-hour-a-day access to information such as placement dates for children placed in the home, DCFS contact information, resource home reevaluation

date, approved RFSS information, bank profiles, Medicaid numbers, and links to DCFS forms and policy. Resource parents will need to log in and set up a user account.

Direct Deposit is available for board payment, subsidy payments, and travel reimbursement so that monies are automatically drafted into the provider's bank account. If no bank account is set up, a check will be mailed to the provider. Providers may choose to have their board payment direct deposited into their checking account or issued as a paper warrant and mailed to the provider address. DCFS strongly encourages use of direct deposit, to prevent payment delays when a warrant is lost in the mail or misplaced. Reissuance of a paper warrant takes thirty (30) to ninety (90) days and is not controlled by DCFS.

The portal can be found at: <https://dhs.arkansas.gov/dcfs/CHRISPWP/Default.aspx>.

Resource families will also be able to use the Resource Family Portal to view current and previous placements, assigned FSW, supervisor contact information, links to update paperwork, and other helpful DCFS information.

Counseling

Where there is a need for counseling services (for the resource home to prevent disruption and to promote stabilization) counseling will be provided. Requests for counseling are made to the FSW, who is responsible for making a referral to the appropriate Community Mental Health Center.

Community Resources

The DHS County Office will inform all resource parents about available resources in the community, as well as resources in other areas that are relevant to a child. This information will be updated as new services become available.

It will be the responsibility of DCFS to pursue any mutually agreed upon resource that is needed for a child. The resource parent's assistance may be enlisted for this purpose.

Resource Parent Associations

DCFS encourages the formation of active and independent resource parent associations. DCFS will provide support by the appointment of a Resource Worker to the association. A DCFS representative will also be available when called upon to provide information about the Foster Care Program and allow resource parents to voice any concerns they may have with DCFS policies.

Please also refer to Appendix 5: Useful Links for Resource Parents for other information and access to other supports.

WHAT EXTRAORDINARY CIRCUMSTANCES DO I NEED TO BE PREPARED FOR?

As much as DCFS hopes your time as a resource parent will not bring anything out of the ordinary to you or your home, DCFS also has the responsibility of ensuring you know about extraordinary circumstances that may arise and how to respond to them. A brief list of some extraordinary circumstances resource parents may experience is described below.

Emergency Situations

Notify DCFS immediately of serious illness, accidents, or any unusual circumstances affecting the health, safety, physical well-being, or emotional well-being of the child in foster care. However, if you cannot reach the child's FSW or FSW Supervisor, never delay arranging for emergency medical care for the child, if needed.

Damages to Your Home or Other Property

If damages to your home or other property occur, the first step is to file a claim with your insurance (such as home or auto). Any claims that are not covered by homeowner's or renters' insurance (or other insurance coverage, as applicable) for damages or destruction to a resource parent's personal property or to the property of others due to the actions of a child placed in a resource home must be filed with the Resource Supervisor within sixty (60) calendar days of the incident that resulted in the damage. Documentation must include a detailed description of the situation that occurred, as well as a description of damages caused by the child in foster care. In most cases, DCFS will request photos of the damages, as well as any receipts for the expense of repairs (services rendered or goods purchased).

The Resource Supervisor will submit the request and associated documentation to the local Financial Coordinator or designee, who will then route it to the Resource Parent Reimbursement Committee via the Foster Care Manager. The Resource Parent Reimbursement Committee will review the claim and determine if reimbursement is warranted. If the claim is approved, the Foster Care Manager or designee will submit the

claim to the Central Office Finance Unit for payment. The Central Office Finance Unit will then collaborate with the local Financial Coordinator or designee, as needed to ensure that the reimbursement is made to the resource parent. Payment will be made on a reimbursement basis only. Typically, reimbursement for damages that occur as a result of normal age-appropriate activities (such as throwing a baseball during a game of catch, that result in a broken window) are not reimbursed, but resource parents may still submit for reimbursement consideration, if desired.

Missing Children

If a child runs away or is otherwise missing from the resource home and cannot be located, please notify the child's FSW and on-call worker (if after hours) within one (1) hour of the child's disappearance. If you have reason to believe the child was taken (rather than ran away on their own accord), please notify the child's FSW and on-call worker (if after-hours) immediately. You will need to provide a description of the clothes that the child was wearing as well as, any other relevant descriptors to aid the FSW in making a police report. DCFS will work with the National Center for Missing and Exploited Children (NCMEC) and local law enforcement to help locate the child.

Arrests

If a youth in foster care is arrested, please notify the FSW or On-Call Worker (if after-hours). The FSW will talk to law enforcement officials to find out where the youth is being held, the alleged offense, times of the hearings, and possible repercussions. The FSW will also determine if the youth understand their legal rights and has not unknowingly waived the rights to silence and to the presence of an attorney during any questioning.

The FSW will attempt to have the youth released back to your resource home if you are supportive of that arrangement and willing to sign a statement that the youth will be returned on the day of the hearing (detention, adjudication, or both). The youth's birth or legal parents (if parental rights are still in place) will be notified. The DHS attorney will also be notified. The public defender will be contacted to assure that the youth is protected and has an attorney to represent them in any delinquency or criminal proceedings. The FSW will attend court with the youth.

Allegations of Maltreatment

If any child in foster care is the subject (alleged offender or alleged victim) of an allegation of child maltreatment, the Child Abuse Hotline will notify the appropriate DCFS and CACD Executive Staff, as well as the Area Director for the DCFS service area in which the resource home (or other placement provider named in the report) is located. The DCFS Area Director will then ensure that the appropriate DCFS staff notify the child's family, the primary and secondary FSW for the child (if applicable), the Office of Chief Council (OCC) attorney, the child's CASA (if applicable), and the child's attorney ad litem. The attorney ad litem for any other children placed in the home will be notified as well.

The Arkansas State Police Crimes Against Children Division (CACD) will conduct all child maltreatment investigations (Priority I and II) involving a resource parent or household member of a resource home. A child maltreatment investigation must be completed within forty-five (45) business days from receipt of the report to the Child Abuse Hotline. Under certain circumstances, a fifteen (15) day extension may be requested to complete the investigation and make a determination of good cause.

Once an investigative determination has been made the alleged offender will receive a written notice in the mail stating the investigative determination. For true determinations, the alleged offender may request an administrative hearing within thirty (30) days of receipt of this notice, otherwise the offender's name will be placed in the Child Maltreatment Central Registry. The notice will provide instructions regarding how to request an administrative hearing.

During a child maltreatment investigation (involving any household member of a resource home, DCFS staff will conduct an individualized evaluation to assess the safety of the child within twenty-four (24) hours of the receipt of the report to determine if the child can safely remain in the home during the investigation. DCFS staff will try to coordinate this visit to the home to assess safety) with CACD staff.

