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DEFINITIONS OF CAREGIVERS AND CHILD-CARE PROVIDERS: Two categories are "caregivers" and "Child-care providers" and the following titles identify each under one of these 2 categories.

- A. **Caregivers** are verified individuals, including:
 - 1) Foster Parents
 - 2) Foster Parents providing respite placements
 - 3) Foster Parents providing respite placements verified with other agencies
 - 4) Full Time Caregivers providing routine assistance to foster families.
 - a. If providing Respite Placements in their own home, including completing a verification certificate, home study, agency home report, and information on all other household members living in the home.
 - b. If verified to provide care in the foster home only are exempt from requirements related to the home environment. If providing the respite in their own home they must meet the requirements of a verified foster parent. The full time Caregiver will not be listed on the verification certificate of the foster parent.
 - c. Examples of Routine Assistance include but are not limited to:
 - 1) Lives in the home to assist the caregiver on a daily basis
 - 2) Does not live in the home, but cares for the children in the foster home for 3 hours every day after school, until the Verified Caregiver is home from work
 - 3) Performs direct care duties such as transporting the child to school on a daily basis or transporting to medical visits
- B. <u>Child-Care Providers</u>: complete the approval process within the agency but are not verified including:
 - 1) Babysitters
 - 2) Overnight Care Providers
 - 3) Full time Caregiver

TYPES OF CARE:

- A. Babysitting- Temporarily caring for a child in foster care for no more than 12 consecutive hours.

 1) Emergency Babysitter: In the event of an extreme emergency, babysitting for foster children may be obtained by neighbor or friend without having any of the above requirements. The choice of selecting the emergency babysitter will be at the discretion of the foster parents. The foster parent must give GUIDING LIGHT staff the contact information for the emergency babysitter as soon as possible within an hour after leaving the children. If the foster parent has to attend a funeral or has to travel because a family member is seriously ill, this does not constitute approval to use an emergency babysitter. Examples of Emergency situations include the Caregiver or foster child living in the home have to be taken to the hospital.
- B. <u>Overnight care</u> Temporary care provided for a child in foster care by someone other than the foster parents with whom the child is placed for <u>more than 12 consecutive hours</u>, <u>but no more than 72 consecutive hours</u>
- C. <u>Intermediate Alternative Care (IAC)</u> is also known as <u>Respite Placements</u>. Respite placements are a planned alternative 24-hour care that has the purpose of providing relief to the child's primary caregiver, provide foster parents additional supports for child care responsibilities, increase retention of foster parents, decrease the number of moves children experience, and promote permanency needs for children in foster care. Respite Placement (IAC) is a placement that <u>lasts more than 72 hours, less than 14 days, and up to 40 days annually per child</u>. A Respite Placement (IAC) that is made because a child's foster home is under investigation for abuse or neglect does not count toward nor is it limited by the time frames noted. However, these placements are limited to a maximum of 60 days.
- 1) <u>Non-Emergency Respite Placements</u>-Guiding Light strongly supports and encourages caregivers to take a break from their responsibilities as caregivers each quarter. Therefore, caregivers serving Basic Children are provided with payment up to \$140 each quarter. Those caregivers serving Moderate, Specialized & Intense Service Level children are provided with payments up to \$200 each quarter for this "get-away." Unused dollars

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may not be accumulated each month. Payment does not exceed actual expenses incurred. Respite placement is provided for caregivers in which it is intended that the client will return. In situations in which the foster child does not return, "respite placement" does not apply; the receiving facility is either a subsequent placement and/or emergency placement. Payments are arranged and provided by the GUIDING LIGHT caregivers hiring the respite provider. Payment to the respite placement is NOT the responsibility of GUIDING LIGHT and is NOT made directly to the respite placement by GUIDING LIGHT. Caregivers who wish to seek reimbursement for respite placement expenses incurred, must submit appropriate documentation to the Executive Director/CPMS within 30 days of the respite placement in order to be reimbursed.