If any health or safety factors are identified in the resource home, the child will be moved into another approved placement. However, if no health and safety factors are identified, and if it can be shown that it is in the best interest of the child currently placed in that resource home, a corrective action plan may be considered to allow the child in foster care to remain safely in a home involved in a child maltreatment report. A corrective action plan is designed to ensure the safety and well-being of the child in the home, as long as the concern was not directly related to maltreatment on the part of the resource parent(s).

If, after the initial safety evaluation is conducted (by DCFS staff), it is determined that there are no risks or safety factors present and a corrective action plan is not required while the investigation is being completed, the Area Director may approve leaving the child in the home, if it is in the best interest of the child. The Area Director will notify the Assistant Director of Community Services or designee, when a child is left in a resource home with a pending investigation for which a corrective action plan was not necessary.

While any resource home is being investigated because of a child maltreatment allegation, no additional children in foster care may be placed there (regardless of whether a corrective action plan was required or not).

Actions for Unsubstantiated Reports

All unsubstantiated reports involving resource homes must be reviewed by the Resource Family Review Committee (for more information see Appendix Six (6): Resource Family Review Committee) to discuss lifting the corrective action plan (if applicable), the placement of the child involved, and the availability of the resource home. Even if a child maltreatment report involving a resource home is unsubstantiated, DCFS retains the right to continue to leave the home on unavailable status or to close the resource home, as appropriate. Decisions will be made on a case-by-case basis and will be based on the best interest of the child. A face-to-face meeting will occur (between a DCFS representative and the resource parents) to discuss the closure of the home, at which time a written notice will also be provided.

Actions for True Maltreatment Reports Involving a Child in Foster Care, Pending Due Process

There may be some situations in which a true determination is made that involves a child who remained in the home during the investigation and who will continue to remain in the home until due process has been met. If these circumstances apply, the corrective action plan for the resource home, if applicable, as well as the overall health and safety of the child, will be reevaluated immediately (no later than twenty-four (24) hours from the time the investigative determination is made).

Regardless of whether the child remains in the home (with or without a corrective action plan in place) or is removed from the home, the resource home will remain on unavailable status until due process has been satisfied and the home's availability status is reassessed. Local staff will submit a recommendation regarding the resource home's availability status to the Resource Family Review Committee.

A staffing meeting will be held within three (3) business days of the true determination, so that all parties involved in the case and any other appropriate stakeholders may have input regarding the corrective action plan, if applicable, or the placement of the child.

If the child will be left in a home, with a true determination while due process is pending, then the DCFS Assistant Director of Community Services or designee will be notified. The DCFS Assistant Director of Community Services or designee will notify the DCFS Director of the decision. The DCFS Assistant Director of Community Services or designee will inform local staff if any changes to the corrective action plan or changes to the placement of the child are needed.

Actions for True Maltreatment Reports Involving a Child in Foster Care Upon Satisfaction of Due Process

If the resource home is still open and the child remains in the home, then upon satisfaction of due process, regardless of the result of the administrative hearing (if applicable), the safety

and well-being of each child who is in the home will be reassessed at a staffing. This staffing will be held within three (3) business days of the administrative hearing.

This staffing will allow all parties involved in the case and any other appropriate stakeholders to have input regarding the reassessment and the placement of the child, as applicable. Decisions will be made on a case-by-case basis and will ensure the best interest of the child. The recommendation(s) from this staffing will be submitted to the Assistant Director of Community Services for final approval.

If it can be shown that it is in the best interest of any child to remain in the home, an alternative compliance or policy waiver may be requested (if needed due to a true finding that is upheld) to allow the resource home to remain open to care for the child. The DCFS Director or designee must approve any alternative compliance or policy waiver needed to allow a resource home to remain open when a true finding is upheld.

If the child involved in the report can remain in the home because it is in the child's best interest to do so and the true finding is upheld at the administrative hearing, that home will remain on unavailable status. The resource home will then be closed once the child (who was allowed to stay in the home due to it being in the child's best interest) exits foster care or otherwise achieves permanency.

For resource homes that remain open, following a true determination that the resource family either chose not to appeal or had a true determination overturned, that resource home will be reevaluated by the Resource Worker, with input from the FSW, FSW Supervisor, Resource Worker Supervisor, and County Supervisor. The reevaluation will also determine what may be necessary (for example, additional training, revisions to the characteristics of children allowed to be placed in the home, or other changes) to ensure the health and safety of any and all children placed in the home.

Based on the results of the reevaluation, if the recommendation is to place the resource home back on available status, that request will be submitted to the Resource Family Review

Committee. The recommendation will also include what may be necessary (for example, additional training, revisions to the characteristics of children allowed to be placed in the home, or other changes) to ensure the health and safety of any and all children placed in the home.

DCFS retains the right to continue to leave the resource home on unavailable status or to close the resource home (as appropriate). A face-to-face meeting will occur with resource parents to discuss the closure of the home, and a written notice will also be provided.

If the resource home had been closed at some point during the investigative process and requests to re-open due to a determination being overturned on appeal, the Resource Worker will collaborate with other applicable local staff to determine if local staff members think it is an appropriate request for the home to be re-opened. If local staff decide to pursue re-opening a resource home, a request will be submitted to the Resource Family Review Committee.

Complaints Against the Resource Family Other than Child Maltreatment

Any complaint against the resource parent will immediately be brought to the attention of the DCFS Resource Supervisor or Area Director.

After the review by the DCFS Resource Supervisor or after the Area Director has determined the validity of the complaint, the resource parent will be advised, in writing, of the complaint, the outcome of the review, any corrective action to be made, and any other action that will be taken. An agreement will be made between the resource parents and their Resource Worker for corrective action. The resource parents must submit in writing the steps necessary to correct the deficiency within ten (10) days after notification from the appropriate decision-making personnel or submit application applying for an alternative compliance or policy waiver (see Appendix One (1) for more information). This corrective action plan must receive the approval of the Resource Supervisor or designee. Resource parents will notify their local DCFS Resource Worker that all corrective steps have been completed within thirty (30) days of the original findings being received. In the absence of said notification from the resource parents, it will be presumed that they have elected not to comply with the findings of the appropriate decision-making personnel. DCFS will offer any assistance available to correct

the problem. If the problem still exists after working with the resource parents, another meeting will be held to discuss closing the home.

Any complaint, regardless of nature, must be recorded in detail in the resource home record.

The report will include the following information:

- Date and nature of complaint;
- Source of complaint;
- Reaction of the resource family;
- Updated home assessment or summary;
- Services offered to the family as a result of the complaint;
- Conclusion of review;
- Corrective action needed; and
- Action taken as the result of compliance or non-compliance of any corrective actions put in place.

WHAT HAPPENS WHEN REUNIFICATION IS NOT ACHIEVED?

DCFS and all other team members, including the resource parents, will make every effort to help a family reunify. Unfortunately, there are sometimes circumstances when, despite the best efforts of all team members, reunification is not possible. At that point in time, the team will most likely work to put the concurrent goal in place.

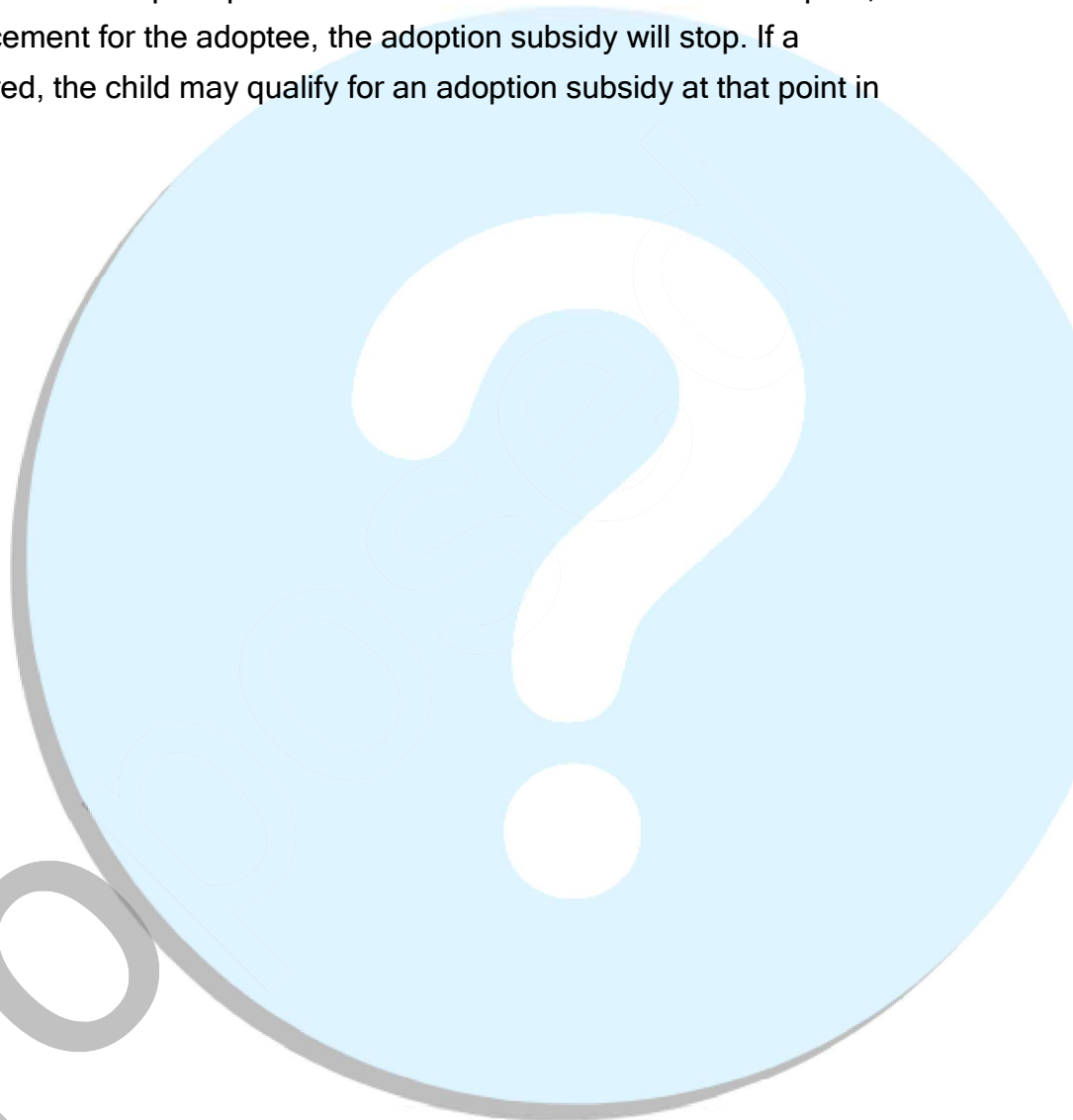
If reunification is no longer the goal in a case, there may be a recommendation to terminate parental rights (TPR). Once parental rights have been terminated, a child may be adopted, DCFS must explore a hierarchy of permanency options that gives preferential consideration to relatives and fictive kin. However, a resource parent may apply to DCFS to adopt a child in DHS custody whose parents' rights have been terminated. Homes that wish to adopt children from DHS custody first offer pre-adoptive services to these children. Resource homes that provide pre-adoptive service are those approved homes in which a child in DHS custody is placed for at least six (6) months after a petition for adoption is filed. The child is still considered to be in foster care during the six- month pre-adoptive period.

When resource parents are interested in adopting a child in foster care who has been residing in their home, DCFS will consider the benefits provided by them for that child. The child's wishes will also be considered. The FSW or other team members, such as the child's therapist, will speak with the child alone regarding this major decision in their life and help the child consider all the facts.

If a resource parent wishes to adopt a child in DHS custody who has been residing in their home, the resource parent should make this wish known by requesting and completing CFS-489: Resource Parent Request for Consideration to Adopt. The resource parent and the child's FSW will review this form together to determine if the resource parent meets the basic qualifications outlined on the form.

Resource parents who are selected to adopt a child in DHS custody will have the opportunity to apply for subsidy to support the child according to DCFS Adoption Subsidy Policy. Approved adoptive applicants should be aware that approved adoption subsidies do not automatically follow the child. If an adoptive parent became unable to care for the adoptee, resulting in a change in placement for the adoptee, the adoption subsidy will stop. If a subsequent adoption occurred, the child may qualify for an adoption subsidy at that point in time.

Pro



HOW DO I CONTINUE SERVING AS A RESOURCE PARENT?

To continue serving as a resource parent, you will have to continue to comply with all Minimum Licensing Standards and DCFS policies. This will be monitored through the mechanisms described below.

Quarterly Visits

We hope that resource parenting is a positive experience for you and that you choose to continue serving as a resource home! To make sure your home continues to meet Minimum Licensing Standards and DCFS policy requirements and to make sure you have the support you need as a resource parent, your Resource Worker will conduct at least quarterly visits to your home. At least one (1) quarterly visit to the resource home must be unannounced.

Annual Reevaluations

Your Resource Worker will also complete an annual reevaluation no later than the anniversary month of the resource home's approval to ensure that the home continues to meet all standards and policy requirements. Any resource home that does not continue to meet standards will be closed for placement of children in foster care if it cannot be remedied through a corrective action plan.

This reevaluation is necessary to ensure that physical changes in the home or family structure or perspective changes of resource family members do not adversely affect children placed in that home. After having experienced children in foster care in the home, a resource parent may have different views about resource parenting and the ability to work with different types of children. Quarterly visits are an opportunity to discuss such changes with your Resource Worker, but never hesitate to reach out to your Resource Worker between quarterly visits to discuss changes in your family, concerns, or questions. This is important information to support you as a resource parent and for DCFS to consider when placing or supervising a child in your home.