- 2) <u>Emergency Respite Placements</u> require the foster children to be immediately removed from the Primary Caregiver, the GUIDING LIGHT Executive Director/CPMS will arrange respite for the family. The GUIDING LIGHT EXECUTIVE DIRECTOR must approve Emergency Respite. The EXECUTIVE DIRECTOR/CPMS will arrange respite in a verified Caregiver's home. The verified Caregiver will receive reimburses from GUIDING LIGHT according to the child's LOC for a maximum of 14 days or 60 days if emergency removal was requested due to an investigation.
- 3) MINIMUM AGE:
 - A. Babysitter (Less than 12 hours) Age 18
 - B. Overnight Care Provider- Age 21
 - C. Respite Provider/IAC Provider- Age 21
- 4) **MINIMUM CHILD CARE EXPERIENCE:** Babysitters, Overnight Care Providers, and Respite Providers must have a minimum of six month experience providing child care or related experience. Documented in an observation form applicable for Specialized and Intense level of care children. In addition to training orientation applicable for PMN children only.
- 5) **PRE SERVICE TRAINING:** Babysitters, Overnight Care Providers, and Respite Providers must complete the following training:
 - A. Agency Orientation
 - B. DFPS Required Training Topics: Trauma Informed Care, Recognizing & Reporting Youth Sexual Abuse, Administering Psychotropic Medications, Reporting Abuse & Neglect Caregivers, Need for Normalcy, Medical Consent.
 - C. Guiding Light Medication Policy Training
 - D. Adult, Child, and Infant CPR and First Aid (LVN, RN or medical license current can be used for the First Aid Portion of the Requirement)
 - E. Additional training required for Respite Providers and Overnight Care Providers:
 - 1) 8 hours of EBI if caring for childcare services, BAS, MOD children
 - 2) 16 hours of EBI if caring for treatment services, SPE, INT children. Respite Providers caring for PMN only are exempt from this requirement.
 - F. Exemptions applicable if a Provider has documented experience from specific trainings, if experience and justification is documented in the record.
- 6) **ANNUAL TRAINING:** Upon completion of initial certification requirements, each Provider must remain in "good standing" with the agency, demonstrating understanding and adherence to agency policies and procedures and compliance with TDFPS Minimum Standards Babysitters, Overnight Care Providers, and Respite Providers must complete the following training:
 - A. Adult, Child, and Infant CPR and First Aid (LVN, RN or medical license current can be used for the First Aid Portion of the Requirement)

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- B. Additional training required for Respite and Overnight Care Providers:
 - 1. 2 Hour Medication Administration, 2.5 hours of Medical Consent and 1 hour Medication Policy
 - 2. 8 Hours EBI (Providers caring for PMN only are exempt from this requirement)
 - 3. Treatment Team may exempt a Provider from specific trainings, if experience and justification is documented in the record.
- 7. **REFERENCE & BACKGROUND INFORMATION:** Babysitters, Overnight Care Providers, and Respite Providers must complete and provide agency with documentation of:
 - A. Driver's license
 - B. Vehicle Liability Insurance
 - C. Social Security Number
 - D. A release to conduct a criminal history check, child abuse/neglect
 - E. FBI fingerprint- CBCU Eligible or Eligible with Provisional
 - F. TB Skin Test or Chest X-ray if applicable
- 8. **NUMBER OF CHILDREN AND TYPE OF PROVIDER:** The number of children that a Babysitter, Overnight Care Provider, and Respite Provider can care for must be within child/caregiver ratios applicable to the foster home.
 - A. Babysitters can babysit for:
 - 1) Children (ages 0-17) that are receiving child care services with BAS and MOD LOC.
 - 2) Children (ages 0-17) who are treatment services, SPE, or INT LOC must use a verified Babysitter, Overnight Care, or Respite Provider to provide babysitting.
 - B. Overnight Care Providers can provide overnight care for:
 - Children (ages O-17) that are receiving child care and treatment services children with BAS, MOD, SPE LOC.
 - 2) Children (ages 0-17) who are treatment services INT level of care must use a verified Overnight Care Provider to provide overnight care.
 - C. Respite Providers can provide respite care
 - 1) Children (ages O-17) that are receiving child care and treatment services children with BAS, MOD. SPE LOC.
 - 2) Children (ages 0-17) who are treatment services INT level of care must use a verified Caregiver or Respite Provider to provide respite care (IAC).
- 9. **INFORMATION SHARIING:** To ensure continuity of care, the caregiver will share the following information with the respite provider before placing the child in the home:
 - A. Specific needs of a child, including:
 - 1) All psychiatric or medical treatment currently being provided;
 - 2) Medication regimen and medication instructions;
 - 3) Authorization for medical treatment;
 - 4) Psychological care
 - 5) Sleeping Information
 - 6) Discipline Information
 - 7) Relevant Appointments such as family and sibling visits
 - 8) Safety Plans
 - 9) History of sexual victimization or sexual aggression as identified in 2279 and Attachment A.

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- Any other needs or expectations including treatment needs of a child that should be addressed by the respite child-care services provider;
- B. Non-routine events taking place in the life of the child
- C. Emergency contact information, including the:
 - Child's physician(s);
 - 2) Child's parent; and
 - 3) GUIDING LIGHT's telephone number; and
 - GUIDING LIGHT Crisis telephone number, Executive Director, Janelle Holland 254-379-1853
- D. The child's history that may affect the provider's ability to provide care for the child, including:
 - 1) Background of abuse and/or neglect;
 - 2) Physical aggression or sexual behavior problems;
 - 3) Fire setting;
 - 4) Maiming or killing animals;
 - 5) Suicidal ideations and attempts; and
 - 6) Run-away behaviors
- 10. **TREATMENT SERVICES:** Specific care instructions for children with treatment services must be shared with all providers, including each child's supervision plan.
- 11. **METHOD OF CONTACT:** The Caregiver must provide the Babysitter, Overnight Care Provider, or Respite Provider with a cell phone number to be reached during the times of services.