The resource parent reevaluation packet will be distributed to the resource parent and is to be completed by the Resource Worker prior to the annual reevaluation visit. The Resource Worker will make an appointment to conduct the reevaluation, review the completed packet, and speak with the resource family. The resource parent reevaluation form will be filed in the resource home record. A narrative entry will also be made in the record that reflects the resource worker's assessment of the following items:

- Continued compliance with Minimum Licensing Standards;
- Continuing education compliance;
- Maintenance of current CPR Certification and First Aid certification;
- How the family has met the needs of the children placed, including physical, emotional, educational, and recreational needs;
- Identification of persons in the home at the time of the reevaluation;
- Attitudes toward birth or legal parents;
- Objective evaluation of present and future capacity as a resource home, to include strengths and weaknesses;
- Health and financial status;
- Status update regarding other applicable requirements, such as physician's exam, criminal record checks, motor vehicle check, finances, and telephone;
- Age, sex, and special characteristics of children who should be placed in the home; and
- Any problems or challenges that need to be addressed.

The Resource Worker will notify the family of the result of the reevaluation in writing within ten (10) business days by sending a reevaluation letter.

In addition to the annual reevaluation, a resource home will also be reevaluated in the event of any of the following major life changes:

- Death or serious illness among the members of the resource family;
- Marriage, separation, or divorce of resource parents;
- Loss of or change in employment status by either resource parent;
- Change in residence;
- Suspected maltreatment of any child in the home;
- The addition of family members (such as, through birth, adoption, or aging relatives moving in);
- Any other major life changes for the resource family; or
- The Resource Worker will monitor the resource home at least quarterly for continued compliance with the minimum licensing standards and policy requirements.

In situations where an existing single resource parent plans to marry or otherwise cohabitate, a reevaluation will be conducted. DCFS staff must ensure that the future spouse or partner is interviewed to discuss their compliance with the “Personal Characteristics” outlined in this publication. The intended spouse or partner must complete and pass all background checks and attend pre-service training. All unmarried or unpartnered resource parents must inform their Resource Worker as soon as they are aware of any plans to marry or cohabitate, so that the application process can be initiated on the intended spouse or partner.

When existing resource parents plan to divorce, a reevaluation will be conducted to determine if one or both of the resource parents (depending on whether either elect to continue to serve as a resource parent) still meet all other standards of approval to ensure the health and safety of the children placed in the home.

Continuing Education

It is necessary to improve the skills of existing resource parents through on-going training, following pre-service training. To that end, resource parents are required to earn fifteen (15) hours of continuing education each year, beginning with their one-year anniversary of

approval as a resource home. The fifteen (15) hours of continuing education are not required during the first year of being opened as a resource home.

Training classes may cover a wide range of topics related to parenting, child development and behavior, and medical needs (to name just a few). Continuing education opportunities may be offered by educational systems (college, university, local school system, or others), the Arkansas Department of Health, Community Mental Health Centers, Resource Parent Associations, Resource Parent Continuing Education providers contracted through DCFS, and others. Area resource parent conferences are held annually (if funds are available) to give resource families the opportunity to obtain the required hours. Both in-state and out-of-state conferences may be considered training. Funds may be available to defray expenses for these educational opportunities. Prior approval is required from the local Resource Unit for reimbursement. If interested, please contact your Resource Worker.

Continuing education hours may be earned through in-person or classroom trainings, online courses, video, television programs, or books related to child abuse, child development, parenting, trauma-informed care, and other approved topics. Continuing education hours obtained through videos, books, online courses, or television programs must have prior approval by the assigned Resource Worker. The Resource Worker will inform resource parents of any training and educational opportunities known to them.

The same training classes cannot be repeated annually, whether based in a classroom or in other venues.

Resource parents are responsible for reporting participation in any non-DCFS sponsored training to the Resource Worker. Evidence of attendance (such as, a training certificate) will be needed to document participation.

If funds are available, travel expenses incurred when attending local and DCFS sponsored training may be reimbursable. This may include a set rate to help defray the cost of

babysitting expenses incurred for continuing education hours. A Resource Worker must be contacted prior to the training for approval of such expenses.

First Aid and CPR recertifications are required every two (2) years, but the First Aid and CPR recertification training may not be counted toward the required fifteen (15) hours continuing education.

Resource Parent Request to Close

If you do not want to continue serving as a resource parent (for any reason), you may request that your home be closed. Please contact your Resource Worker if you are considering closing your home. The Resource Worker will discuss the reasons for closure with you. The request for closure by resource parents will be confirmed in writing by the Resource Worker and sent to you.

Division's Decision to Close a Resource Home

If DCFS chooses to close a resource home, a face-to-face meeting will occur with resource parents to discuss the closure of the home and a written notice will also be provided. This notice will include information regarding the process for an internal review of adverse action (for additional information, see Appendix 7: Internal Review of Adverse Action Involving Resource Parents). The notice will also include a summary documenting the reasons for closure, as well as all efforts by the county office to rectify the problem. The final assessment and determination of closure will be made by the Resource Worker in collaboration with designated county staff, the Area Director and Central Office staff, as appropriate.

WHAT HAPPENS WHEN A CHILD LEAVES MY HOME?

If you serve as a resource parent for a child in foster care for any length of time, saying good-bye will be hard for many reasons. There are some common circumstances for which a child may leave your home:

- The child is returning to their parent's home.
- The child is moving to a permanent placement other than your home.
- The child needs a higher level of care.
- The child is reuniting with siblings in another home.
- The youth is transitioning to independent living such as a college dorm or their own apartment.
- A child maltreatment investigation occurs, warranting the child's removal.
- An agency decision is made based on other factors (such as a conflict between the child and resource family, or the inability of the resource parent to support reunification).
- An emergency makes it impossible to provide continued care or for other reasons, per your request (see "Request to Move a Child from Your Home" for more information).
- Closure of the resource home (see "Division's Decision to Close a Resource Home" for more information).

Regardless of the reason, when there is a plan for a child to move to another placement, you should receive a two (2) week written notice from the child's FSW. Although, sometimes, there is no advance notice because of an emergency situation involving the child's health, well-being, or upon written court order. The two (2) week notice will give you and the child time to say goodbye to each other and for the child to say goodbye to others who have become a part of their life while in your home (such as teachers and classmates, if the child

will be enrolled in a different school). Resource families often become attached to the children in their care, and the children, in turn, become attached to their resource family. You may feel angry, sad, or in denial when a child must leave your home. Allow time to grieve the loss of the child. You may want to talk with your spouse, a friend, an assigned worker, or another resource parent.

Some resource families may want to take a break between placements, while others prefer to work with another child right away. Take care of your own feelings in the same way you try to take care of the children in your care.

When a child leaves a resource home, you will play a role in helping the child with the transition. For example, you can:

- Explain and talk about the reasons and circumstances for the move.
- If the child is being reunified with their biological or legal parents or moving to another permanent home, take time to celebrate while also pointing out and working through feelings of grief and loss for you and the child.
- Include the child's parent or new resource family, if possible, not only in planning for the child's physical departure, but also in preparation for the emotional separation that will occur.
- Look at the child's life book (meaning, a compilation of any cards, mementos, photos, or similar sentimental materials) that you put together while the child was in your home and talk about how the life book will go with the child.

A child's clothing and personal belongings will always be sent with them when leaving a placement. In addition, the following records will need to stay with the child:

- Mental health, medical, and dental treatment records;
- Immunization records;
- School records;
- Report cards; and

- Life books.

Request to Move a Child from Your Home

Multiple placements for a child in foster care can have short and long-term negative effects on that child. As such, DCFS will work to support you in maintaining a child in your home until the case plan goals for that child and family are accomplished.

However, if it becomes necessary to request removal of a child who is placed in your home, please make every effort to give DCFS advanced notice. In addition, when a resource parent requests that a child in foster care be moved to another placement (excluding an emergency that places the child or a family member at risk of imminent harm), the resource parent must attend a staffing meeting to discuss whether the placement has the potential to be maintained and what services or assistance may be needed to stabilize the placement. The staffing will be held within forty-eight (48) hours of the resource parent's request to have the child removed from their home. The child in foster care, the child's attorney ad litem, and the child's assigned CASA (if one is appointed to the case) will be notified so that they can participate in the staffing and planning for the child's placement. If the placement cannot be stabilized, the resource parent will continue to provide for the child in care until an appropriate alternative placement is located. This will not be longer than five (5) business days after the staffing. These efforts will serve to reduce the number of placements of children in foster care for the reasons described above.

WHAT ELSE DO I NEED TO KNOW?

As stated in the welcome section of this handbook, this publication outlines only some of the basic information about opening as a resource home for the Division of Children and Family Services (DCFS) and caring for a child placed in your home. This document cannot capture everything that may arise during your time as a resource parent, but we hope it serves as a helpful reference. You are providing an incredible service to the children of Arkansas by making sure that children placed in your care have a safe and stable home as their families and the rest of their team (including you) work toward reunification. We cannot say enough about how much we want to support you in this role, so please reach out to DCFS staff for questions or concerns that are not addressed in this handbook.

Thank you for your service!

Pro

APPENDIX 1: ALTERNATIVE COMPLIANCE & POLICY WAIVER REQUESTS

“Policy Waiver” is defined as a request to deviate from the letter of the DCFS Policy and procedures. The DCFS Director or designee approves all policy waiver requests. The following require a policy waiver:

- A. Any misdemeanor convictions, except for minor traffic violations;
- B. Driving under the Influence (DUI) or Driving while Intoxicated (DWI);
- C. Any issues that are not in compliance with DCFS Policy; and
- D. Record of maltreatment.
 - a. However, any person found to have a record of child maltreatment will not only be reviewed by the DCFS Director or designee, but the DCFS Director or designee will also notify and consult with the Child Welfare Agency Review Board via the Division of Child Care and Early Childhood Education (DCCECE) Placement and Residential Licensing Unit (PRLU) Manager (as its designee regarding the policy waiver and any corrective action associated with the policy waiver).

“Alternative Compliance” (AC) is defined as a request for approval from the Child Welfare Agency Review Board (CWARB) to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. This includes regulations governing criminal background checks, and convictions for prohibited offenses.

Traffic violations (other than DUI or DWI) do not require a policy waiver or alternative compliance, as they are dealt with through the vehicle safety program. DUI and DWI violations require a Policy Waiver.

The standard protocol for requesting a policy waiver or an alternative compliance is the same, up until the point when the request is given to the DCFS Director or designee.

The protocol for standard policy waiver and alternative compliance requests are as follows:

The Family Service Worker (FSW) will:

- A. Determine if a policy waiver or alternative compliance will be requested, based on the FSW's professional judgment. Issues to take into consideration on criminal convictions and record of maltreatment include:
 - a. The nature and severity of the crime or maltreatment;
 - b. Consequences of the crime or maltreatment;
 - c. Frequency and duration of the crime or maltreatment and when the incident occurred;
 - d. Relationship between the crime or maltreatment and the health, safety, and welfare of any individual; and
 - e. For maltreatment offenses listed on the Child Maltreatment Central Registry, whether the offender is eligible to request removal from the Child Maltreatment Central Registry Review Team.
- B. If approval is recommended by the FSW Supervisor or designee, the FSW will request a policy waiver or an alternative compliance using the CFS-509-B: Request for Alternative Compliance or Policy Waiver and will attach all appropriate supporting documentation, as applicable:
 - a. Three (3) personal references;
 - b. CFS-446: In-Home Consultation Visit Report;
 - c. Current home study, if a home study has been completed;
 - d. Copy of the Child Maltreatment Central Registry Check, State Police Criminal Record Check, or FBI Background Check resulting in a hit; and
 - e. The police report and any other reports regarding any criminal charges or convictions must also be attached as documentation when an alternative compliance is requested for an excluded criminal offense.

The FSW Supervisor or designee will:

A. Determine if the requested policy waiver or alternative compliance is appropriate for approval within:

- a. Five (5) business days of receipt of the request for traditional applicants; or
- b. Three (3) business days for relatives and fictive kin.

Issues to take into consideration include, as applicable:

- i. The nature and severity of the crime or maltreatment;
- ii. Consequences of the crime or maltreatment;
- iii. Frequency and duration of the crime, or maltreatment and when the maltreatment occurred;
- iv. Relationship between the crime or maltreatment and the health, safety, and welfare of any individual, such as the:
 - 1. Age and vulnerability of the crime victim;
 - 2. Harm suffered by the victim; and
 - 3. Similarity between the victim and the person served by a child welfare agency;
- v. Time elapsed without a repeat of the same or similar event;
- vi. Documentation of successful completion of training or rehabilitation related to the incident; and
- vii. Any other information that is deemed relevant or relates to the applicant's ability to care for children.

B. If approved, the FSW Supervisor or designee will send it to the Area Director or designee.

C. If denied, the FSW Supervisor or designee will notify the FSW and the family.

The Area Director or designee will:

- A. Within five (5) business days of receipt of the request for traditional applicants or three (3) business days for relatives and fictive kin, determine if the requested policy waiver or alternative compliance is appropriate for approval based on the considerations previously outlined in this protocol.
 - a. If approved, the Area Director or designee will send it to the DCFS Director or designee.
 - b. If denied, the Area Director will return it to the FSW Supervisor or designee.
 - i. The FSW Supervisor will notify the FSW and the family.

At this point, the procedures for requesting a policy waiver differ from the procedures for requesting an alternative compliance.