12. GUIDING LIGHT REVIEW AND APPROVAL OF ARRANGEMENTS:

- A. Babysitters- CPMS must review and approve each babysitter that the Caregiver utilizes in the foster home. CPMS will document the approval of the arrangements in the foster home record. Foster parent must give GUIDING LIGHT a 24 hour notice prior to using a Babysitter.
 - 1) A Babysitter must not administer any form of emergency behavior intervention (restraints); only qualified Caregivers are allowed to restrain a child.
 - Only a person trained in and authorized to administer prescription medications are allowed to administer medication to a child in care. Therefore, if a Babysitter administers medication, the Babysitter must be trained in Medication Administration and Medication Policy prior to babysitting. This training must be current and is required annually.
- B. Overnight Care Providers- CPMS must review and approve each Overnight Care Provider that the Caregiver utilizes in the foster home. CPMS will document the approval of the arrangements in the foster home record. GUIDING LIGHT Caregivers must give GUIDING LIGHT a 24 hour notice prior to using an Overnight Care Provider.
- C. Respite Providers- CPMS must review and approve each Overnight Care Provider that the Caregiver utilizes in the foster home to ensure the health and safety of all children in respite placement care.
 - GUIDING LIGHT Caregivers (foster parents) are to notify GUIDING LIGHT two weeks in advance prior to taking a respite break.
 - 2) The GUIDING LIGHT case manager will notify and obtain written approval from the child's CPS caseworker before leaving children in the care of a respite provider, even if the respite occurs in the home of the primary Caregiver.
 - 3) GUIDING LIGHT must inform the child of the plan for respite, including the intended time of stay.

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- 4) GUIDING LIGHT CPMS must determine that the respite placement will not cause a conflict in care for any child that has already been placed in the foster home. This includes ensuring appropriate sleeping arrangements, comfortable bedding and living arrangements that are behavioral, gender, and age appropriate. The record of the foster home providing respite placement services must include documentation of this determination.
- If a child needs Respite Placements (IAC) for more than 14 consecutive days or more than 60 days for an abuse or neglect investigation, this is considered a new placement and will not be respite placement. With TDFPS written approval a child may stay in respite placement longer than 14 days.
- When a child finishes a Respite Placement (IAC), he may not return to respite placement for at least 10 days.
- 7) Respite Placement (IAC) must not be used if it could be detrimental to the child.
- 8) The verified foster home may not provide respite placement for more than:
 - a) 14 consecutive days; or
 - b) 60 days annually (unless meets the qualifications of Section M)
 - c) This rule does not apply to foster homes that exclusively provide Respite Child Care Services.
- 9) When a region is using a respite placement in another region the Executive Director/CPMS needs to be contacted by the Executive Director/CPMS for the region needing respite placement to insure that the home is in compliance and able to provide respite placement. Background checks must be completed in the Region that services are being provided.
- D. Therapeutic Caregivers verified with Other Child-Placing Agencies who provide Respite Placements (IAC):
 - 1) GUIDING LIGHT caregivers may use caregivers from other child-placing agencies for respite placement if pre-authorized by the other agency's CPMS and GUIDING LIGHT CPMS.
 - The GUIDING LIGHT caregiver must notify their Child Placement Staff of this request <u>at least two weeks</u> in advance of each utilization of the non-GUIDING LIGHT caregiver. This will allow the GUIDING LIGHT Child Placement Staff sufficient time to contact the other child-placing agency to get verbal approval from the other agency and confirmation that the non-GUIDING LIGHT foster home is in "good standing" with its respective agency, and ensure that the home is an appropriate respite situation for the children in GUIDING LIGHT care.
 - 3) GUIDING LIGHT Child Placement Staff will then notify the GUIDING LIGHT foster family of GUIDING LIGHT's decision regarding the authorization of use. The GUIDING LIGHT Child Placement Staff will document the contact and verification of non-GUIDING LIGHT foster home's good standing on agency contact log.
 - 4) Guidelines for provision of respite services when verified homes from other agencies provide respite care for GUIDING LIGHT homes include: verified homes providing respite placements will be expected to complete forms for documentation of behavior and administration of medication according to the policies of GUIDING LIGHT, such as recreation logs, behavior logs, incident reports and medication logs.
 - 5) GUIDING LIGHT foster home requesting respite placement will provide all necessary forms for documentation reports and medication logs.
 - 6) Verified homes providing respite placement, as well as GUIDING LIGHT homes requesting respite, will provide telephone to each other and their respective agencies of an on-call staff person who may be reached in case of an emergency.