Policy Waivers

When a policy waiver has been requested, the DCFS Director or designee will (within three (3) business days of receipt of the request):

- A. Deny any inappropriate request for a policy waiver and return it to the Area Director or designee; or
- B. Approve any appropriate request for a policy waiver.

The DCFS Director's or designee's final decision will be conveyed to the Area Director or designee for appropriate action.

Alternative Compliance

When an alternative compliance (AC) has been requested, the DCFS Director or designee will:

- A. Deny any inappropriate (AC) request and return it to the Area Director or designee within three (3) business days; or
- B. Approve an appropriate (AC) request, notify the Area Director or designee, and send it to the Placement and Residential Licensing Unit (PRLU) Manager or designee within in three (3) business days.

The PRLU Manager will:

- A. Review the AC request to ensure all required documents are in the packet;
- B. Request any missing documentation be submitted; and
- C. If all required documentation is included in the AC packet, place the AC request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board (CWARB).

The FSW who made the original (AC) request on behalf of the resource parent applicant or resource parent will:

- A. Notify the resource parent applicant or resource parent of the CWARB meeting at which their presence is required via CFS-510 sent by certified, restricted mail;
- B. Prepare the resource parent applicant or resource parent for what to expect at the CWARB meeting; and
- C. Appear with the resource parent at the CWARB meeting to answer questions.

The CWARB will give final approval or denial of the request for the alternative compliance.

Any applicant who does not meet all standards of approval for a resource home or for whom a policy waiver or alternative compliance is not approved will be denied. Reasons for which an applicant is denied will be made in the applicant file and record. The applicant will be informed in writing of the reasons for denial.

APPENDIX 2: NATIONAL FOSTER PARENT ASSOCIATION CODE OF ETHICS FOR RESOURCE PARENTS

Preamble

This mission of the National Foster Parent Association is to be a respected national voice for foster, kinship, and adoptive families through networking, education, and advocacy.

The Code of Ethics for Foster Parents begins by emphasizing that family foster care is an integral component of the child welfare system that:

- Recognizes the rights of children and youth to safe and nurturing relationships, intended to last a lifetime;
- Assists parents to regain custody or make alternative plans, for their children and youth, intended to last a lifetime;
- Emphasizes the developmental needs of children and youth;
- Provides all children with foster parents and child welfare professionals who have the skills to support safety, developmental, and permanency needs, and ensure supports necessary to develop and use these skills;
- Ensures that family foster care is part of a comprehensive, coordinated, inter-disciplinary service delivery system;
- Provides legal representation to ensure timely and skillful responses to service plans involving court proceedings;
- Collects, analyzes, and disseminates accurate and relevant data about children, youth, and all their families leading to informed policies, programs, and practices; and
- Supports family foster care (and all child welfare services) with effective and accountable leadership in city halls, governors' offices, national organizations, the judiciary, the federal government, Congress, and the White House.

Statement of Purpose

The Code of Ethics is a public statement by the National Foster Parent Association that sets clear expectations and principles to articulate basic values and guide practice. Family foster care is a public trust that requires foster parents (with essential supports from their agencies) to be dedicated to service for the welfare of the children in their care. All foster parents have

an obligation to maintain and improve the practice of fostering, continuously examine, use, and increase the knowledge upon which fostering is based, and perform the service of fostering with dignity, integrity, and competence.

Principles

Foster parenting requires competencies in the following domains:

Principle 1: Providing a safe and secure environment

Principle 2: Providing a loving, nurturing, and stable family care environment.

Principle 3: Modeling healthy family living to help children, youths, and families learn and practice skills for safe and supportive relationships.

Principle 4: Providing positive guidance that promotes self-respect while respecting culture, ethnicity, sexual orientation, gender identity or expression, and agency policy.

Principle 5: Promoting and supporting positive relationships among children, youths, and their families to the fullest possible extent.

Principle 6: Meeting physical and mental health care needs.

Principle 7: Promoting educational attainment and success.

Principle 8: Promoting social and emotional development.

Principle 9: Supporting permanency plans.

Principle 10: Growing as a foster parent - skill development and role clarification; participation in training, professional or skill development, and involvement with foster parent support organizations and associations.

Principle 11: Arranging activities to meet each children's individual recreational, cultural,

sexual orientation, gender identity or expression, and spiritual needs, commensurate with agency policy.

Principle 12: Preparing children and youths for self-sufficient and responsible adult lives.

Principle 13: Meeting and maintaining all licensing or approval requirements.

Principle 14: Advocating for resources to meet the unique needs of the children and youths in their care.

Principle 15: Collaborating with other foster parents and the child welfare team, building trust, and respecting confidentiality.

Principle 16: Promoting safety, well-being, permanence, and decisions that are in the best interest of children and youths.

Principle 17: Supporting relationships between children and, youths and their families.

Principle 18: Working as a team member.

APPENDIX 3: SERVING AS A RESOURCE PARENT FOR TEENS / THE TRANSITIONAL YOUTH SERVICES PROGRAM

Serving as resource parents for teens can bring its own set of rewards and challenges. There is a great need for resource parents who are not only willing to take teenagers, but who are also willing to nurture them and take time to work with them on gaining important life skills. For instance, you can teach a teen placed in your home how to check the oil in the car and change a tire.

Employment can be another way to help a teen learn necessary independent living skills. If a teen placed in your home is interested in having a job, you and the rest of the youth's team can discuss if employment would be appropriate for that particular youth based on the teen's level of maturity, current performance in school, and similar factors. You will need to help the teen file the appropriate income tax returns, if necessary.

Teens also need resource parents who will allow them to have normal age-appropriate experiences. For example, dating is a normal part of adolescence that is important for individual development and social adjustment. As a resource parent, you can help guide teens in your care on safe dating practices.

To help support resource parents who have teens placed with them, DCFS offers a variety of Transitional Youth Services (TYS) to assist youth who are fourteen (14) through twenty-one (21) years of age and in foster care in furthering their educational or vocational goals and in preparing them for adulthood. Training is provided in various formats (such as Life Skills Classes offered by the YYS Coordinator) and in accordance with an individual youth's case plan. Life Skills training is coordinated through FSWs and YYS Coordinators. The resource family may be reimbursed for transporting youth to Life Skills classes and other YYS activities.

Teenagers in foster care, including those whose goal is reunification, will have a Transitional Plan that encompasses all the life skills, resources, and future-planning for the youth's

successful transition into adult life. A Transitional Team should also be in place for teenagers in foster care, to help them achieve their Transition Plan and otherwise provide support to the team. Resource parents for teens in foster care are also expected to serve on the teenager's transitional team. Teens may also choose up to two (2) other members of their Transitional Team, who are not their FSW or resource parents.

PUB-49: Be Your Own Advocate - The Short List outlines the basic rights that teens in foster care have. The youth's FSW or TYS Coordinator should provide this to all youths who are fourteen (14) years of age and older and in foster care within thirty (30) days of entering foster care or within thirty (30) days of the youth's fourteenth birthday, whichever comes first.

PUB-50: Be Your Own Advocate! is a document that gives more details on being a teen in foster care. This publication is designed for teens in foster care but can also be a great reference for resource parents with teens placed in their home. For example, PUB-50: Be Your Own Advocate! details the process for a youth in foster care to obtain an Arkansas Learner's Permit or Intermediate Driver's License, with approval from the DCFS Director or designee. It also provides information regarding how a resource parent may apply for reimbursement for the additional cost to add a youth to their automobile insurance. Participation in these programs is voluntary. If you have teenagers placed in your home, please request a copy of PUBs 49 and 50 from your teen's FSW or TYS Coordinator. However, please also remember that these publications are only reference guides. You or the youth may contact the teen's FSW or TYS Coordinator for any questions or further explanations.

Teens who are in foster care on their eighteenth birthday have the option of participating in Extended Foster Care. To be eligible to stay in Extended Foster Care, youth must satisfy at least one (1) of the following requirements:

- Enrollment in secondary education or a program leading to an equivalent credential;
- Enrollment in an institution that provides post-secondary or vocational education;
- Participation in a program or activity designed to promote or remove barriers to, employment (such as, Job Corps);

- Employment that provides at least eighty (80) hours of working time per month; or
- Inability to do any of these activities due to a documented medical condition.

There are additional financial supports provided through Chafee funding for youth who elect to stay in Extended Foster Care. These are somewhat dependent on a specific youth's placement but can include start-up costs to help a youth move into their own apartment, assistance with car repairs, and one-time funding to defray the cost of a cell phone or minutes for an existing cell phone. For details about financial assistance to a youth in Extended Foster Care, please ask the FSW or TYS Coordinator for that youth.

Youth in Extended Foster Care can and are encouraged to live in a resource home as appropriate. For youth in Extended Foster Care who live in a resource home, an increased board payment may be considered. However, any increase on top of the standard board payment to the resource parent may be designed to help the young adult meet any needs they may have (instead of being designated for the resource parent to meet those needs on behalf of the young adult) and help the young adult learn how to budget.

Youth who participate in the Extended Foster Care Program but do not wish to remain in a resource home or other approved placement will require a Transitional Youth Services sponsor who is willing to:

- Serve as a member of the youth's Transitional Team.
- Provide support and guidance to the youth as they transition to adulthood (such as, assisting with decision-making regarding education, employment, or housing).
- Assist the youth with budgeting the youth's board payment.
- Help to ensure the youth meets at least one (1) of the following extended foster care requirements or has a viable plan in place to meet one (1) of the Extended Foster Care requirements:
 - Youth is enrolled in school; or
 - Youth is working at least eighty (80) hours per month; or

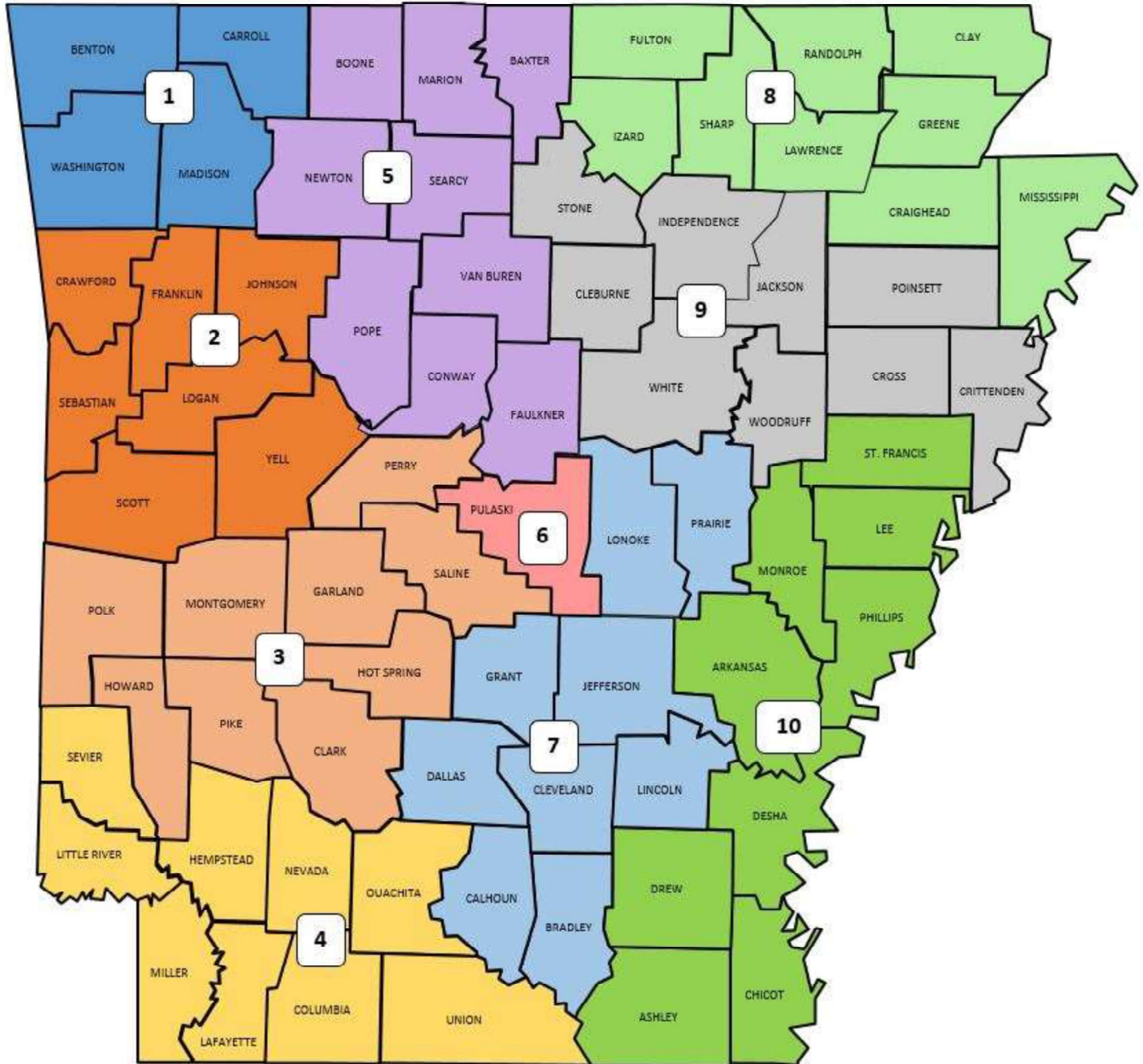
- Youth is enrolled in a program designed to remove barriers to employment (such as, Job Corps); or
 - Youth has a medical condition that prevents them from participating in any of the above activities.
- Complete State Police Criminal Record Checks and Child Maltreatment Central Registry Checks, if not already in place through another service provided by DCFS.

If interested, you may serve as both a resource parent for children placed in your home and a TYS Sponsor for a teenager you know who is participating in Extended Foster Care but who is not residing in your home.

In addition, youth who are eighteen (18) years of age and older and who are participating in Extended Foster Care may live with their TYS Sponsors (even if the TYS Sponsor is not an approved resource home) as appropriate, provided that:

- State Police Criminal Background and Child Maltreatment Registry checks are clear and up to date (meaning, within the past two (2) years);
- Visual inspection of the sponsor's home has been conducted;
- Area Director and the child's attorney ad litem approves the living arrangement with the sponsor; and
- A Transitional Team Meeting is held to ensure the sponsor understands their role and that individualized guidelines and expectations are established for any youths who will reside with their sponsor (meaning, curfews and responsibility for assisting with costs of living, if applicable, via the youth's board payment).

APPENDIX 4: DCFS SERVICE AREAS



APPENDIX 5: USEFUL LINKS FOR RESOURCE PARENTS

- Foster Arkansas- <http://www.fosterarkansas.org/>
- Project Zero- <http://www.theprojectzero.org/>
- Arkansas Heart Gallery- <http://www.theprojectzero.org/heart-gallery>
- Division of Children and Family Services Policy- <http://humanservices.arkansas.gov/dcfs/dcfsDocs/Master%20DCFS%20Policy.pdf>
- Resource Parent Portal- <https://dhs.arkansas.gov/dcfs/CHRISPWP/Default.aspx>
- Mileage Calculator- <https://dhs.arkansas.gov/milecalc/mileagecalculator.aspx>
- Better Beginnings- <http://www.arbetterbeginnings.com/>
- CDC Immunization Schedule:
 - Youth from birth to six (6) years of age
 - <https://www.cdc.gov/vaccines/parents/downloads/milestones-tracker.pdf>
 - Youth from seven (7) to eighteen (18) years of age
 - <https://www.cdc.gov/vaccines/schedules/easy-to-read/adolescent-easyread.html>

APPENDIX 6: RESOURCE FAMILY REVIEW COMMITTEE

The purpose of the Resource Family Review Committee is to serve as an assessment, review, and recommendation team for the approval or continuation of the provision of certain resource family services. The Resource Family Review Committee is designed to support the recruitment and retention of quality resource families that can meet the individualized needs and provide quality parenting for children placed in foster care. The committee approach enables DCFS to review issues before the committee on an impartial basis and prevents decision making based on the bias of a single individual.

The Resource Family Review Committee will make recommendations to the Division Director or designee, for the approval or continuation of the provision of resource family services received from the field. If a packet is sent to the Resource Family Review Committee for review and recommendation, the assumption is that the local staff who submitted the packet are in support of the request that is enclosed.

The Resource Family Review Committee is responsible for reviewing and making recommendations regarding:

- Requests to add or change a service on an open provider if there is any history of child maltreatment investigations involving the provider as an alleged offender (regardless of the outcome of the investigation or regardless of whether there is documentation indicating that the reason for closure was related to the investigation).
- Requests for continuing service of an Active Resource (Foster or Adoptive) Family Home when the family has an unsubstantiated child maltreatment investigation or when children have been moved.
- Requests for continuing service of an Active Resource (Foster or Adoptive) Family Home when the family has a substantiated child maltreatment investigation or when children have been moved. Further Information: Any time DCFS chooses to leave a

child or youth in a home with a true determination (at the time of the determination and upon satisfaction of due process), the Assistant Director of Community Services must approve that choice. However, for homes that either do not appeal the determination or have the determination overturned and want to be made available again for other children, this request must be reviewed by the Resource Family Review Committee.

- Requests related to Therapeutic Resource Family Home and Private License Provider Agencies involved in child maltreatment investigations.
- Resource home closures resulting in an Adverse Action Request. The Foster Care Manager will present these to the committee. The Foster Care Manager will make a recommendation to the Assistant Director of Placement Support and Community Outreach and notify the resource parents in writing of the decision of the review within ten (10) business days of receiving the Resource Review Committee decision.

APPENDIX 7: INTERNAL REVIEW OF ADVERSE ACTION INVOLVING RESOURCE PARENTS

Resource parents have the right to request an internal review of decisions affecting them and the operation of their home. Most problems can be resolved at the local level if the resource parents and FSW keep each other informed about matters of interest and importance pertaining to the child. It is important for resource parents and FSWs to discuss and work out issues and problems as they occur.

All complaints may not be appropriate for an internal review, and while the county office will make every effort to reconcile disagreements or other issues, some situations may not be reconcilable, such as those decisions made by the county office based on current policy and procedure.

Examples of issues to take through an Internal Review are:

- Closure of a resource home due to any circumstance;
- Removal of a child from the resource home without appropriate cause or without appropriate notice;
- Failure by DCFS to share appropriate information;
- Failure by DCFS to provide necessary support; or
- Failure by DCFS to keep the terms of the initial written agreement with the resource home (CFS-462: Initial Resource Home Agreement and CFS-462A: Resource Home Agreement Addendum).

Prior to requesting an internal review at the Central Office level, resource parents should request an informal discussion of the problem with the FSW or Resource Worker and their immediate supervisor. If, after the resource parents have discussed the issue related to the

adverse action with the FSW or Resource Worker and their supervisor, they still believe DCFS failed to uphold its policies, then the resource parents must submit a request in writing to their Area Director to review the adverse action. This request must be submitted to the Area Director thirty (30) calendar days from the date the adverse action occurred. The Area Director will schedule a meeting with the resource parents within ten (10) business days of the receipt of the written request and attempt to resolve the problem.

If the resource parents are not satisfied with the results of the meeting with the Area Director, the resource parents may request an internal review from the Foster Care Manager or designee in Central Office to present their case. A copy of the request and written reports of the previous two (2) meetings will be forwarded to the Foster Care Manager or designee. The Foster Care Manager will present the information to the Resource Review Committee for the review of the adverse action.

The Foster Care Manager will notify the resource parents in writing of the decision of the review within ten (10) business days of receiving the Resource Review Committee decision.

APPENDIX 8: CONTACT INFORMATION

In the event you need to contact the Division of Children and Family Services (DCFS) for any reason, please call the persons listed below in the order they are listed. For example, if you cannot reach the Family Service Worker or you need to speak to a supervisor, then you should call the second name listed.

Family Service Worker	Resource Worker
Email	Email
Work Phone	Work Phone
Cell Phone	Cell Phone
FSW Supervisor	Transitional Services Coordinator (if applicable)
Email	Email
Work Phone	Work Phone
Cell Phone	Cell Phone

County Supervisor or Area Director	Child's Adoption Specialist (if applicable)
Email	Email
Work Phone	Work Phone
Cell Phone	Cell Phone
Attorney Ad Litem	Family's Adoption Specialist (if applicable)
Email	Email
Work Phone	Work Phone
Cell Phone	Cell Phone